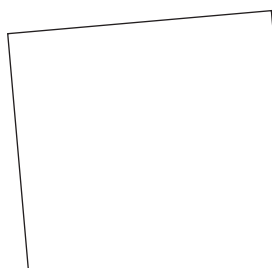


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Journal Philosophy

The European Journal of Homelessness provides a critical analysis of policy and practice on homelessness in Europe for policy makers, practitioners, researchers and academics. The aim is to stimulate debate on homelessness and housing exclusion at the European level and to facilitate the development of a stronger evidential base for policy development and innovation. The journal seeks to give international exposure to significant national, regional and local developments and to provide a forum for comparative analysis of policy and practice in preventing and tackling homelessness in Europe. The journal will also assess the lessons for Europe, which can be derived from policy, practice and research from elsewhere.

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Editorial

Fostering robust debates on the policies and practices that can end homelessness are central to the founding principles of the *European Journal of Homelessness*, and we hope this latest edition of the Journal provides our diverse audience with information and perspectives that can inform their practices and policy making.

A key topic of discussion over the past year has been the applicability of Housing First in the member states of the European Union, and for those convinced of its applicability, how to translate the principles of Housing First into practice, and in particular, how significant fidelity to original New York model is in achieving successful outcomes. The publication of the *Housing First Europe* report (Busch-Geertsema, 2013) in June and the hosting of a conference on this topic in Amsterdam in the same month was a significant milestone in debating Housing First in Europe. A further conference in September in Berlin on the topic of '*Housing First. What's Second?*' ensured that this critical dialogue was both maintained and expanded, whilst a third Housing First conference in Lisbon, attracting some 200 delegates in early December 2013, demonstrated the on-going interest amongst service providers and policy makers in policy and practice transfer. In addition a peer-review of the Danish Housing First Homelessness Strategy was held in Copenhagen in November.

These on-going debates on the utility of Housing First models for the member states of the European Union are judiciously reviewed by Pleace and Bretherton, who conclude that the increasingly robust evidence on the effectiveness of Housing First warrants widespread adoption across the EU. In Vol. 6(2) of the Journal, Maureen Crane and colleagues suggested that preparation for housing was helpful in sustaining tenancies and we include responses by Ingrid Sahlin, Ronni Michelle Greenwood, Ana Stefanic, Jeremy Swain and Volker Busch Geertsema to allow for a productive debate on the usefulness of preparing homeless people for housing in temporary accommodation, rather than placing them directly in housing. Nicholas Pleace and Deborah K. Padgett also respond to an earlier article in the Journal on the importance of consumer choice in Housing First and to what degree this represents a strategic governmentalisation tactic to ensure personal responsibility. Both Padgett and Pleace argue, with different emphases, that choice is important and can bring significant benefits to homeless people, but that all service provision models should be open to, and welcome constructive criticism.

Certainly, the up-date on the Housing First based Danish Homelessness Strategy by Lars Benjaminsen provides solid empirical evidence for the effectiveness of a Housing First based approach to ending homelessness, and outlines a clear methodology for measuring and evaluating the effectiveness of Housing First type responses to homelessness. This review notes that while the overall extent of homelessness increased in Denmark between 2009 and 2012, this is attributed to both macro-structural factors on the one hand, and practice provision on the other. Significantly, the municipalities that utilised Housing First approaches to homelessness showed only modest increases in general, compared to municipalities that utilised 'housing ready' models of practice. Crucial to this process, is of course how we define homelessness, and Kate Amore provides further sophisticated refinements to the ETHOS typology in her latest contribution to the Journal. Defining homelessness is not only an empirical project, but also a normative one, and the debate generated by the ETHOS typology is an excellent example of the reflective debates that are crucial to reaching a consensus on the definition and measurement of homelessness.

While an increasing number of member states are adopting Housing First / Housing Led policies, translating these, often national level, policies into practice, has proven in some cases to be problematic for operational and financial reasons. In her review of the Portuguese Homelessness Strategy, Isabel Baptista, traces the evolution of the Strategy and the substantial implementation difficulties to-date. Similarly, the O'Neill paper notes the difficulties of accessing sufficient good quality accommodation units when attempting to deliver housing first policies in Northern Ireland, as do Boroka Fehér and Ana Balogi in relation to Budapest. This is an emerging important topic of research, where detailed case studies of progress and blockages in implementing Housing First / Housing Led policies are required for policy learning and implementation practice.

Despite the progress made across the member states in adopting inclusive policies for homeless people, as Rita Bence and Tessza Udvarahelyi outline, policies of social exclusion utilising repressive criminal justice policies are also evident, as demonstrated in the case study of Hungary, where despite vigorous and compelling domestic and international opposition, it is now a criminal offence to live in public spaces across Hungary. Homeless people rough sleeping can now be fined, and if convicted twice within a six-month period, may be committed to jail. This blatant policy of repression is fortunately relatively rare across member states (for a recent overview, see Fernández Evangelista and Jones, 2013), but the thoughtful responses from Don Mitchell, Steve Gaetz, Marie-Eve Sylvestre, Evelyn Dyb, Joe Doherty and Jürgen van Mahs to an article by Eoin O'Sullivan in Vol 7(1) of the Journal on this topic shows that a range of more subtle and invidious mechanisms of repression

are also evident. Such subtle policies can include regulations on having a 'local connection' to access to homelessness services as shown by Michel Planijie and Mathijus Tuynman in their case study of the Netherlands.

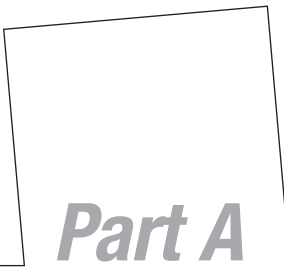
The implementation of repressive policies for homeless people in Hungary is largely domestic in origin, although some cite the broader trans-national influence of neo-liberalism, but what is happening in Greece, as outlined by Olga Theodorikaakou, Alexandra Aalamanou and Kyriakos Katsadoros is largely driven by external actors. The impact of the 'austerity measures' imposed on the Greek population in producing a new generation of homeless people is a timely reminder of the structural basis for much contemporary homelessness. When social safety nets disappear, immiserization, marginalisation and homelessness will result. Policies that promote active inclusion rather than criminalisation and exclusion achieve more sustainable and ultimately just outcomes, as demonstrated by Simon Güntner and Jamie Harding in their comparison of active inclusion measures in Newcastle in England and Hamburg in Germany.

The degree to which an enhanced role for the European Commission would strengthen evidence based solutions to homelessness and promote inclusionary policy instruments is dealt with by Liz Gosme in her article on the 'Europeanisation' of homelessness policies. She argues that tackling homelessness is now an integrated part of social inclusion agenda at an EU level, and that a number of countries, far from complaining of EU interference in social policy matters, are calling on the EU to support national governments in their efforts to address social issues such as homelessness. Achieving progress on homelessness across the European Union was the basis for hosting a meeting of Ministers with responsibility for homelessness, under the auspices of the Irish Presidency, in the Irish College in Leuven in March. Aidan Culhane and Niamh Randall provide a unique insight into both the process of achieving consensus amongst diverse member states, and the tangible outcomes of the meeting in agreeing key principles in such areas as knowledge sharing, funding, research and innovation and advice.

One of the difficulties in achieving an EU consensus on the most appropriate and effective policies to end homelessness, is that different member states are at varying levels in terms of their knowledge of the nature and extent of homelessness and their policy evolution. For some member states, ensuring that large numbers of people are not required to sleep on the streets drives very practical responses to homelessness, often in the form of large scale congregate facilities. For other member states, the policy priority is how to close such congregate facilities. To assist the development of knowledge on the extent and nature of homelessness in member states with a limited tradition of research, the Journal has sought to provide



Articles



Part A



The Case for Housing First in the European Union: A Critical Evaluation of Concerns about Effectiveness

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› **Abstract_** *Housing First is now central to strategic responses to homelessness across much of the North of the European Union and is also being piloted in other member states. Concerns exist that a lack of 'fidelity', i.e. model drift away from the original New York Pathways to Housing approach may undermine the effectiveness of European 'Housing First' services. There are also some concerns that Housing First is being 'sold' to policymakers via a selective use of evidence that makes it appear more effective than is actually the case. This article suggests a typology of Housing First services as a framework within which to test concerns about fidelity and the strength of the evidence base. The article concludes that services that follow the broad operational principles of a Housing First approach are highly effective in a range of national contexts. While there are some gaps in evidence, particularly in relation to single-site models of Housing First, very high fidelity to the original Pathways to Housing approach does not appear to be necessary to end chronic homelessness at high rates. Equally, while there are some other limitations in the evidence base for Housing First that should be addressed, centred on what happens to chronically homeless people following re-housing, research and policy attention should also focus on the potential of the Housing First philosophy to significantly reduce chronic homelessness across the European Union.*

› **Keywords_** *Housing First, chronic homelessness, fidelity, policy transfer*

Introduction

Housing First provides immediate or near-immediate re-housing without any requirement that high need, chronically homeless people, show themselves to be 'housing ready' before they are re-housed. Support to sustain their housing and improve their health, well-being and social integration is provided to service users in their own home, and use of that support is something over which service users exercise considerable choice and control (Tsemberis, 2010a). Two sets of concerns have emerged as the influence of the Housing First approach has increased.

The first is that the Housing First concept has lost 'fidelity', and that a wide range of services calling themselves 'Housing First', that only partially reflect the original New York Pathways to Housing approach, have appeared across America and across the European Union (EU) (Pleace, 2012; Busch-Geertsema, 2013; Nelson *et al*, 2014; Watson *et al*, 2013). For advocates of Housing First, the concern is that the original model has become 'lost' and that many diluted and distorted versions of 'Housing First' are being produced that may be less effective than the original Pathways to Housing model (Tsemberis, 2011; Pleace and Bretherton, 2013a).

The second set of concerns, which are again found in both the EU and America, is that Housing First is *less* effective than it is being made to appear. These arguments centre on the idea that the evidence base being used to promote Housing First is restricted, or selective, and that other, actually better evidenced homelessness services, are in danger of being replaced primarily as a result of the effective 'marketing' of Housing First (Rosenheck, 2010; Stanhope and Dunn, 2011). There are also concerns about the strength and completeness of the evidence base, centred on the robustness of the evidence and what some regard as some unanswered questions about Housing First (McNaughton-Nicholls and Atherton, 2011; Pleace, 2011; Johnson *et al*, 2012).

This paper proposes a typology of Housing First as a framework to help test both these two concerns. The paper first explores the issues around model drift and the evidence base in more detail, then proposes a typology and then uses that typology to explore the validity of the concerns about using Housing First in the EU.

Model Drift in Housing First

Housing First can appear like a textbook example of model drift. Most 'Housing First' services do not reflect the detailed operation of the original New York Pathways to Housing model, both within America and within the EU (Pearson *et al*, 2009; Busch-Geertsema, 2013). Low 'fidelity' with the original Pathways to Housing model is a potential concern in three respects. First, the successes of Housing First

were initially achieved with a specific approach, drifting away from that approach, either by diluting it or distorting it, risks a lessening of effectiveness (Tsemberis, 2011; Pleace and Bretherton, 2013a; Stefancic *et al*, 2013; Nelson *et al*, 2014; Watson *et al*, 2013). Second, if various versions of Housing First emerge, some of which fail because they have low fidelity with the Pathways to Housing approach, the success of the 'Housing First' service model will be questioned, not because the original model failed, but because low fidelity versions of Housing First failed (Stefancic *et al*, 2013). Third, from a strategic and policy implementation perspective, it has to be clear what is meant by 'Housing First' (Pleace, 2011). If effective Housing First strategies are to be implemented, there needs to be a consistent, definable, service model around which to plan, and it has been argued that details of exactly how Housing First works are absent from some of the evidence base (Tabol *et al*, 2009).

In New York, Pathways to Housing has developed a 'fidelity checklist' which is intended to ensure that new Housing First developments in America follow the structure of the original model. In 2010, a 244-page manual describing the Pathways model was published (Tsemberis, 2010b). Pathways to Housing is also undertaking research and evaluation that seeks to prove that closer fidelity to the Pathways Housing First (PHF) model is associated with better service outcomes for Housing First projects (Stefancic *et al*, 2013). In addition, Pathways to Housing provides training and consulting services, including project visits to 'test' fidelity with the original model.

Concerns about fidelity to the original model are multiple, but can be explored through two main examples. The first is 'dilution' of the concept, which effectively means services that call themselves 'Housing First' but which do not offer the extent, duration or intensity of support offered by the original Pathways to Housing model. A key concern is the replacement of existing, relatively expensive, homelessness services with supposedly 'superior' Housing First approaches that are, in fact, limited, low intensity, low cost services with only limited fidelity to the original Pathways to Housing model (Pleace and Bretherton, 2013a). The second concern is around modification of the original Pathways to Housing model, which 'distorts' that model and thereby undermines effectiveness (Nelson *et al*, 2014; Watson *et al*, 2013). The most significant debate about modification of the original Housing First approach at present is that which centres on the merits and demerits of 'scattered' and 'single-site' versions of Housing First (Tsemberis, 2011).

The Evidence Base for Housing First

Housing First has some severe critics, who doubt the strength and also validity and trustworthiness of the evidence base. Part of this criticism centres on the idea that Housing First is a package that is being very effectively 'marketed' in a politically palatable form, using a combination of carefully selected evidence and, also, selective targeting on specific groups of homeless people to deliver what appear to be spectacularly positive outcomes (Kertesz *et al*, 2009; Rosenheck, 2010; Stanhope and Dunn, 2011; Edens *et al*, 2011; Groton, 2013).

Allegations of research bias centre on Sam Tsemberis, the original founder of Housing First, being involved in writing a significant amount of the research, which was focused on the original Pathways to Housing service. There is also a group of American academics, who routinely publish with Tsemberis, who collectively account for a considerable amount of what has been published about Housing First in America (Groton, 2013).

The alleged skewing of research centres on arguments that Housing First targets groups of chronically homeless people that will enhance apparent rates of success. It has been claimed that Housing First services avoid engaging with the very highest need groups, for example avoiding chronically homeless people with the most severely problematic drug and alcohol use, effectively 'cherry picking' lower need service users who will tend to have better outcomes (Kertesz *et al*, 2009).

Another dimension to these criticisms is that Housing First actually achieves 'less' than staircase or linear residential treatment services. The argument here is that Housing First has more restricted goals, whereas a staircase service, when successful, produces a sober, treatment compliant, 'housing-ready' individual, Housing First delivers 'only' housing sustainment. According to these arguments, the goals of Housing First are lower than for staircase services, meaning that like is not being compared with like (Kertesz *et al*, 2009; Stanhope and Dunn, 2011).

Other criticism of the quality of the evidence base for Housing First centres on the extent and quality of evidence showing that Housing First delivers gains in social integration, health and well-being and generates cost savings, after ending chronic homelessness (Edens *et al*, 2011; Kertesz *et al*, 2009; Lipton *et al*, 2000; McNaughton-Nicolls and Atherton, 2011; Johnson *et al*, 2012; Tabol *et al*, 2009; Tsai *et al*, 2010).

Questions have also been raised about the extent to which Housing First can generate cost offsets, i.e. reducing costs for other services such as emergency medical services, homeless shelters and the criminal justice system. Although there can be savings, some research suggests Housing First services are significantly more *cost effective* than a staircase approach in reducing chronic homelessness, but do not necessarily actually save substantial amounts of money (Culhane, 2008;

Kertesz and Weiner, 2009; Rosenheck, 2010; Poulin *et al*, 2011). It has been argued that Housing First, by engaging with chronically homeless people with severe mental illness, has produced impressive seeming cost offsets just by delivering housing sustainment in ordinary housing. Keeping service users sustainably housed in ordinary apartments was often a much cheaper option than the alternative would be if they were not in apartments, i.e. emergency accommodation, hospital or prison. Yet not all homeless people would be likely to be in hospital, prison or other high cost environments if they were not housed in an apartment. Cost savings from Housing First were evident for chronically homeless people, yet those savings might not be there to the same extent, or even appear at all, for other groups of homeless people with lower needs (Rosenheck, 2010).

These arguments assert that Housing First is advancing further and faster than it should, in America, Europe and elsewhere. There are also concerns that Housing First is eclipsing earlier models, including the linear residential treatment or staircase approach, that some view as actually better evidenced, more proven service responses, to chronic homelessness (Kertesz *et al*, 2009).

A Housing First Typology

One way in which to test the existing concerns about model drift and the evidence base is to develop a Housing First typology. Building a typology provides a framework within which to assess the extent and meaning of model drift, and also allows exploration of the merits and demerits of the various manifestations of Housing First. The fidelity checklist and Housing First manual produced by Pathways to Housing would seem the logical place to start in building a typology (Tsemberis, 2010b). However, there is a difficulty in using the fidelity checklist and the detailed description of the Pathways to Housing approach as the main reference point for an internationally employable typology of Housing First. The difficulty is essentially that Pathways to Housing is American. Johnson *et al* (2012, pp.2-3) note the following about using Housing First services in Australia and the same argument applies equally in relation to the EU:

Housing First programs in Australia (and elsewhere) draw on operational principles and are delivered under conditions that differ to the Pathways to Housing program. The existence of ‘program drift’ here and abroad reminds us that no Australian Housing First program can or should be an exact replica of the original Pathways to Housing program.

Detailed replication of the original Pathways to Housing model is not possible across different cultures and welfare regimes. Variations in context and resources always have to be allowed for. Contextual differences mean that Pathways to Housing itself operates slightly differently in Washington D.C. (Tsemberis *et al*, 2012), Vermont and New York (Tsemberis, 2010b).

Any Housing First typology therefore has to be relatively broad if it is to be a practical framework for defining and comparing Housing First services at international level. One way around inevitable differences in detailed operation, which mean, for example, that a European Housing First model will *always* differ from the Pathways to Housing model in at least some details of operation, is to move away from a comparison point that is based on *exact* replication. A broader typology, based on core operational characteristics and philosophy may then, at least theoretically, be developed (Pleace, 2012).

Defining Housing First

There is evidence that Canadian, Danish, Dutch, Finnish, French, Portuguese and British Housing First services all share core operational characteristics and a philosophy with the Pathways to Housing model (Goering *et al*, 2012; Busch-Geertsema, 2013; Tainio and Fredriksson, 2009; Kaakinen, 2012; DIHAL 2012; Pleace and Bretherton, 2013b). The core service delivery and philosophy of all these Housing First services includes:

- Housing and services are 'separated'. Accessing and staying in housing is not conditional on treatment compliance. Housing is not 'earned'; it is a 'right'. Housing is self-contained and there is security of tenure.
- Choice is respected and is extensively exercised by service users. There is no requirement for treatment compliance and no requirement for abstinence from drugs and alcohol to access housing, or to remain within housing. Service users help plan their own support. The main goal of Housing First is to lessen risks to housing sustainment and social integration, centred on poor mental and physical health and a lack of social inclusion, by giving service users a sense of ontological security, centred on maximising their capacity to live a 'normal' life in their own home.
- Support is *intensive*, with a high staff to service user ratio and frequent contact between staff and service users. Housing is combined with support services focusing on mental and physical health, problematic drug and alcohol use and sometimes also on education, employment, recreation and interpersonal skills. Both direct provision of health and support services through an assertive community treatment (ACT) team and/or indirect provision of required health and support through intensive case management (ICM) can be used.

- Service users require intensive support because they are chronically homeless. This means they have recurrent and/or sustained experience of living rough (street homelessness) and/or sustained or recurrent stays in emergency and other dedicated 'homeless' temporary supported accommodation for short-term use or which is a part of a staircase system. Service users have high rates of severe mental illness, poor physical health, problematic drug and alcohol use and may also exhibit low-level criminality and nuisance behaviour.
- A harm reduction approach is used. Housing First services assume that ending problematic drug and alcohol use can be a long and complex process. The priority is to minimise damage to well-being.
- Support is open-ended and flexible, there is no requirement placed on service users to achieve specific goals and support is not confined to a fixed period of time.

Importantly, all the Housing First services that exhibit these characteristics report similar levels of success in ending chronic homelessness. Rates of housing sustainment are high, often in excess of 80 per cent of service users, across the various Housing First services with these characteristics working in different countries (Pleace, 2012; Busch-Geertsema, 2013).

Different types of Housing First services

Housing First services must have the characteristics listed above. To be an example of Housing First a service must:

- enable choice
- provide *intensive* support (using ACT/ICM),
- be targeted on chronically homeless people
- use a harm reduction framework
- have open-ended, not time restricted, access to support services.
- Separate housing and care, i.e. access to, and retention of, housing is not conditional on treatment compliance.

The original Pathways model is a scattered site approach, using mobile support teams to support people in ordinary housing in ordinary neighbourhoods and systematically avoiding placing service users next to each other. It is 'Housing First' because it directly places people in ordinary housing and then begins providing support centred on resettlement, reintegration and housing sustainment. However, single-site 'Housing First' services also exist. This involves building new, purpose-built apartment blocks, or the remodelling of an existing communal homelessness service, such as an emergency shelter or hostel, into self-contained apartments.

This model is widely used in Finland and is also employed in America (Tainio and Fredriksson, 2009; Kaakinen, 2012; Pearson *et al*, 2009; Larimer *et al*, 2009; Collins *et al*, 2012a; Collins *et al* 2012b)

In early 2012, one of the authors suggested that Housing First services, with these core characteristics, could exist in three basic forms. These were the Pathways model itself, Pathways Housing First (PHF) and also single-site Communal Housing First (CHF) using communal or congregate apartments, and finally as 'Housing First Light' (HFL) services. The HFL category included services that used ICM, but did not directly provide care, health and drug and alcohol services through an ACT team. As a category, HFL was meant to cover what was essentially the spectrum of Housing First services without ACT teams (Pleace, 2012).

This typology was sometimes used as a means of describing the range of Housing First service models (Kaakinen, 2012; O'Sullivan, 2012). However, significant criticism was also levelled at this typology. It was argued that the HFL category, in using the term 'light', strongly implied what was being referred to was a (much) lower intensity service model than Housing First actually delivered. This meant that the HFL category sounded like it included services that were too *low* in intensity to be regarded as Housing First, whereas it actually referred to Housing First ICM services, which are a relatively *intensive* service. (Busch-Geertsema, 2013).

With hindsight, it is clear that the HFL category lacked precision and was not clearly labelled. An alternative typology is therefore required. Reviewing the current evidence base, not all of which was available in 2012, the following broad typology of Housing First services is suggested:

- Scattered Housing First (SHF) includes services following the operating principles of Housing First defined above. These forms of Housing First are, delivered by mobile support teams to people in scattered, ordinary housing.
- Communal Housing First (CHF) includes single site services following the operating principles of Housing First, in which people live in a cluster of communal or congregate housing.

A single-site Housing First service could have far more in common with the original Pathways to Housing model than it does with a staircase service, if it follows the core operational principles of a Housing First service defined above (Pleace, 2012). The potential extent of philosophical and operational overlap between communal and scattered Housing First services arguably makes it difficult to *not* regard CHF services as being a form of 'Housing First' (Kaakinen, 2012; Pleace, 2012).

However, the difference in the housing employed by SHF and CHF models is of sufficient potential importance that to regard SHF and CHF as essentially the same may not be logical. The original Pathways to Housing model is centred on choice, including choice about where to live, and also, importantly, on 'normalisation' and generating ontological security, i.e. the idea of bringing chronically homeless people back into society through supporting them to have an ordinary community life, in ordinary housing, surrounded by ordinary neighbours (Padgett, 2007; Tsemberis, 2010a). Pursuing these goals through a CHF model may raise potential challenges, because service users are living in congregate, physically separated, dedicated blocks of apartments not as the neighbours of other ordinary citizens in ordinary apartments (Tsemberis, 2011). This point is revisited below.

Lower intensity services that follow some, or several, of the broad principles of Housing First, but which offer *only* low intensity support, are *not* forms of Housing First. Here, the suggestion made by the jury of the 2010 European Consensus Conference on Homelessness (ECCH), to differentiate between Housing First and other 'Housing Led' services is useful (ECCH, 2011). The jury advanced the idea that 'Housing First' refers to services close to the original Pathways to Housing model and that other, related, service models that broadly reflect the Housing First approach should be referred to as 'housing-led' (ECCH, 2011, p.14).

The term 'housing-led' can describe low intensity services, that mirror Housing First in a broad sense, but which do not provide support services of sufficient intensity, range or duration to be regarded as Housing First. Equally, lower intensity services targeted on lower need groups of homeless people, who are not chronically homeless, would fall into this broad category. Housing-led services, providing low intensity support with housing sustainment to homeless people, can be found in the USA (Caton *et al*, 2007; Goldfinger *et al*, 1999; Hickert and Taylor, 2011; Tabol *et al*, 2009) and the EU and Canada (Pleace, 1997; Franklin, 1999; Pleace and Quilgars, 2003; Busch-Geertsema, 2005; Bowpitt and Harding, 2008; Lomax and Netto, 2008; Waegemakers-Schiff and Rook, 2012). Some evidence suggests that lower intensity housing-led services, which broadly reflect a Housing First approach, are more effective in ending homelessness than institutional service models designed to make homeless people 'housing ready' (Pleace, 2011).

The definition of Housing First suggested in this paper broadly parallels the US Federal Government operational definition of 'Housing First', which also defines Housing First as services employing a shared, core philosophy (USICH, 2010). In his recent overview of the *Housing First Europe* research programme, Busch-Geertsema also argues that the organisation of support can vary and that it is adherence to a core philosophy that defines what is 'Housing First' (2013, p.19).

Revisiting Concerns About Model Drift and the Evidence Base

Model drift

It can be shown, using the typology suggested above, that Housing First services exist in coherent, definable and directly *comparable* forms across Canada, America and the EU. Housing First cannot be reduced to a collection of diverse, unrelated services that all happen to be called the same thing. Housing First exists as a *sector*, of services following the same operational principles that end chronic homelessness at very high and also very similar rates (Pearson *et al*, 2007; Pearson *et al*, 2009; Goering *et al*, 2012; Pleace, 2012; Busch-Geertsema, 2013).

While the evidence supports the idea of Housing First services as a coherent whole, it also somewhat undermines arguments that *very* close fidelity with the original Pathways to Housing model is always necessary to achieve success (Tsemberis, 2011; Stefancic *et al* 2013; 4*et al*, 2013). Philosophical consistency and broad operational similarity seems to be required, but the evidence base suggests that the *detail* of Housing First service operation can differ from the original Pathways to Housing model, without there necessarily being any detrimental effects on performance in ending chronic homelessness. In practical terms, this means Housing First services, while sharing a core philosophy and operating principles, can exist at different scales, with different service mixes and all achieve high rates of success (Pleace, 2012; Busch-Geertsema, 2013).

Having said this, there are also some indications that a gap exists within the evidence base with respect to single-site (CHF) and scattered Housing First (SHF) services. This may be important, as while CHF and SHF services differ in only one key respect, i.e. using single-site or scattered housing, that difference is increasingly viewed as important. Concerns have been expressed that CHF services can be difficult to manage, and sometimes to live in, because they communally house groups of formerly chronically homeless people with high rates of severe mental illness and problematic drug and alcohol use. The concerns that normalisation and ontological security, which are core goals of the Pathways to Housing model, are arguably more difficult to achieve if people are 'separated' from the surrounding neighbourhood, in the sense of living in a visibly different form of accommodation, as they are in CHF services, have already been noted. People using CHF also may have no choice where to live, which again potentially undermines the emphasis on choice and control within SHF models. There are also some indications that outcomes for single-site (CHF) Housing First services may be more variable, or are sometimes poorer, than for scattered Housing First models (SHF) (Kettunen and Granfelt, 2011; Tsemberis, 2011; Kettunen, 2012; Johnson *et al*, 2012; Busch-Geertsema, 2013; Benjaminsen, 2013).

Against this, there are those who see advantages in single-site CHF approaches, such as being surrounded by peers with shared experiences who can provide social support, against risking being socially isolated in an ordinary apartment, and also logistical advantages in service delivery to a single site. There is also, it has been argued, the potential to productively re-use a mass of homelessness service 'real estate' by converting emergency shelters and hostels into CHF provision, quickly and affordably providing apartments to chronically homeless people with an attached 'Housing First' service. Success in reducing problematic alcohol consumption has been reported for CHF services in America (Larimer *et al*, 2009; Collins *et al*, 2012a; Collins *et al*, 2012b; Jost *et al*, 2011; Kaakinen, 2012).

It can therefore be argued that while Housing First clearly exists as a coherent sector, there is not yet enough data available to fully test those differences in operation that do exist. Alongside the need for more data on the relative merits and demerits of CHF and SHF models, other operational differences, for example comparing models offering ACT and ICM with those offering only ICM or only ACT services, also need to be more fully explored. Housing First is a strategically coherent and comparable whole, but understanding more about how differences in detailed operation may influence service outcomes nevertheless remains important.

The typology of Housing First proposed in this paper can also serve as a means by which to filter out services that are *not* examples of Housing First, helping to clearly frame a discussion of the extent and nature of model drift. Any service within any form of staircase, i.e. which has requirements and expectations to follow a strictly enforced, timetabled programme of behavioural modification towards 'housing readiness' cannot be regarded as a form of Housing First. Mobile support services that directly place service users in ordinary housing, but which seek treatment compliance or abstinence are also *not* 'Housing First' and nor are mobile support services that follow someone out of a staircase project, or which act as the final 'step' of a staircase service, a form of Housing First. Critical Time Intervention (CTI) should also not be regarded as Housing First because it is time limited and has an emphasis on structured behavioural modification that reflects the staircase model. Lastly, while aspects of their operation may reflect Housing First, Housing Led Services, because they are low intensity services working with a range of homeless people, including those with lower needs, are also not a form of Housing First.

Testing the evidence base

As noted, research on Housing First is finding consistent success for Housing First services in terms of ending chronic homelessness across a range of countries, including several EU member states (Goering *et al*, 2012; Busch-Geertsema, 2012; Pleace and Bretherton, 2013b). Arguing that Housing First only 'appears' to work in America because it is targeting specific groups, or making selective use of

evidence, becomes much more difficult when, for example, French or Danish Housing First services, working in radically different contexts, achieve very similar results to those reported in America (DIHAL, 2012; Benjaminsen, 2013). Housing First in Denmark, the Netherlands, Canada and elsewhere ends chronic homelessness for 80 per cent or more of service users, very similar to the levels of success reported in America (Pleace, 2012; Goering *et al*, 2012; Benjaminsen, 2013; Busch-Geertsema, 2013; Wewerinke *et al*, 2013).

The argument that Housing First achieves 'less', because it does not deliver 'housing readiness' to the extent a staircase model does, is equally difficult to sustain. The review of evidence that informed the typology proposed in this paper clearly shows that Housing First services do seek to deliver improvements in health, well-being and socioeconomic integration. Suggesting that comparing Housing First and staircase services, in terms of their *ultimate* objectives, is not comparing 'like with like', is incorrect. Indeed it has been pointed out elsewhere that Housing First has some broad goals in common with staircase services with respect to social integration, health and well-being, even though the methods employed are very different (Hansen Löffstrand and Juhila, 2012). Consideration also still has to be given to the significantly lower effectiveness of staircase services in ending chronic homelessness. The evidence raising ethical concerns about how some staircase services treat chronically homeless people as deliberately 'deviant' individuals whose behaviour is in need of 'correction' should also continue to be born in mind (Dordick, 2002; Sahlin, 2005; Busch-Geertsema and Sahlin, 2007; Pleace, 2008).

There is evidence of positive outcomes from Housing First in terms of health, well-being and socioeconomic integration (Gulcur *et al*, 2003; Yanos *et al*, 2004; Greenwood *et al*, 2005; Padgett *et al*, 2006; Padgett, 2007; Gilmer *et al*, 2010; Tsemberis, 2010a; Pleace and Quilgars, 2003). However, there is also evidence of Housing First services achieving mixed outcomes in these areas (Pearson *et al*, 2007; Johnson *et al*, 2012; Busch-Geertsema, 2013), which does suggest scope for some additional research looking more closely at these outcomes (McNaughton-Nicholls and Atherton, 2011; Pleace and Quilgars, 2003).

In addition, some of the assumptions built into some American Housing First models require some further testing in a European context. One example from the Pathways to Housing model is an assumption that weekly visits and sub-tenancy agreements (meaning that service users hold a sub-lease while Pathways to Housing holds the full tenancy) are necessary to ensure housing sustainment (Tsemberis, 2010b; Hansen Löffstrand and Juhila, 2012). European Housing First services are in operation that immediately give a full tenancy to a service user and

also give them total control over contact with support services, seemingly without negative effects on housing outcomes (Busch-Geertsema, 2013; Pleace and Bretherton, 2013b).

One final issue is the criticism centred on the robustness of the evidence base for Housing First. From a clinical evaluation standpoint, it has been argued that there is *no* robust research at all on any form of housing related service intervention for people with mental health problems, homeless or otherwise (Chilvers *et al*, 2009) because a truly robust experimental evaluation (randomised control trial) has not been conducted. Yet this is not the view of Federal Government in America which regards Housing First as being evidence-based (USICH, 2010). While debates about the robustness of evidence will continue (Tabol *et al*, 2009), concerns expressed that involvement of advocates of Housing First in research can also be countered by the argument that much of what has been published by those authors has been subject to academic peer review (Pleace, 2012).

The Case for Housing First in Europe

Housing First is not presented by advocates of the approach as a panacea for chronic homelessness, nor as being a complete solution to meeting all the support needs or socioeconomic marginalisation that can accompany experiences of recurrent and sustained homelessness (Tsemberis, 2012). No homelessness service can be realistically be expected to consistently deliver a solution to all the consequences of homelessness (Busch-Geertsema, 2012). Poverty, poor health, limited opportunities and other problems may sometimes remain, but chronic homelessness – the unique distress of often highly vulnerable people being without any settled accommodation on a recurrent or sustained basis – is often ended by Housing First. As Padgett (2007, p.1934) notes:

Having a ‘home’ may not guarantee recovery in the future, but it does afford a stable platform for re-creating a less stigmatized, normalized life in the present.

Housing First has become influential at EU level (ECCH, 2011; European Commission, 2013), just as it has in America (USICH, 2010). However, choice, which underpins Housing First, is something that always needs to be borne in mind. This is not just in terms of Housing First itself. For example, a choice-led response to homelessness would allow chronically homeless people to choose service options other than Housing First that may suit them better (Pleace and Bretherton, 2013a). Alongside this, using Housing First as a core strategy in the Europe Union should not mean that it ‘replaces’ all other services, as a mix of approaches, of which Housing First is one part, may be required at strategic level (Rosenheck, 2010; Pleace, 2011).

The current evidence base suggests that Housing First is scalable. Services which follow the core philosophy and operational principles of Housing First appear to achieve similarly high levels of effectiveness in ending chronic homelessness. This is important in the context of the EU, because it makes Housing First potentially adaptable to different contexts. Within the EU, responses to homelessness can range from a small number of basic emergency shelters run by voluntary and faith-based organisations, through to what are the most coordinated, well-funded and comprehensive homelessness service networks found anywhere in the world. To at least some extent, it looks like Housing First can sometimes be scaled to suit these different environments.

Lower and higher cost variants of Housing First can be developed, reflecting the resources that are available, allowing for wide ranging use of the approach in the EU. This said, it is always important to bear in mind that even the resources for a relatively lower cost Housing First service will quite often *not* be available in several EU member states. This is another reason not to think solely in terms of Housing First when planning responses to chronic homelessness and to continue to consider how it may be possible to enhance other, much lower cost, services.

There are also the barriers to Housing First to consider. Adoption of Housing First means challenging widely pervasive pre-modern and Neo-Liberal constructs of chronic homelessness as a 'self-inflicted' condition which is to be solved through coerced behavioural modification (O'Sullivan, 2008). Equally, even a partial adoption of Housing First responses means some existing homelessness services, in which service providing agencies and others have a vested interest, will come under threat, which will in turn result in some political resistance (Houard, 2011). Even in America, where Housing First dominates strategic debate about homelessness at national, state and city level, Housing First is not the main form of service provision, staircase systems often remain in place (Collins *et al*, 2012a and b), and while the tide is in favour of Housing First, opposition is unlikely to simply stop (Groton, 2013)

This article has asserted that two of the key arguments underpinning criticism of the wider use of Housing First in the EU do not stand up to serious scrutiny. The first argument is that model drift makes Housing First services vary to the extent that there is a danger of inconsistent results and building strategies around a service model that is not clearly defined. The current evidence is that adherence to shared operational principles is sufficient for Housing First services to achieve consistently high success rates in ending chronic homelessness. Total fidelity with the Pathways to Housing approach is neither necessary, nor indeed practical, given variations in context.

The second argument is that Housing First should be treated with caution, because it is not as effective as claimed, because there is selectively, bias and gaps in the evidence used to support it. However, there is now simply too much evidence that Housing First services, with shared operating principles, are effective in a range of contexts across different countries for this critique to really be taken seriously. The evidence base is not however perfect. For example, more data on the relative effectiveness of SHF and CHF models and on what Housing First can practically deliver in terms of long-term health and well-being and socioeconomic integration would be useful. Ultimately, however, Housing First consistently ends homelessness at a high rate and this means it has to be given serious consideration as a core strategy to reduce chronic homelessness across the EU.

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The Europeanisation of Homelessness Policy: Myth or Reality?

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› **Abstract** *This article explores the use of soft governance mechanisms in EU policy-making, with a specific focus on mechanisms used in EU social policy (i.e. the Social Open Method of Coordination or “Social OMC”), and their impact on homelessness policy development. The extent of Europeanisation of homeless policy is assessed, looking at Europeanisation processes on three levels: top-down influencing of national and sub-national processes, bottom-up dynamics influencing EU policy, and cross-national horizontal developments. While tangible Europeanisation is emerging in the field of homelessness through increasing interplay between local, national and EU level governance on homelessness, the Social OMC model is currently failing to produce substantive policy coordination and benchmarking. However, a cluster of countries willingly strengthening transnational cooperation on homelessness could benefit from EU support for the necessary reforms to end homelessness.*

› **Key Words** *Social Open Method of Co-ordination, Europeanisation, governance of homelessness*

Introduction

Times have changed since 2001 when the Social Open Method of Coordination (Social OMC) was launched, a Europe-driven coordination of social policies through voluntary cooperation of EU Member States benchmarking their social inclusion/pension/healthcare policies and sharing innovative practices.¹ Social OMC in this article focuses on the social inclusion stream of the process (as opposed to the pensions and healthcare streams), which is the main framework in which policies to tackle poverty and social exclusion evolved at EU level until 2010. The expertise developed and progress made in the Social OMC led to consensus on key EU policy priorities such as homelessness, child poverty, active inclusion (Frazer *et al*, 2010; Vanhercke and Lelie, 2012; Daly, 2013; Barcevičius *et al*, forthcoming). These priorities were re-iterated in the European Commission's Social Investment Package, which includes guidelines for Member States to integrate action in all these fields in their annual National Reform Programmes (European Commission, 2013b).

Over the last ten years, homelessness policy in Europe has undergone significant changes (Busch-Geertsema *et al*, 2010). The drivers of these changes have varied across countries from the economic context, elected officials, the scientific community, activists, markets, lobbyists, and many others. This article looks specifically at the role of Europe as a driver of homelessness policy changes, namely through the Social OMC. Empirical evidence gathered over the last ten years from direct participation in the Social OMC, from various documents and from talking to different "stakeholders", shows that tackling homelessness has gone from being a marginal issue on the EU social inclusion agenda to being a key area of EU social policy. The Europeanising impact of the Social OMC on homelessness policy-making across EU countries is examined, and conclusions are drawn on the results and consequences for the Social OMC and homeless policy formulation.

Three-tier Europeanisation through the Social OMC

In the field of social policy, the EU and Member States have a shared competence through the Open Method of Coordination where the EU coordinates policies, which are developed at national (and sub-national) level in accordance with local needs (Kvist and Saari, 2007). This means the goal is not to harmonise social policies across Europe. Rather, national policies are developed according to local social inclusion needs, while the Social OMC framework exists to coordinate and support (sub-) national policies using a number of tools. Whereas Frazer *et al* (2010)

¹ The Open Method of Coordination was first used in 1999 with the launch of the European Employment Strategy, and then codified as a mode of European governance by the Portuguese Presidency in March 2000 (Council of the EU, 2000a).

refer to the policy coordination *process* when defining the Social OMC, Vanhercke and Lelie (2012) refer more specifically to the Social OMC policy *toolkit* for benchmarking policies as including the following: common objectives, key priorities, indicators, expert and EU stakeholder networks, different types of peer reviews (including through OMC 'projects'), and finally the joint reports which evaluated national policies and include 'recommendations' to Member States. In their paper, they argue that these OMC tools are not only more dynamic than usually acknowledged, but also more diversified.

In their 2011 position on the future of the OMC, the Social Protection Committee (intergovernmental committee of social affairs representatives working in the framework of the OMC) acknowledged the impact of the OMC on policy thinking, discourse and agendas was "varied, but overall indisputable. There are many instances in literally all Member States when the OMC has triggered, or at least contributed, to policy reassessments, public discourses, and actors' agendas. Prominent examples include (child) poverty, homelessness, long-term care and pension reform" (Social Protection Committee, 2011, p.2). Europeanisation is the conceptual approach used in this article to interpret this impact, and namely the interplay between EU and national policy-making through an interactive and multi-directional Social OMC.

Europeanisation can happen in different "domains" such as domestic structures, identities, party politics, intergovernmental relations, and more (Radaelli, 2002; Borzel and Risse, 2003). This article will look at the Europeanising effects of the Social OMC on the domain of public policy. Several definitions of Europeanisation have been used to explore relations between Member States and the EU, with no common definition found to date (Institute for European Studies, 2012). These include: a top-down process whereby the EU induces domestic change; the horizontal transfer of policies across countries; a stage in European integration creating new powers at EU level; a dense two-way interaction between national and EU levels; a multi-directional and interactive process; the transfer of EU values and policies beyond the boundaries of its membership. Generally speaking, Europeanisation is a process whereby national and EU policy-making become more interwoven. Building on these various definitions, Europeanisation in this article is understood as a three-tier process including top-down influencing of (sub-) national processes, bottom-up dynamics influencing EU policy, and horizontal cross-national developments – three processes which are treated separately in this article, but which are empirically linked in practice.

The interactive and multi-directional nature of Europeanisation as defined here is merely a reflection of the increasing interconnectedness of EU Member States (inter-linked economies, transnational networks, high speed communication and transportation) where policy choices in one country are influenced by choices in another (Schmitt, 2010). This holds true for homelessness policy, as demonstrated below.

Top-down Impact on National and Sub-national Processes

Common EU social objectives as a first trigger for national strategies

EU social objectives were agreed in 2000 to promote EU cooperation. The common objectives in the Social OMC have never been quantitative targets as such, but rather policy priorities that provide a framework for Member States to address the multiple aspects of poverty in an integrated way. The first set of common objectives agreed in 2000 included a reference to preventing life crises which can lead to homelessness, as well as the need to provide access for all to decent and sanitary housing (Council of the European Union, 2000b). This consequently gave homelessness practitioners a first sign that Europe was willing to support transnational cooperation in the field of homelessness.

The main top-down effect of this was to see homelessness gradually emerge as a key issue in the national reports² on social inclusion policies submitted every two years to the European Commission, from homelessness as an urgent priority in some Member States to homelessness gradually becoming a key policy priority in many EU countries (FEANTSA, 2005; Spinnewijn, 2009). The common objectives on homelessness have been vehicles for national agenda-setting through the Social OMC national reporting mechanism, including in EU Candidate Countries (Croatia, 2007). Frazer *et al* (2010, p.130) summarise the impact of the common objectives as having “raised the awareness in many Member States (particularly through the NAPs/inclusion³) of the need for a more strategic approach based on more comprehensive and integrated policies; it has helped highlight the need to focus on prevention as well as on alleviation of problems.” Hence the OMC common objectives can be seen as factors inducing policy practitioners to reflect on the place and nature of homelessness policy in wider government (social) policies, in cooperation with their European counterparts. As well as examples and acknowledgement of

² Until 2011, Member States regularly submitted national progress reports on social inclusion to the Commission. But these updates are now provided through the annual National Reform Programmes of the Europe2020 strategy.

³ NAPs/inclusion stands for National Action Plans on Social Inclusion, submitted to the European Commission every two years from 2001 to 2005 to report on social inclusion measures (and replaced by National Strategic Reports from 2006 to 2010).

discourse penetration in national homelessness policy-making (De La Porte and Al Gailany, 2011; Public Policy and Management Institute, 2011; Social Protection Committee, 2011; Stamatis, 2012) a good indication of this trend is the multiplication of homelessness strategies and programmes over the last ten years (Busch-Geertsema *et al*, 2010).

Only a few EU countries had a formal homelessness policy before the launch of the Social OMC – most policies aimed simply at containing homelessness by funding a wide range of social services without any clear underlying policy objectives. Today, many countries are increasingly trying to significantly reduce homelessness, by funding services within clear policy frameworks underpinned by strategic objectives such as phasing out shelter accommodation and replacing it with long-term housing solutions, in the case of Finland; providing suitable support interventions for homeless people, in the Netherlands; providing a legal right to settled accommodation for all unintentionally homeless households in Scotland, and reducing length of stay in emergency accommodation for more than 6 months, in the case of Ireland (FEANTSA, 2012b).

There are now strategic approaches to homelessness in more than 10 countries (The Czech Republic, Denmark, Finland, France, Greece, Ireland, Luxembourg, The Netherlands, Portugal, Sweden and the UK (all four regions) and some countries are making serious steps towards a strategy (Belgium-Flanders and Bulgaria). In other countries, reducing homelessness is a priority but is being addressed through decentralised anti-poverty strategies which include objectives such as access to services and housing for vulnerable groups (Austria, Belgium, Germany, Italy and Spain) or the reorganisation of services towards individualised support systems (Croatia, Malta and Poland) (FEANTSA, 2013).

The heightened presence of homelessness as a priority on national social inclusion agendas is linked to a variety of factors. But the initial placing of homelessness on the Social OMC agenda through the common objectives has been an important first trigger for mobilisation of state and non-state actors like FEANTSA, to support transnational exchange and national policy transfer in a field like homelessness. Importantly, the recently published Social Investment Package which aims to link the EU social agenda to the Europe2020 strategy, has taken this dynamic a step further by adopting an entire European Commission staff working document with detailed policy guidelines to address homelessness at national level, which should enhance further the top-down Europeanisation dynamics in homelessness policy (European Commission, 2013a).

European stakeholder dialogue reaching out to the local level

Over the years, consensus has been reached on homelessness/housing exclusion as a key priority in the Social OMC (Joint Report, 2010; Social Protection Committee, 2012). This consensus has not yet led to benchmarking of policies and measurement of progress due to various reasons – not least because no common homelessness indicators have yet been agreed. However, setting these key priorities has been effective in communicating what Europe is trying to achieve with the Social OMC: European coordination, monitoring and development of effective strategies to tackle different dimensions of poverty, including homelessness. This has consequently made Europe's role clearer to local stakeholders and practitioners tackling homelessness on a daily basis. According to a study carried out in 2010 of stakeholder involvement in the Social OMC, participation is strongest where the EU has key priorities and thematic European networks (Inbas, 2010).

European stakeholder dialogue in the Social OMC has been a channel for raising awareness and shaping policy, and continues today through the European Platform against Poverty (European Commission, 2010), which organises meetings with all relevant EU stakeholders 3-4 times a year in Brussels. With regard to homelessness policy, European networks of practitioners working exclusively or partly on homelessness (such as FEANTSA, Eurocities, Eurodiaconia, SMES-Europa, Mental Health Europe) have been invited to various consultations of the European Commission over the years, especially in preparation of two key annual EU Presidency policy events: the annual meeting of people experiencing poverty and the Annual Convention (formerly known as Annual Round Table). These two annual events have been criticised by many in the past for their lack of impact on poverty. However, their impact on policy formulation is not to be underestimated. Stakeholder dialogue in preparation for EU events through consultations have less influence at local level than stakeholder dialogue taking place *within* EU events. Nearly every year of the last decade, the Round Tables put the theme of homelessness on the programmes, bringing together practitioners from ministries, NGOs, local authorities, academia, other EU bodies (Parliament, Committee of the Regions, Economic and Social Committee) and, increasingly, people experiencing homelessness. This culminated in a European Consensus Conference on Homelessness in 2010 which brought together key experts to address six key questions on homelessness policy at EU level (EU definition, key policy approaches, the role of the EU, etc.) (European Consensus Conference, 2010). The same can be said for the annual meeting of people experiencing poverty – even though participation of people experiencing homelessness has been understandably more challenging, the Danish Presidency of the EU made addressing homelessness a priority theme for the 2012 meeting.

These events frame policy discussions between practitioners in the context of EU social policy developments, and consequently increase the likelihood of EU discourse and concept penetration in local homeless policies and service models. This is all the more true for practitioners involved in key FEANTSA events that focus specifically on homelessness. This direct link created between local practitioners and the realities of the EU political arena has raised awareness of the relevance of the EU policy framework despite homelessness being a phenomenon which is tackled mostly at a local level. Stakeholder dialogue organised through these European events has therefore also developed bottom-up dynamics over the years whereby individuals can push their homelessness policy approaches onto the EU agenda, which is the subject of the next section.

Bottom-up Dynamics Influencing EU Policy

Pushing national priorities on the EU agenda

The Europeanisation effect of Social OMC problem definition can also be considered a bottom-up process whereby countries seek to keep their priorities high on the EU agenda. Key priorities were highlighted with the publication of each Joint Report (adopted by both the Commission and the Council based on assessment of national social inclusion reports), and have varied over the years, which reflects the flexibility of the OMC tool to adapt to emerging social challenges.

As the Social OMC progressively became known among national social inclusion policy-makers, governments started to recognise the added value of EU intervention – mainly political and financial support for expertise and knowledge building to effectively address social challenges – in certain areas of social inclusion policies. It became apparent that an increasing number of Member States were keen to keep homelessness on the EU agenda as a key priority. Moreover, the key EU policy priorities were gaining in importance as a social inclusion OMC tool given that the common objectives were considerably watered down when the social inclusion process was streamlined with pensions and health in 2006 – in fact the reference to homelessness was dropped in the new common objectives (European Commission, 2005). Some argue the key policy priorities were developed in order to address the “implementation gap” in the Social OMC (Vanhercke and Lelie, 2012, p.156), to combine both universalistic and targeted approaches in EU social policy (Calandrino, 2009), and to keep up momentum and interest in the EU social inclusion agenda. The national reporting clearly became a channel for such EU agenda-setting, with national authorities and NGOs using the national reports to request EU support and transnational cooperation in specific fields like homelessness (Spinnewijn, 2009).

The integration of national priorities in the European Social OMC process has also been ensured through the 6-month rotating EU presidency agendas: the Finnish EU presidency organised a housing rights conference in 2006, the French EU presidency focused on homelessness in the informal EU Housing Ministers meeting in 2008, the Belgian EU presidency organised a European Consensus Conference on Homelessness in 2010 which provided the starting point for an EU homelessness policy (European Consensus Conference, 2010), the Danish EU presidency chose to focus on homelessness and housing rights at the annual meeting of people experiencing poverty 2012. The French government organised a European workshop on homelessness (although not within its EU Presidency) in 2012 where it called for a EU homelessness strategy with a strong focus on housing-led approaches (France, 2012). Finally, the most recent indication of bottom-up pressure on the EU agenda is the Irish Presidency European round table of ministers responsible for homelessness in March 2013, which agreed 6 key principles to inform EU homelessness policy (see Culhane and Randall, 2013).

The EU Presidency agendas have arguably become increasingly important for channelling national social priorities, since the national reporting on social inclusion has now been mainstreamed to a great extent in the Europe2020 national reporting mechanism. This new reporting provides some scope for countries to demonstrate their social policy priorities in relation to meeting the 2020 poverty target. However, the merging of social policy with economic and employment policy within one strategy (Europe2020) has considerably reduced the space for countries to influence the EU social policy agenda. Moreover, the bottom-up dynamics of the voluntary cooperation and benchmarking of the Social OMC are far less influential in a process like Europe2020, where the European Commission can explicitly steer national priority-setting through annual country-specific recommendations.

European definitions and methodologies developed from local realities

Transnational exchanges between practitioners in European networks like FEANTSA, which focuses exclusively on homelessness and housing exclusion, quickly required a common policy language, which saw the increasing use of the European Typology of Homelessness and Housing Exclusion (ETHOS) (European Commission, 2006) which is based on four conceptual categories of homelessness which can be operationalised differently according to the national context. This can be considered an example of Europeanisation of homelessness policy through bottom-up processes – a real need from the ground for a sound starting point for effective European policy cooperation in the Social OMC was the key driver for developing this typology, which has now become a reference for homelessness policy-making helping practitioners in different EU countries understand the dynamics of homelessness (Edgar *et al*, 2007; European Consensus Conference,

2010). The ETHOS typology was formally recognised in the Social Investment Package, which is a successful example of local dynamics reaching the EU political arena (European Commission, 2013b). This process of evidence-based European definition-building from the bottom up, has also happened through FEANTSA in a number of other areas, including defining elements of integrated homelessness strategies, defining participatory methods for involving homeless people, defining housing-led policy approaches to homelessness, and recommendations for measurement of homelessness at EU level (see various FEANTSA toolkits).

The commonly agreed indicators for benchmarking policies and practices in the Social OMC are developed by a sub-group of the Social Protection Committee, which build European definitions of indicators based on approaches across EU countries. The indicators are currently available in the Eurostat database. The list covers different dimensions of poverty, including dimensions of housing linked to homelessness (severe housing deprivation, overcrowding, housing affordability), but they do not directly cover homelessness (Atkinson and Marlier, 2010; Rybkowska and Schneider, 2011; European Commission, 2011) mainly due to methodological reasons. Since collecting data on homelessness cannot easily go through traditional EU-SILC household surveys (the main source of data for the common indicators), a different methodology is required, namely going through services, which are in contact with homeless households. This was confirmed by a comparative European study financed by the European Commission (Edgar *et al*, 2007), which built on national methodologies to formulate recommendations for an EU methodology (Frazer *et al*, 2010; Vanhercke and Lelie 2012; De la Porte, 2010). This methodology triggered reflection on homelessness monitoring systems (see MPHASIS project below), but common EU indicators on homelessness have still not been agreed at the time of writing. The Europeanisation of homeless policy therefore currently has its limits in terms of building common indicators, but this is a methodological issue specific to hard-to-reach households in general – an issue which may be addressed in the future with a strengthened EU framework to monitor progress on homelessness.

Horizontal Cross-national Policy Developments

Influence of European peers in national homeless policy-making

Peer reviews are a classic mutual learning instrument of any OMC used in EU policy (Laffan and Shaw, 2005; Lange and Alexiadou, 2010; Tholoniati, 2010; Sabato, 2012) – an instrument that takes a policy as a starting point for European peer exchanges. The motivations for hosting a peer review may vary but, based on FEANTSA experience of Social OMC peer reviews, a country generally decides to host a peer review

to illustrate to other countries how it implements a policy, showing the policy in practice through site visits, and to potentially integrate the experiences of participating peer countries in their work. Peer reviews are also used by host countries as a form of policy evaluation by their European peers, to benchmark their policy against other country policies. This brings a cross-national dimension to their policy arena and allows them to benefit from the policy expertise of other countries. The potential transfer of ideas from peers to the host is therefore quite evident.

Homelessness has been the subject of a number of peer reviews since the start of the EU peer review programme in 2004 (Curry, 2012). In 2004, England hosted a peer review on their Rough Sleepers strategy, showing that targeting a specific part of the homeless population is a useful starting point for developing a homelessness policy. Denmark hosted a peer review in 2005 on its 'Freak' Housing policy, showing it was possible to provide alternative housing forms for people with alternative lifestyles. In 2006, Norway hosted a peer review on the Norwegian homelessness strategy, while France hosted a peer review on the wider issue of substandard housing in 2007, framing homelessness policy action in wider housing policy. Austria hosted a peer review in 2009 on methodologies to measure homelessness, as a first step to developing evidence-based policies. Despite investments in social housing and eviction prevention, homelessness was on the rise in Vienna and they were keen to explore with other countries the reason for this evolution. Finally Portugal and Finland each hosted a peer review in 2010 on their national homelessness strategy, with both countries presenting innovations in their respective contexts: in Finland, the strategy represented a paradigm shift away from the use of temporary accommodation outside the housing market to reducing long-term homelessness through mainstream housing; and in Portugal, the strategy represented the first national-level action in Southern Europe.

In all peer review meetings, there were at least 7 peer countries around the table, two European networks and local stakeholders (FEANTSA took part in all the peer reviews mentioned above as one of the two invited European networks) – a mix of stakeholders, which strengthened the variety of critical perspectives in the review. The views of European peers are important for host countries, but peers are also involved in creating another Europeanising dynamic; that of policy learning and possible transfer of ideas into their national context. However these dynamics are more subtle and harder to demonstrate, and according to a recent evaluation of the EU social inclusion peer review programme, there is a general lack of proper follow-up after peer reviews, which makes it problematic to assess policy transfer (Observatoire Social Européen and Public Policy and Management Institute, 2012). National homelessness strategies developed over the last ten years are generally based on national research and surveys on the causes of homelessness, and are therefore very specific to the individual countries. However, there are increasing

similarities in the general policy objectives of strategies, which are beginning to show some signs of convergence. Policy objectives and targets include the following: eliminating the need to sleep rough (Denmark, Ireland, Portugal and the UK), reducing length of stay in temporary accommodation (Denmark, Ireland and Sweden), improving the quality of services (Czech Republic, France, Ireland, Malta and Poland), prevention of homelessness (Denmark, Finland, Ireland, Luxembourg, The Netherlands, Norway, Portugal, Sweden and the UK), provide access to housing (Finland, France, Ireland, Luxembourg, The Netherlands, Norway, Sweden and the UK), testing or implementing Housing First (Austria, Belgium, Denmark, Finland, France, Ireland, Luxembourg, The Netherlands and Sweden) (FEANTSA 2012b and FEANTSA 2013). The causality between this convergence and EU processes should be explored further.

The Europeanisation of homelessness policy at work here is therefore especially cross-national as homelessness practitioners learn to use OMC tools to get access to expertise on homelessness in other countries. In some countries, official Social OMC peer reviews have been integrated within national homelessness policy processes as highlighted above, hence showing the willingness of policy-makers not to limit themselves to their national policy context but also to use instruments which bring a cross-national dimension to their work.

Transnational exchange between sub-national level practitioners

Cross-national Europeanising dynamics have increased in quality and depth over the years through the use of EU funding for transnational projects, which involve not only national governments, but all relevant stakeholders including local authorities, NGOs, universities, private companies. These projects are generally linked to EU social policy objectives, including homelessness reduction. A description of some of these projects and cross-national dynamics is now provided.

FEANTSA, the European federation of national organisations working with homeless people, is a network funded to promote European policy and research exchanges in the field of homelessness, mainly through national and regional platforms of services working with homeless people. Through its structure a number of satellite networks have formed, including a network of academics driving the EU homelessness research agenda through the European Observatory on Homelessness. Similarly, a network of local policy-makers responsible for homelessness (HABITACT) is coordinated by FEANTSA, meeting on a regular basis. They have various methods of pooling expertise across local authorities, which includes annual peer reviews taking a local homeless strategy as a starting point for European discussions (e.g. Hermans, 2010; Benjaminssen, 2011; Daavelaar, 2012;

Baptista, 2013). In addition, there have been numerous *ad-hoc* transnational projects on homelessness or partially covering homelessness, which have had Europeanisation effects in local policy and service delivery.

The MPHASIS project – Mutual Progress on Homelessness through Advancing and Strengthening Information Systems – which operated from 2008 to 2009, aimed to improve the capacity for monitoring homelessness and housing exclusion in 20 European countries, hence was directly linked to the Social OMC aims to improve monitoring of poverty across the EU. The project was carried out through transnational exchanges and action-oriented research which directly fed into national discussions on monitoring homelessness within MPHASIS. A national meeting was organised in each of the 20 participating countries with the presence of all relevant practitioners for monitoring homelessness and European experts, which fed in other country examples into the discussions. In some countries, practitioners participating in the national meetings had already met in other local circumstances, with MPHASIS becoming a European branch of their policy work. In other countries, MPHASIS was bringing people together for the very first time, hence injecting some Europeanising influence into local dynamics within the framework of a transnational project. While the EU provided financial support for this, the main driver for this Europeanisation was the desire of a cluster of countries to cooperate on a dimension of homelessness policy: data collection and evidence-building for policy purposes.

Hope in Stations (HOmeless People in European train stations) brought together from 2010 to 2011 the stakeholders of the train stations of Paris Nord and Paris Est, Brussels Central, Roma Termini, Berlin Zoo, Madrid Antocha, Warsaw Central and Luxembourg Central (Carminucci, 2011). The project, in each country, gathered local authorities, social services which support homeless people, and railway companies into a reinforced cooperation. The aim was to experiment with the setting up of a social reference person, in Paris, Brussels and Rome, who would be in charge of the coordination of all the interventions of the different stakeholders in and around the stations. By promoting experimentation and exchanges between non-traditional stakeholders in the field of homelessness policy, this project went further than policy-making.

The Housing First Europe (HFE) partnership was set up as an EU social policy experimentation in order to test the Housing First approach to homelessness in five sites from 2011 to 2013: Amsterdam, Budapest, Copenhagen, Glasgow, and Lisbon. Five peer sites were also selected in Dublin, Ghent, Gothenburg, Helsinki, and Vienna (Busch-Geertsema, 2013). The aim of Housing First policies is to shift from using shelters as the predominant solution to homelessness towards housing-led approaches which aim to provide housing with support as required for people living on the streets. Homelessness policy is in a period of experimentation and reform,

with practitioners across Europe testing new ways of tackling homelessness rather than relying solely on traditional shelter-based methods, and the Social OMC provides a framework for them to cooperate in finding new policy concepts and solutions which work in different countries. HFE has enabled front-line workers to test and compare service delivery models with their counterparts in other EU countries, hence enabling them to introduce a European dimension to their local social policy experimentation in order to fully benefit from the expertise available in the rest of Europe. The launch of Housing First Belgium in 2013 (experimentation testing HF approaches in five Belgian cities) is arguably a direct consequence of Ghent's participation in Housing First Europe, and is but one example of the multiplier effects of such cross-national dynamics.

These different transnational projects indicate that local practitioners are increasingly looking for new and diversified service delivery models to address homelessness. The Europeanisation dynamics here are evident, and they are predominantly cross-national.

Conclusion: Social OMC Myth Versus the Homelessness Policy Reality

The evidence gathered in this article illustrates some of the Europeanisation dynamics in homelessness policy-making, mainly through a combination of vertical and horizontal dynamics linked to the Social OMC process, which provided the main framework for policy progress on homelessness at EU level over the last decade. The increasing interplay between local, national and European policy-making on homelessness is clear. Tackling homelessness is now an integrated part of social inclusion agendas at both EU level with the key policy priorities of the Social Investment Package, and at national level with homelessness increasingly being the subject of specific national/regional/local strategies on homelessness. This cluster of countries is actively seeking support from the EU and is keen to harness the expertise available in Europe to find solutions to homelessness. Stakeholders are no longer only trying to influence national agendas but also the EU social inclusion policy agenda through various channels, not only promoting certain homelessness policy concepts cross-nationally and at EU level, but also choosing to give a European dimension to their daily work. The frequent use of peer reviews and transnational projects by national and local homelessness practitioners indicates that they are increasingly turning to Europe for policy instruments and resources. Consensus is increasing on defining homelessness, and on key policy objectives in addressing homelessness, but the benchmarking of homelessness policies against common EU indicators for cross-country comparisons is not yet possible. Countries developing voluntary European cooperation in the field of

homelessness do not need motivation and pressure from the EU at this stage, but rather support for the necessary reforms to end homelessness. This type of support is summarised well in the Irish presidency key principles to inform EU homelessness policy (knowledge sharing, a common reference framework, funding, research and innovation, advice). Thus, it can be argued that the Europeanisation of homelessness policy is real and key elements are in place for developing a EU homelessness policy, which can support countries in line with the principle of subsidiarity.

Meanwhile, the benchmarking of policies through the Social OMC process is losing momentum. The Social OMC is a process which dominated most of EU social policy during the last decade, through strong cooperation between the European Commission and Member States through the Social Protection Committee. The Social OMC however is gradually fading away as a process which is now only driven by the Social Protection Committee and which has to a certain extent been replaced by the Europe2020 strategy, which is an economic and employment strategy for Europe, not a social policy strategy. This is now the main governance framework for benchmarking of social policies, through the annual National Reform Programmes (NRP), with a strengthened role for the European Commission which can now give country-specific recommendations in the social policy field (this was not the case with the Social OMC national reporting).

The Europeanisation dynamics referred to in this article are not likely to stop. The top-down dynamics have already been strengthened with the Social Investment Package publishing clear homelessness policy guidelines, and with increasing interconnectedness between the EU and local realities through new media tools. In turn, an awareness of EU opportunities to support local work means that local practitioners will invest more time in influencing EU developments, and ensure that the EU takes into account local realities. The heightened connection between local, national and EU governance in homeless policy will inevitably continue in the future. Intergovernmental peer reviews are still on the agenda the EU agenda – the most recent one was held in Denmark in November 2013, with a focus on the Housing First strategy. Transnational exchanges are increasing as networks thrive with the support of new social media, making it easier to build transnational partnerships for EU projects and meaning that transnational cooperation on homelessness is no longer only the preserve of national governments, but also reaches the level of local policy-makers and services.

The voluntary cooperation of the Social OMC through the Social Protection Committee could therefore benefit from the emergence of Europeanised policy clusters (as is the case in the field homelessness) to keep up momentum in EU social inclusion policy cooperation. The fields of child poverty and active inclusion are also arguably Europeanising given the key documents on these issues in the

Social Investment Package (European Commission, 2013b). In the absence of a clear framework for EU social policy in this new decade, policy clusters of countries seem to be forming which, far from complaining of EU interference in social policy matters, are calling on the EU to support national governments in their efforts to address social issues. This is a testimony to the positive impact of the Social OMC, which over the last ten years has managed to build sufficient expertise and new EU communities in the field of social inclusion willing to work together at EU level on very local phenomena like homelessness.

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From the Forest to Housing: Challenges Faced by Former Rough Sleepers in the Private Rental Market in Hungary

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- › **Abstract_** *This article explores the challenges homeless people face when trying to access the private rental market in a context where access to social housing is limited, and where there is no minimum income, nor substantial housing benefits. The paper draws on an evaluation of a recent initiative, the Pilisi Forest Project, which aimed to re-house 152 rough sleepers (during 2007-2009), the most vulnerable group within the homeless community, from various forests in Budapest, Hungary. The project offered service users a housing allowance as well as floating support for a duration of 12 months. The project faced a number of operational challenges including take-up from clients, community integration issues, the prejudice of landlords and lack of staff time. However the greatest challenge was in achieving housing sustainment beyond 12 months, in a situation where most clients had insufficient financial resources to meet the rent without assistance from the project. The article draws conclusions from the lessons learnt in this project that can be adapted to the wider context of Hungary, as well as other European countries with a similar level of social provision.*
- › **Keywords_** *Rough sleeping, access to housing, private rental market, housing allowances, floating support*

Introduction

I always say two things to support workers... Can you give me an apartment? No. Can you give me a job? No. I don't need anything else. All homeless people need these two things only. (Participant, Pilisi Forest Project)

This article explores the challenges that former rough sleepers face, firstly when trying to access the private rental market in Hungary, and secondly, maintain any accommodation secured following the cessation of support from any homelessness agencies. After briefly defining homelessness in the Hungarian and European context, the article outlines the barriers faced by rough sleepers in attempting to access settled housing, at both a structural and individual level. In particular, the social context of current day Hungary is described, including the lack of social housing, a very minimal guaranteed minimum income, ¹ often not accessible for homeless people², and limited housing benefits. The article then examines the quite limited range of services that exist to help former rough sleepers with integration into housing, before focusing on the specific example of the Pilisi Forest Project: a project aimed at re-housing rough sleepers from various forests in Budapest, primarily into the private rented sector. In the final section of the article, conclusions are drawn from the lessons learnt in this project that can be adapted to the wider context of Hungary, as well as other European countries with a similar levels and systems of social provision.

Homelessness and Rough Sleeping in Hungary

In order to understand the challenges homeless people face in accessing housing in Hungary, it is first necessary to define homelessness, and rough sleeping, in the Hungarian context. Originating from the Social Act, 1993, there are two definitions as to who is considered homeless in Hungary – both of which are much narrower than in many other member states. Firstly, those who are either roofless or sleeping in homeless services are considered homeless, and/or secondly those without a registered abode, including those using a homeless facility or a public space (for example: Budapest, District 5; or Dózsa György Street – with no house number) as an 'address'. People living in overcrowded, substandard accommodation, or who

¹ A maximum of about € 80 per month – about one third of what would be needed in order to access the cheapest possible private rental housing (rent and utilities).

² Only one person per family is entitled to the benefit of working-age people, and they are required to cooperate with the local Job Centre – accepting any employment opportunity proposed, for example. An official address is needed to apply.

are 'sofa surfing' are not considered homeless. In terms of the ETHOS typology, homelessness in Hungary is mainly represented by categories 1 to 3 (public spaces, night shelters, and other homeless shelters).

This article focuses on rough sleepers, the most disadvantaged group within the overall homeless population. Each year, a survey of homeless people is undertaken in Hungary (Fehér, 2011). In February 2012, as well as recording 10 205 beds in homeless shelters or hostels over Hungary, researchers enumerated at least 2 339 people sleeping rough (Győri and Szabó, 2012). However, this is likely to be a gross underestimate as the survey does not reach everyone and rough sleeping was treated as a legal offence in some communities, resulting in people sleeping rough in well hidden locations (Misetics, 2010). Research has also revealed that while some homeless people using shelters (37 percent) have never slept rough, almost half of them have slept rough at some point in their lives. About 14 percent of homeless people have only slept rough throughout their homeless career (Győri, 2008). Those who have only slept rough are less likely to have a job (24.7 percent as opposed to 36 percent); some kind of insurance-based income – such as old age or disability pension (10.9 percent as opposed to 28.8 percent); or any other social benefit (9.3 percent as opposed to 13.9 percent), than those homeless people who have never slept rough. Rough sleepers, on the other hand, are much more likely (25.2 percent as opposed to 2.6 percent) to make a living by collecting, recycling and selling garbage. Women who are sleeping rough are even less likely to have a job (17 percent), and slightly more likely to make a living from collecting garbage. Rough sleepers tend to drink more than people who stay at shelters³ – 24 percent of them drink alcohol every day (12 percent of those in shelters), and alcohol seems to be an even bigger problem for women rough sleeping than men (Győri, 2008).

The Housing Market: Barriers to Access

In Hungary, as in many other Central and Eastern European countries, homeless people face significant structural barriers to accessing appropriate and sustainable housing. In particular there is a lack of affordable housing for those on low incomes. In Hungary, the main form of tenure is homeownership. This brings about two problems. The first one is that Hungary has one of the lowest rates of public housing stock in Europe at approximately 3 percent of total housing stock. This stock is also unevenly distributed across the country – in some regions the social housing stock is less than 1 percent of all housing, and, especially in smaller settlements, there are no social housing units at all. Moreover, the Housing Law does not specify how

³ Though in most shelters alcohol consumption is not tolerated.

many such units local authorities need to provide their population with, who is entitled to social housing, nor how social rent should be calculated. In practice, the small sector is mainly targeted at the 'deserving poor' with homeless people unlikely to gain access due to both administrative and financial barriers (Fehér *et al*, 2011). For example, BMSZKI, the largest homelessness service provider in Budapest⁴, recorded that in 2011 232 of their clients applied for social housing, of which only 23 people succeeded.

As a consequence, the only possible way out of homelessness for most people is the private rented sector. However, this sector also has a number of structural problems that make this process difficult. The sector has been subject to only small-scale and less than successful measures since 1989 (Fehér *et al*, 2011). The main policy measure has been deregulation of the private rented sector, which has resulted in both landlords and tenants being more vulnerable. The amount of rent is not protected by law, and landlords often try to avoid paying taxes and/or giving tenants claimable rights to the property by refusing to sign an official contract for the rent. This might mean that the privacy of the tenant is not guaranteed, but also that the tenant cannot register the tenancy as their official address, which might result in a multitude of other difficulties. Certain groups of people (the Roma, families with children) are generally mistrusted by landlords and have even more difficulties trying to access the private rental market.

In addition, lack of any sufficient and regular income makes it difficult for homeless people to move out to the private rental sector. The minimum rent (for a bedroom only) in Budapest costs €140 per month, plus a similar amount for the maintenance of the apartment. Most landlords also ask for a deposit of two months in advance. Many homeless people cannot even pay for hostels which demand a token fee of €30-70 per month. Most of those who do not have a job are not entitled to unemployment benefit as they had not been legally employed beforehand, and even if they qualify for this or a social benefit, both of these amount to approximately €100 per month. Even with the minimum wage (€330 per month before taxes, about €260 per month after taxes), or with obligatory public employment for those who do not want to lose their long-term unemployment benefit (€250 per month before taxes, about €200 per month after taxes), it is very unlikely for someone to be able to afford to rent an apartment in the private housing sector. Rising energy costs and utility prices are also a major issue in Hungary for all low-income households (Hegedüs, 2011).

Further, there is almost no housing support in Hungary. There is no rent subsidy provided by the Hungarian state with a housing allowance subsidising the costs of utilities only. The amount of the normative housing allowance is also extremely low

⁴ Has a share of about 30 percent of beds in homeless provision in Budapest (total number of beds in Budapest = 6565).

(usually between €10-25 per month) and therefore it does not offer substantial assistance to those with low (or no) income. Moreover, to be eligible for a housing allowance, tenants need to register their address officially, something many landlords are reluctant to do.

Alongside substantial housing market barriers, many homeless people and rough sleepers in particular, face personal hardship and health problems that can create additional barriers to accessing housing. As outlined in the previous section, many homeless people suffer from problems with their health, mental health and/or some sort of substance abuse, and this can make it difficult for them to access the housing market and maintain housing in the long term –as well as landlord reluctance to house people with health issues. Some groups of people have become so institutionalised that they have lost their independent life skills (for example, people having served long prison sentences, young people who have grown up in group homes or homeless people who have lived in services for several years). The lack of individual counselling or floating support makes it difficult for these people to access, or to keep any form of independent housing. Many homeless people have difficulty in accessing health services to address physical health problems, and there is an inadequate network of services offering support for people with mental health problems or addiction. Thus, individual problems are also structural ones in the Hungarian context.

Specific Schemes to Assist Homeless People

Initiatives aimed at resettling homeless people have a long history in the European Union, particularly some countries like the United Kingdom (Crane *et al*, 2012). In contrast, such programmes have been developed more recently in Hungary and other Central and Eastern European countries, with most provision focused on providing basic shelter to people sleeping rough. As noted above, there is a network of homeless night shelters or hostels in Hungary, offering 10205 beds in total (with 64 percent of these beds being in Budapest). There are also day centres, and more recently, some medical centres for homeless people have been established. However, most homelessness provision has not changed its function significantly since its development in the early 1990s (Filipovic-Hrast *et al*, 2009). They do not have access to any move-on housing options, although some aim to help people back into “normal housing”. The system functions within the framework of a ‘staircase’ model of provision (Sahlin, 2005), but with the ‘highest stairs’ missing, in terms of there being a lack of supported accommodation that can prepare people for living independently (Fehér *et al*, 2011).

Within this overall context, there have been some limited special funds from the Ministry of Social Affairs⁵ reserved for supporting the re-housing of homeless people since 2005. These funds could be accessed by hostel users and rough sleepers via outreach teams or day centres. The amount of this type of support was a maximum of €860 to be paid within 12 months (so an average €70 per month), in a diminishing fashion. Homeless people received floating support, but there is no data as to how frequently meetings between them and support workers occurred.⁶ Beneficiaries were expected to have a regular income, and they had to pay a growing share of their housing costs. Each year about 200 homeless people moved on with the help of the re-housing support in Budapest and its surroundings – representing only a small minority of the almost 8000 homeless population of the Central Hungarian region⁷.

Monitoring of the re-housing support revealed that the average income of beneficiaries was more than the minimum salary (Győri, 2010), which is unsurprising given that they would have struggled without access to additional funds. More than half of the beneficiaries moved together with at least one other person, usually a family member. Family members had not always been homeless themselves, so this scheme reached more people than the actual number of beneficiaries.

One of the weaknesses of the re-housing support was that it only usually lasted for 12 months, although in some cases, funding for another year could be requested, and there is no data available as to whether beneficiaries remained housed once the support had expired. However, the re-housing support for homeless people was more flexible than the normative housing support: it did not require the tenant to register his/her address in the place of living, the support could be used to cover rent as well as utilities, and it could be given to several individuals moving together, thus providing substantial help for couples or groups

⁵ The Ministry of Social Affairs nominated two public foundations (Hajléktalanokért Közalapítvány – *Public Foundation for the Homeless* and Összefogás Közalapítvány – *Cooperation Public Foundation*, the second of which was closed in 2012) to distribute these funds to homeless services, who then could allocate it to homeless people who were moving out to the private (or, less frequently, to the public) housing market. Hajléktalanokért Közalapítvány was responsible for reaching services outside Budapest, but the funding was only available between 2005-2007. Összefogás Közalapítvány was responsible for Budapest and its surroundings; the last round of funding was paid in 2011.

⁶ As the support work expected was not quantified, it can be assumed that in some cases visits took place on a fortnightly or even monthly basis – and they could have taken place in the office of the support worker and not at the home of the beneficiary.

⁷ Eight-nine (smaller and bigger) service providers applied to distribute the funds among their users. At the same time, there were about 6500 beds available in services for homeless people (including temporary accommodation for homeless families), while at least 1150 people slept rough (Győri, 2011).

of friends. The programme was very popular among homeless people as well as service providers, as this was seen as the most realistic way out of homelessness in the absence of other solutions.

There have been several other smaller scale projects targeting the (housing) reintegration of homeless people across Hungary, trying to overcome both the individual as well as structural causes of homelessness (Fehér *et al*, 2011). Some of these projects focused on rough sleepers especially, while others included all kinds of homeless people. All of them were limited in time.⁸ This article now focuses on one of these projects which stands out in several ways: it was implemented by several organisations under the coordination of one public foundation; it targeted rough sleepers and managed to reach quite a large number of them; and it offered support workers quite a lot of freedom in how they wanted to proceed in rehousing their contacts. As described below, whilst the scheme did not only offer individual housing in the private rental market, this appeared to be the most popular option for beneficiaries and thus is discussed in detail. The project targeted rough sleepers living in specific forest areas.

The Pilisi Forest Project

In 2006, the Pilisi Forest Company, which owns several forest areas in the Budapest area, approached the Ministry of Social Affairs to ask for assistance to clear the forests of homeless people as well as illegally disposed garbage in the areas. The Ministry allocated some funds to the Public Foundation for the Homeless who subsequently posted a call to organisations working with rough sleepers to be their partners in re-housing homeless people from the forest. Seven organisations⁹ responded to the call and began work on the project between 2007-2009. Similar to the special funds scheme described above, the project offered homeless people a housing allowance as well as floating support by their former outreach workers, for a duration of 12 months. The average staff-client ratio was 1: 7 in the project.

It is important to highlight that the main goal of the project was to 'clear the forests' as requested by the forest company. A secondary aim of the project was to prevent people from rough sleeping again or using homeless shelters. Long-term housing stability was not an explicit goal of the project and several characteristics of the project made this difficult, including the shortage of working hours of staff, lack of professional guidance and a lack of a stable and sufficient income of clients.

⁸ Some of the details of previous projects and their reports can be accessed at www.ossze-fogaskozalap.hu or www.hajlekot.hu

⁹ Six out of the seven organizations were NGOs while one was the outreach team of a local authority.

Many of the homeless people targeted had lived in the forest for several years and had built wooden huts and installed heating, creating real (if illegal) homes. One key research question was therefore whether the re-housing support would enable them to move to a new home at least as comfortable (or more so) as the one they had built for themselves in the forest. There was also a question as to whether they would be able to take their belongings and especially their animals, including dogs, cats, chicken and other small animals.

In 2012 research was conducted on the project (three years after the end of the project). Basic monitoring data was analysed that had been collected by support workers on those who had signed an agreement with project workers at the start of the project. Qualitative interviews were also undertaken with 14 participants, comparing their situation prior to moving in to housing and at the end of the support. Interviews were also conducted with support workers.

A limitation of the research is that it was not possible to collect detailed information on rough sleepers who did not take part in the project. However it was known that many people refused to cooperate with the outreach team and moved to other areas. Some people also stayed where they were and were left undisturbed by the forest company. In some areas, rough sleepers had been informed about the project through the media as well as the forest rangers, and often this information proved incorrect. Many homeless people believed that they were entitled to receive the financial support in cash and were disappointed when it transpired the support was in kind. There was also some confusion as to who was evicting people – some homeless people thought the outreach teams were responsible for this and this led to a lack of trust in the project. Generally, outreach staff had to convince people to take part in the project.

About the beneficiaries

Each service provider was able to decide upon the admission criteria for the project. Some tried to include everyone who was interested; others tried to select people based on the 'intuition' of outreach workers, and only involve those who were likely to succeed after the one-year re-housing support had run out. This typically meant people were more likely to be selected if they had a less severe addiction problem, some sort of a stable income or the likelihood of securing one, and a motivation to move out from the forest.

Of the 152 clients in the Pilisi Forest Project, 65 per cent were male and 35 per cent were female. The average age of clients was 44.6 years at the start of the project. More than half of participants (56 percent) had elementary education or lower. About one third (35 percent) went to some kind of vocational school. Nine per cent graduated from secondary school. None had gained a higher education. The

average length of homelessness (rough sleeping or staying in the forest) had been 6.46 years. The majority (64 percent) of clients lived together with a partner, spouse or other family members. About two-third of clients had a substance abuse problem, with 95 per cent addicted to alcohol and 5 per cent to drugs (some of the drug-addicts also had alcohol issues).

When entering the project, 76 per cent of clients had some kind of income. However, only 15 per cent of all clients were in possession of a regular income, 37 per cent had some kind of temporary job (including street paper vending). Almost a quarter (24 percent) lived from collecting garbage or begging, one fifth (19 percent) received either old age or disability pension. Very few people received unemployment (2 percent) or social benefits (3 percent).

Project participation

The average length of participation in the project was nine months. Forty percent remained housed for the whole period of time agreed, while 60 per cent left the project and/or accommodation before this point. This extremely high non-completion rate can be explained by the large number of clients who decided to quit the project after having signed the agreement. These (63 clients) started with the project but took part in the project for 6 months or less.

Income / employment outcomes

There were some changes in terms of clients' income and/or employment status.¹⁰ By the end of the project, the proportion of people without any income decreased from 17 to 9 per cent for the completers. There was an increase in the share of those who had a regular income (from 15 to 21 percent). There was a noticeable decrease in the share of temporary jobs (from 37 to 30 percent). Also significantly fewer people relied on collecting garbage or begging (15 percent compared to 24 percent). These changes may be explained by the fact that by the end of the project a much greater proportion (33 percent compared to 24 percent earlier) of people received some kind of social benefit (pension, unemployment or social benefits). This may be the result of the co-operation with support workers who helped clients to obtain these forms of support.

¹⁰ Starting figures below refer to all clients while end-of-cooperation figures refer only to those who stayed in the program at least until the agreed period of cooperation.

Accommodation Outcomes

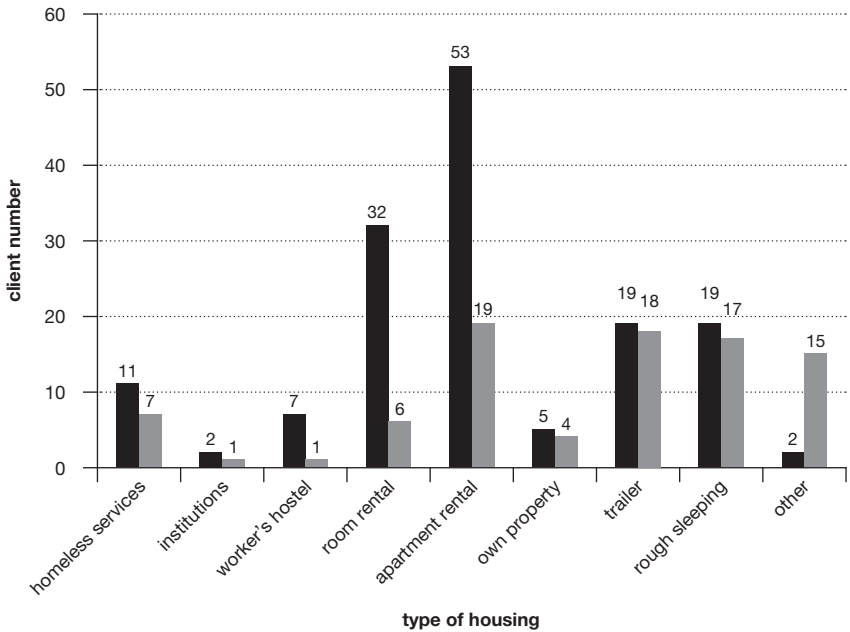
Support workers consulted with clients about what type of accommodation they would ideally prefer. There were four main options available: renting a bedroom or an apartment; buying a trailer; buying one's own property; or a workers' hostel or a hostel for homeless people in Budapest. In all cases, the money for the accommodation was not given directly to the clients; rather it was paid by the organisation to the landlord/owner/company instead.

Chart 1 shows the accommodation status for the first place the 150 clients moved to following signing up to the project (first column) and at the end of the individual contracts with clients (second column). Completion data is shown for 88 people as 62 clients left the project.

Rented accommodation

For those with some kind of a stable income (whether pension, benefit or paid work), renting a bedroom or an apartment/house was often the best housing option. Outreach workers helped clients to find accommodation although most homeless people found their own housing. Key workers were present at the signing of the contracts, and they often handed the rent/deposit directly to the landlord. The re-housing support mostly covered the deposit and the rent, while tenants were responsible for paying for utilities. The amount of financial support usually decreased over time, so tenants had to pay an increasing proportion of the costs of their housing.

Rented accommodation was the preferred option for couples (to offer more privacy and because sharing of costs made this more achievable), as well as for families hoping to reunite with their children. The project recorded that couples proved to be more successful in sustaining their new form of housing than single people. However, retaining private rented accommodation proved extremely difficult for most clients. During the project, a total of 85 people (56 percent) rented a room or an apartment, however only 25 remained in this accommodation at the end of the project (Chart 1).

Chart1: Type of housing during and at the end of co-operation period

Note: Other includes re-union with family, institutional care and hospitalisation

Trailers

Trailers are an unusual housing option in Hungary and the option was offered following a request from one couple. Support staff considered that trailers could potentially be financially sustainable in the long term and could also suit the special needs of people moving in directly from the forest (for instance where they could bring all their belongings or pets). However, as there are no official trailer parks in Hungary, it took considerable effort to find a place where a trailer could be stored in the long-term. A park outside of Budapest was found that offered a building with a common toilet, shower, laundry and kitchen, while the trailers could use the electricity and water from the main building (that tenants had to pay for themselves). A total of 19 people moved to a trailer, with 18 remaining there at the end of the contract agreement.

Where two people moved together, housing support could cover the price of the trailer as well as subsidise the rent and utilities for a few months. Trailers were bought second-hand for €600-800. The trailers were bought to be the property of the NGOs. Each trailer cost a monthly rent of €60, plus €20 for common expenses, as well as an individual electricity bill. According to the contract with clients, after two years of smooth co-operation, clients could 'inherit' the trailer

and it would officially become their own property. Where the agreement was violated, new residents could move to the trailer and it remained the property of the service provider.

Most of the people who live here work normally. They get up at five or four in the morning... Some of them look through the garbage bins of the inner city, some in the outer districts. Some collect metal and take it to a recycling station. They earn 2-3-4 thousand forints a day, which is enough for them. Small families, the woman is at home, they have one or two children... The youngest one is two months old. (Support worker)

By the time of the research, the Landlord had acquired ownership of four trailers from the project: either the users sold them to him after becoming full owners, or in the case of a single person who had died, the landlord acquired it by no legal inheritor claiming it. The Landlord decided to sell the fourth one as no homeless person wanted to live there any more. Although residents of the trailer park appeared to form a community, support workers felt that the park could lead to clients being segregated from the rest of society. With the park situated on the border of the city, residents could not easily socialise with others and employment could be the only field of integration for them. However, many people worked for the trailer park owner, which could lead to further isolation.

Ownership

Outreach teams only supported six clients in buying their own property. As a home-owning society, it was understandable that some clients wished to become home-owners. However the amount of the re-housing support only allowed them to buy property of very low quality (or a container home) that needed renovation or lacked water, electricity and gas. Mostly these properties are located in the countryside far from bigger cities, which decreases the chances of finding a job. Ownership was only a real option for those with a stable income, usually with a pension.

Workers' hostel

Workers' hostel seemed like a good (although a bit more pricy) housing option for those who did not wish to live in a shelter for the homeless, who needed accommodation fast or who could not find a suitable homeless service but did not wish to live entirely on their own. Workers' hostels usually offer shared bedrooms, kitchens and bathrooms, but beds can be reserved even for one night – so people with no steady income can pay per night. They are very similar to hostels for the homeless, but there are no social support workers on duty. Seven people took up a place in one of these hostels at the outset of the project, but only one person was living there at the end of the agreement.

Project Challenges

The project encountered a number of key challenges, including the sustainability of housing, community integration, clients' lack of independent living skills, the prejudice of landlords and lack of staff time.

Sustainability

Long-term reintegration into the housing market could only be achieved if tenants managed to sustain their housing (or move to other similar accommodation). Arguably the greatest challenge of the project was the lack of clients' sufficient income to keep the housing once the financial support ran out. Most people had no stable work, nor were they capable of working full time due to their physical or mental state. Support staff tried to help their clients access any social benefits they might have been entitled to, but even if such was the case, this did not provide enough income to retain their housing. Therefore most people had to find some type of paid work to retain the housing and this was not easy for clients and staff.

We were glad to be out of the streets, but it did not turn out so well in the end. To be out of the forest, I mean. But after renting the apartment, we could not get a job. Even if I was called in for an interview, they would see that I am Roma, they would see that I don't have an address... I never made it. I think this is why many of us have failed. There was not enough money to pay for the apartment. I really think if we had had work, and more money, we would not have moved back to the forest. (Participant)

As housing support only lasted for about 12 months, those not able to live independently at this point had no choice but to return to the streets. Even during the 12 months of receiving housing support, clients had to pay their share for accommodation, which often exceeded one third of their income. Those with no or very low income could not choose to move to independent rented accommodation, simply because they could not have afforded it even with the support. This could explain why staff emphasise the role of a job or another sort of stable income, and why some teams preferred to support those homeless people who were more likely to succeed this way.

I do not have enough money to rent an apartment. There is no housing support, and I don't make enough to rent something for the two of us. You cannot even rent a place for €180, but even if you could, you would still need to pay more for the utilities. Altogether €260-300. Where would I get that sort of money? We both receive unemployment benefit, so we have €170 for the two of us. Plus whatever we can make. We have to make this last for the whole month. (Participant)

In this situation, couples were generally more successful than single persons as they could share the costs of living and could also provide each other with support. However, success was not dependent on family status alone, it was also related to addiction: couples were more successful when at least one of them did not have (severe) alcohol problems. Support workers found that families with small children were the ones that were the most motivated to access and sustain their accommodation. Often this was the condition to regain custody of their children, and be allowed to take care of them.

Community integration

Another challenge faced by some tenants was how to manage their own behaviour in a new accommodation setting, and also sometimes the behaviour of their peers. Living in the forest had its own rules: some homeless people had lived there as part of a forest community, sharing their income and some household chores together. These people got used to the rules of the forest community, and could struggle when trying to adapt to a new set of rules. For example, several people with severe alcohol dependence issues from one community moved to the trailer park together, and brought with them the chaotic lifestyle they had been used to in the forest. This is what the owner of the trailer-park (the landlord in this case) recalls:

When the first tenants arrived, they used to have big parties. Most of our tenants were alcoholics. Today they drink a bit. I've never seen people drink like them before: they stand in one place, drink pálinka [local strong liqueur], have misty eyes and then wet their pants. When they get up, their first thought is to go and beat up their wives.... In the beginning we had to call the police several times. One man set fire to his trailer, with his wife inside. Another one was caught stealing at night. (Landlord)

Some homeless people decided in the very beginning not to live in normal rented accommodation, because they feared neighbourhood conflicts. As one woman, living with her partner, explained:

Right in the beginning, I said we wanted to move to a trailer. I knew my husband, I knew that when he drank, he should not be around other people. So rented accommodation or a shelter was not an option for us. I said: 'let's move to a trailer'. (Participant)

In these cases – especially in the trailer park, but also in some rented accommodation where several friends had moved together – the old values clashed with the new ones. Community integration was a challenge as the old community still surrounded people, while a new community was also pressing them with new demands. Intensive support work could have prevented evictions in some cases, but usually staff could only visit their tenants once or twice a month.

Some people in rented accommodation struggled with the close proximity of neighbours as well. The man quoted below, together with his wife, was eventually evicted after several complaints by their neighbours:

They [the neighbours] didn't like it when we had a fight. The walls are thin, they could hear everything.... But I could have made a fuss because of their baby crying in the middle of the night. Or one of these gigantic men beating up his wife..... Anyway, I didn't like their attitude. It made me crazy: I turned the DVD player and the radio up real loud. What do they think, telling me how to live in my own home? ! (Participant)

Often, staff were called in too late or not at all, so they could not offer their help in mediating between their clients, the landlord and the neighbours. The most typical problems were complaints by neighbours because of loud or aggressive behaviour (either within the apartment or towards people in the neighbourhood) or the moving in of several other people (often more chaotic in behaviour than the original tenants). This process unfortunately left a mark on landlords in several cases, and some who were originally open to offer their housing for vulnerable populations have since changed their minds.

Several homeless people mentioned anxiety and stress as the cause, related to the insecurity of their housing situation, of their disruptive behaviour.

We argued less after we moved here. We argued all the time beforehand! We both had been very tense. When we had lived in [normal housing] before, we did not argue. After we had spent some time there, we knew we could go home and feel safe. But when... we did not know how much longer we could keep living there, we started to fight again. We felt very insecure. Then we argued about every little thing – like how much money one of us spent that day. (Participant)

Re-learning household skills

Independent living skills (cleaning, shopping, cooking etc.) were often a struggle for clients who moved to rented apartments. Support workers did not generally have extra time to help tenants with these issues and felt that it should have been a key aspect of the project. In certain cases a lack of these skills led to the renunciation of the contract by the landlord (for example, one tenant did not use the rooms properly, chopped wood in the kitchen or stored large quantities of garbage inside).

Landlord prejudices against homeless people

In some cases, homeless people reported that they experienced prejudice from potential landlords when looking for a flat. It was often a dilemma whether to tell the potential landlord about the person's homelessness or not. In certain cases it was inevitable as the support organisation transferred the re-housing support

directly to the landlord. Some landlords preferred it this way as well, as they felt a well-known organisation served as some kind of security. Other homeless people decided not to share this information with their landlord or their new community:

There were two nice couples on the same corridor where we lived. They were Hungarians, not Roma, but they still invited us over for the evening, and we also invited them over. We would drink coffee together, or share some beers. We did not tell them about our lives. I would say that we came from the east of the country. I would share this before they even asked about us. I would say that we came to find work. They did not see me there during the day. I left in the morning; I went back in the evening. They thought I had a job. They did not know we lived on garbage. (Participant)

Support workers were always present at the negotiation of the contract, but the contract was between the landlord and the tenants directly. One difficulty that support workers had to face was that some landlords were not willing to sign a contract. Rental contracts were normally signed by the landlord and tenants, while the supporting organisation also made a separate co-operation agreement with each client. In the absence of the support workers, landlords often refused to give an invoice/receipt after they took the deposit worth 2-3 months rent.

The landlord said it was way enough if one of us was registered in the flat. I came first and when I wanted to register my woman, he said no. So she doesn't have an address now. (Participant)

Staff also felt that often the landlords themselves were not much better off than their tenants, and tried to take advantage of the tenants. In some cases, they tried to raise the rent after the first few weeks; in several cases they were unwilling to return the deposit when the contract ended. One organisation mentioned a secret agreement between the client and the landlord: after the support worker had given the deposit to the landlord, they shared it and the client did not really move in to the apartment.

Man: The landlord was a thief!

Woman: We paid as much for one room as we had paid for the whole apartment in the previous place. And we couldn't take a shower any time we wanted.

Man: Shared bathroom? Shared kitchen? Leave me alone – they locked the door of these places, so we could not use them! (Participants)

Families with small children, Roma people and people with obvious marks on their faces left by their street lifestyle reported having a difficulty finding accommodation where landlords would trust them with the keys.

Support by staff

As mentioned before, there was only a small amount of funding available for support work by staff in the re-housing project.¹¹ Most of the support work was carried out by those outreach workers or staff from day centres who had known the tenants while living in the forest, usually after their regular work shift. In addition, tenants often moved to another district, thus creating additional difficulties to keeping in touch on a regular basis. It is likely that more intensive support would have resulted in higher tenancy sustainment, as well as more people accessing the private market in the first place.

Staff reported that in some cases they were at a loss as to what they should do in their new role of providing home visits as opposed to visiting people in the forest (most often bringing with tea, sandwiches, vitamins and blankets, as well as information). In some case this was cited as the other reason (apart from time constraints) for limiting support work to taking care of financial and administrative details. Tenants, on the other hand, mentioned their disappointment at the change in the support offered by staff – the change from living in the forest to living in some kind of accommodation, but also the change after the support had expired. One woman, having moved to the trailer park with her spouse and a friend, talked about her disappointment about not being entitled to the Christmas packages they had enjoyed while living in the forest. Another woman mentioned how she was disillusioned by the team who did not visit them after the support had ran out, even when her husband (“whom they had all liked”) fell ill and eventually died¹².

The staff consisted mostly of outreach workers, with a qualification of social work or social education. Many of them expressed the need for involving professionals with other qualifications, particularly in mental health issues, substance abuse and legal expertise on housing, which would have helped them in those cases where they felt inadequately trained.

¹¹ About €18 a month per tenant – the equivalent of about 4-5 hours of paid work. Calculating the time spent on transport as well, this did not allow for more than two visits a month on average.

¹² They did help in arranging – and paying for – the funeral, though.

Conclusions

The biggest challenge for the makers of housing policy in transitional countries is to provide institutional assistance to those social groups who have become vulnerable due to structural changes in the economy, including the privatization of housing and the commoditization of public services. (Hegedüs, 2011, p.24)

Since transition, Hungarian housing policy has focused on home ownership, with little attention to the social sector with the exception of privatising the stock to reduce its capacity further at a time of growing need. The private rented sector is often the only option for housing for vulnerable populations, yet this sector is poorly prepared to respond to the needs of homeless people. Landlords can be reluctant to accommodate people with support needs. This study has also shown very starkly how housing allowances, and other benefits, are inadequate in assisting people to sustain housing in Hungary without additional special assistance from homelessness funds. Arguably, if the state does not have enough capacity to offer social housing to all who need it, and the construction of social housing units is not feasible, sustainable housing benefits should be made available for all those with a low income who need to be housed through the private rental market. Housing benefits should cover (a share of) both rent and utilities, and should last as long as needed, and not just for a limited amount of time.

Hungarian policy also has to focus on combating the shortcomings of the current official system of address registration. Landlords should be obliged to register tenants (if they wish to be registered). Any system of social support has to be devised so that those who are vulnerable do not miss out on any benefits because of their insecure situation.

The present study has also highlighted that finding employment is of central importance in re-housing vulnerable populations in Central and Eastern European countries. It is essential partly because (in most cases at least) a stable income is needed to sustain housing, and partly because of the additional benefits it offers, including meaningful activity and opportunities for social integration. Gaining employment is recognised as an important element in preventing and ending homelessness across Europe, including the need for supported employment schemes for homeless people (FEANTSA, 2009). If there are no jobs (which unfortunately is the case in many member states in the current economic crisis), a sufficient minimum income needs to be available for those who are living in vulnerable situations.

However, reflecting homelessness experience more generally throughout Europe, the present study also strongly suggests that housing allowances or an adequate income may not be enough for housing sustainment: some people also need other forms of support to be able to enter the housing market, and to retain the housing

in the long term. Individual support needs to be available for those homeless people, especially former rough sleepers with issues of mental health and/or substance abuse who are moving into the private housing market. This study also highlights how support may need to be quite intensive at times and that support should be flexible to meet needs. Support staff should have the capacity to carry out their work during work hours, rather than as additional employment after their main day job has ended, an issue that is not usually faced by most Western European countries.

In Hungary, there is a relatively well developed NGO homelessness sector capable of delivering innovative new programmes, and one which has already had substantial influence on policy making in this area. However, although Budapest has a housing and homelessness strategy, there is no overall homeless policy at a national level, and whilst some national funding has been made available to address homelessness, overall it is a relatively low policy priority. In short, present homelessness policy is not well equipped to address systemic problems that lead to homelessness and housing exclusion.

As outlined, homelessness services in Hungary mainly offer basic shelter and hostel services within a broad 'staircase' framework (with missing higher rungs). Housing First, and/or a housing led approach, is now acknowledged as offering a good model as to how chronically homeless people can be helped with housing, supported by evidence of high rates of housing retention (Tsemberis, 2010). The relatively intensive support available in this model, including support from specialist mental health and addiction teams, is unlikely to be easily replicated in the Hungarian context. However, this study has shown that people who have slept rough for many years can move straight into private rented housing or alternative options such as housing trailers. Retention rates however are low due to the relatively low level of support and particularly lack of financial resources to meet relatively high rents in the sector. At the very least, Hungarian homelessness policy should work towards providing longer term schemes that can offer people assistance for a number of years; giving them a greater opportunity to address support needs and re-engage with work.

While re-housing former homeless people, especially rough sleepers with a long history of homelessness will mean the allocation of scarce resources, there is increasing evidence that there are also substantial gains to society (Culhane *et al*, 2002). This includes both financial gains, for example fewer days spent in prison or hospital, and also humane gains of a more just society where no-one has to live in precarious situations such as in a forest due to inadequate housing options.

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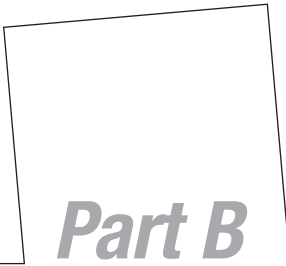
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Policy Reviews



Part B



The First Portuguese Homelessness Strategy: Progress and Obstacles

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› **Abstract_** *On March 2009 the Portuguese Government officially launched The National Strategy for the Integration of Homeless People – Prevention, Intervention and Follow-Up, 2009–2015 (ENIPSA), the first Portuguese National Strategy on Homelessness. This paper focuses on the implementation of ENIPSA since its adoption four years ago; it presents and discusses the main achievements and unaccomplished outcomes of the implementation stage of ENIPSA between 2009 and the end of 2012. The paper discusses the dissonance between the initial policy and the institutional chances provided for in the national strategy, the first of its kind in Southern Europe and also details the challenges encountered during the implementation stage. The paper provides a critical review of the different implementation phases of the ENIPSA, highlighting both overall policy and political challenges encountered and the concrete outcomes achieved at the local level. The expectations raised by the adoption of the first Southern European national strategy on homelessness is brought back to the reality of actual political, economic, institutional, and organisational challenges. The first three sections set the scene regarding the overall context in which the Strategy was launched, both regarding welfare related challenges and the development of homelessness in Portugal. The following sections highlight specific dimensions of the Strategy's implementation outcomes: Governance arrangements; ¹ data collection developments; local implementation dynamics; challenges relating to intervention practices; quality frameworks' design; and funding arrangements. The discussion section presents the main conclusions and lessons learnt from the implementation challenges faced by Portugal's first strategic policy approach towards homelessness, and hopes to contribute to the overall EU debate on the importance of strategically addressing homelessness in different national contexts.*

› **Keywords_** *Homeless strategy, Portugal, policy change, evaluation, outcomes*

¹ The author is directly involved in one of the accompanying structures of the ENIPSA.

Introduction

The Ministry for Labour and Social Solidarity had overall responsibility for *The National Strategy for the Integration of Homeless People* (ENIPSA), which was launched in March 2009; ENIPSA was the first strategic approach to homelessness at a national level in Portugal. The drafting and approval of ENIPSA was embedded within a policy trajectory that was characterised both by changes in the debate around social issues (Pereirinha, 2006), and also by the persistence of “old” forms of service provision and entrenched patterns of engagement between different stakeholders (Baptista, 2009). The approval of the National Strategy created the potential for change within the homelessness sector which benefited from the implementation of new forms of local public policies to tackle the phenomena of poverty and social exclusion (Guerra, 2002) and by the development of innovative forms of partnership at the local level (Baptista and O’Sullivan, 2008). Mounting evidence from within the EU regarding the importance of developing integrated strategies to tackle homelessness was the external key driver for the recognition of the relevance of a national strategic approach towards homelessness.

Yet, the implementation of ENIPSA and its success in bringing about actual change in the delivery of homelessness services also depended on its ability to overcome some structural constraints, some of which had already been identified during the drafting stage (Baptista, 2009). The homelessness sector in Portugal has traditionally been characterised by fragmentation, a lack of common guidelines and an absence of cooperative initiatives. In recent years, there has been a clear evolution in the homelessness sector; there is greater diversification in the type of services provided, a growing involvement on the part of local municipalities and increased participation in local networks. However, the diverse – and even conflicting – organisational philosophies, practices and structures of NGOs working with the homeless population, the nature of their relationships with the funding entities, particularly with the State, the continuity of funding mechanisms that do not enhance, but rather curtail interagency work, and the persistence of a very restricted and often individualised conceptualisation of homelessness raise important challenges to the implementation of an integrated and strategic approach to homelessness.

Moreover, the promised policy change introduced by the approval of the first Southern European strategy on homelessness also depended on the ability of different institutional stakeholders to deepen – or at least sustain – a challenging redefined power balance (Baptista, 2009) within the framework of social policy making, and on the ability to redefine the allocation of resources towards a “new” state project competing with other – already existing – state projects (Baptista and O’Sullivan, 2008).

A new political orientation introduced in mid-2011, following the resignation of the Government, and the resulting shift in power from the Socialist Party to a coalition of the liberal conservative Social Democratic Party and the right-wing conservative People's Party, increased the challenges in implementing ENIPSA. The most emblematic of this shift was the Social Emergency Plan (PES) launched by the Ministry of Solidarity and Social Security, which seemed to stem from an ideological shift regarding the role of social policies, their understanding of poverty and social exclusion and the model of cooperation between the State and social providers (namely NGOs). Its focus on the reinforcement of the emergency side of service provision, its ethical perspective on the poor and their "debt to society" and the new paradigm of the relationship between the State and NGOs are clearly not compatible with integrated rights-based strategies aimed at promoting social change and fostering social inclusion, especially among the most vulnerable populations.

It is of particular relevance that the approach taken by the PES announced a new type of relationship between the State and the NGOs: "Social institutions are there to help others and now the time has come for the Government, humbly, to ask for their help".² This perspective introduces a model of cooperation which is not compatible with promoting a framework for cooperation between the State and the NGO sector based on the definition of aims, of mutual responsibilities, on the establishment of quality standards, and on the need for increased monitoring and assessment of the services provided. This kind of "blank check" - welcomed by many NGOs - also represents a withdrawal of the State's responsibilities in strategically addressing social inclusion challenges. The fact that ENIPSA disappeared from both the 2012 and the 2013 National Reform Programmes³ illustrates the "new directions" of on-going reforms of social welfare policies.

² Minister for Solidarity and Social Security's speech in the presentation of the Social Emergency Plan (PES)[August 2011].

³ The National Reform Programmes are the annual plans with the reforms and measures to make progress towards smart, sustainable and inclusive growth, in areas such as employment, research, innovation, energy or social inclusion submitted by each Member State to the EC.

Social Welfare Policies, Social Inclusion and the Crisis: Where “Old” Challenges Meet “New” Trends

The Portuguese welfare regime is often characterised as underdeveloped compared with the core European countries and sharing characteristics with other southern welfare models, which include the centrality of family solidarity networks; the inefficiency of welfare-state institutions (Karamessini, 2008); the relatively weak mainstream welfare safety nets (Stephens *et al.*, 2010); the high level of state centralisation and the highly fragmented civil society (Ferreira, 2005). In addition, Mozzicafredo (1997) argues that the structuring of the welfare state in Portugal has been a disjointed and fragmented process, both as a result of different power pressures and imbalances coming from social groups as well as available public resources.

Portugal has one of the highest levels of income poverty among EU15 member states. The most recent statistical data show that the poverty rate remained almost unchanged between 2009 and 2011. However, the poverty threshold was lowered in 2010, thus, given the decline in the overall median income in Portugal, people with the same income have now exited poverty, without any actual improvement in their living conditions. The Portuguese National Statistical Institute released the poverty rates for the same years, using a poverty threshold anchored in time (2009) in order to counter balance the effects of the lowering national median income. The figures show an increase in the poverty rate from 17.9 percent in 2009 to 19.6 percent in 2010 and a further increase to 21.3 percent in 2011. Such poverty rates had not been registered since the mid 1990's. On the other hand, the impact of social transfers in reducing the risk of poverty is decreasing.

The social impacts of the economic crisis in Portugal have been exacerbated by the implementation of successive austerity packages. The successive cuts and restrictions imposed on social benefits, the reduction of salaries, the freezing of pensions, and increased taxation are just some of the factors that are contributing to the erosion of the fragile gains that were achieved in reducing poverty and inequality in the last two decades. The renewed deepening of 'old structural trends' which had previously been partially addressed (e.g. in-work poverty, child poverty, inequality) is occurring whilst a continuing inability to learn from failures and to anticipate or even assess the impacts of policy measures continues to be deeply rooted in the Portuguese policy making process (Baptista and Perista, 2013).

Access to Housing in Portugal and Homelessness

According to the Portuguese Constitution: “All have the right to have, for themselves and their family, a house of an adequate size, with comfort and hygienic conditions and which allows the preservation of individual life and family privacy” (Article 65° of the Portuguese Constitution). Although the right to housing exists in Portugal, it is not an enforceable right. In common with other Mediterranean regimes, the Portuguese housing system is characterised by a high rate of home ownership and high levels of unencumbered ownership, a small social rented sector and a low reliance on housing allowances.

In allocating of social housing in Portugal, priority is given to people living in shanties, living in very low quality housing as well as to economically vulnerable people. Major rehousing programmes launched in the mid 1990’s managed to reduce the number of shanties from 16 105 units in 1991 to 2 052 in 2011. Social housing represents a marginal share of the total housing sector: In 2011 the social housing sector represented 2 percent of the total housing units, but it accounted for 14.3 percent of the total rented sector. The limitations on the supply side of the rental market and the promotion of owner-occupied housing through a means-tested, subsidised mortgage credit system, together with cultural factors, have curtailed the actual range of alternative routes to access housing.

The homeless population – as defined by the National Strategy – has not been a priority group when it comes to the allocation of social housing. The national legislation determines that social housing addresses the needs of households defined as “living in a situation of serious housing disadvantage.”⁴ The definition of housing disadvantage was not conceived with the concern to address homelessness. Given the scarcity of social housing in Portugal and the focus of public housing policies and programmes on the situation of households living in very degraded accommodation (e.g. shanties), the ETHOS categories included in the homelessness official definition have not been given the necessary attention. On the other hand, in Portugal, homelessness has been understood as an issue to be tackled primarily by social services, rather than housing services. Until now, homelessness has not yet been addressed by substantive measures in terms of housing policy.

⁴ Households living in a situation of serious housing disadvantage means those households “which are permanently living in dwellings or parts of dwellings or other building structures which are temporary, characterised by serious conditions of security, hygiene or overcrowding, as well as those situations of households who urgently – either temporarily or permanently – have no place to live due to the total or partial destruction of their dwellings or because of the demolition of the temporary structures they were inhabiting.” Decree-Law 54/2007 of March 12th 2007.

Three main barriers have prevented homeless people from accessing housing in Portugal: 1) the not recognising that houseless and roofless people need permanent accommodation, in addition to social services; 2) the focus of social housing efforts in the rehousing of families living in insecure (from a physical perspective) accommodation; 3) the scarcity of social housing. In addition, the emergency and provisional nature of many institutional responses, the lack of support aimed at resettlement, and the absence of prevention-oriented interventions have directly contributed to the persistence of homelessness.

The Portuguese National Strategy on Homelessness

The Portuguese strategy is largely made up of a set of general aims that are to be implemented at the local level. Its two main aims are:

- To enhance the evidence base on homelessness through the adoption of an agreed definition and a shared information and monitoring system;
- To promote quality in homelessness services and responses.

These aims are translated into operational or strategic objectives, which in turn correspond to targets and specific activities. Specific areas of action include: (i) prevention of homelessness arising from evictions or discharge from institutions; (ii) direct intervention in situations of homelessness, focusing on the clarification of procedures and responsibilities and also on innovative approaches; (iii) follow-up support after resettlement, which is to be achieved through the local social networks; (iv) staff training, as a way of improving services to homeless people.

The Strategy is based on a fairly narrow definition of homelessness: “A homeless person is considered to be an individual who, regardless of nationality, age, sex, socio-economic status and mental and physical health, is roofless and living in a public space or insecure form of shelter or accommodated in an emergency shelter, or is houseless and living in temporary accommodation for homeless people” (GIMAE, 2010b, p.18).

Local action is strongly promoted by the Strategy. Guidelines for local assessment of homelessness and for local plans to tackle the issue are disseminated at a national level. These plans are to be defined and implemented within the local social networks in accordance with the Strategy’s directions. The local units (NPISA) are closely involved in preventive and remedial action, as well as in information gathering. Specific targets are agreed at the local level. The Strategy also establishes an organisational structure for the implementation, monitoring and evaluation of the Strategy, both at a national level (e.g. executive and consultation bodies) and at a local level (e.g. executive units, cooperation with local social networks).

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A dedicated budget of €75m for the implementation of the Strategy was announced when the Strategy was launched. However, there is no evidence of how (and if) this budget has in fact been allocated to the implementation of ENIPSA. No information regarding the allocations of funds has ever been included in the Strategy's annual action plans since the first action plan. The National Strategy document itself did not include any reference to the budgeting of the activities foreseen for the several implementation stages. This gap has previously been identified as a major shortcoming of the Strategy (Baptista, 2009). This lack of information regarding budget allocation has not been found in other national homelessness strategies, for example in Denmark or in the Netherlands (Benjaminsen, 2013; Hermans, 2012).

Implementation of the Strategy

A key feature of the first Portuguese National Strategy on Homelessness was the establishment and the consolidation of a strong partnership approach initiated at the drafting stage (Baptista, 2009), which was considered an important asset for the implementation stage. Therefore, the review of the implementation of the Portuguese Strategy will start by presenting and discussing the development of such governance arrangements in order to better understand the successes and failures of the Strategy from the second quarter of 2009 onwards.

The governance structure through the implementation stage: a missed opportunity for policy change?

“The Portuguese National Strategy on Homelessness was suggested as a subject for Peer Review mainly because of the comprehensive and participative approach developed in all phases of strategic development – design, implementation, monitoring and evaluation.(...) There is a clear concern throughout the Strategy to address the issue of the participation of different stakeholders in implementation, and this is one of its guiding principles.”(Fitzpatrick, 2011, p.15)

The ENIPSA governance structure, which was designed during the drafting of the Strategy, was meant to be redesigned during the implementation stage, reinforcing the continuity of the collaborative partnership arrangements. The nurturing role of the Strategy's coordination was considered to be crucial to ensuring the success of the Portuguese National Strategy on Homelessness (Baptista, 2009).

The Strategy foresaw the redesign of the core Inter-Institutional Group (GIMAE), which was responsible for devising the Strategy. At the central level, the GIMAE was split into two structures: The executive unit composed by organisations directly involved in the development of the activities foreseen in the action plans; and an extended committee with a consultative nature. A consultative body should also have

been created but it never materialised. Eight smaller working groups were also created, including researchers, experts and different organisations oriented towards the key strategic objectives. These smaller groups were established with the aim to assist the work of the executive unit. No additional financial resources were allocated for the operation of any of these structures. All entities – public or private – provided their human resources on a voluntary basis. At the local level it was envisaged that there would be the gradual establishment of Local Homelessness Planning and Intervention Units (NPISA), responsible for coordinating the local provision of homelessness services, in line with the Strategy's guidelines. These focal points are also the local homelessness counterparts of the national executive unit.

It is possible to identify two different stages (see Table 1) regarding the operation of these governance structures – particularly at the central level – during the implementation stage that lasted from mid-2009 to the end of the first quarter 2013.

Table 1: ENIPSA Central Level Government Structures During Implementation Stage

Mid 2009-Beginning 2011		Mid 2011-Mid 2013	
Structures planned	Operational Status	Structures Planned	Operational Status
Executive Unit	Fully operational (Monthly meetings and active support to local units)	Executive Unit	Partially operational (Irregular meetings; support to local units ceased)
Enlarged Commission	Fully operational (Bi-annual meetings)	Enlarged Commission	Not operational (Meetings ceased) (1)
Consultative Committee	Not assigned	Consultative Committee	Not assigned
Working Groups	Fully operational (Meetings variable according to tasks)	Working Groups	Not operational (Working groups dismantled) (2)

(1) Enlarged Commission started to operate again in the second quarter of 2013.

(2) New Working Groups set up in the second quarter of 2013 and operated until July 2012. Presently the Working Groups are at a halt.

The first phase covered a period of one and half year (mid 2009-beginning of 2011). During this stage, the executive unit and the extended committee were set up and met regularly (on a monthly and on a quarterly basis, respectively). The activating and nurturing (Baptista, 2009) role of the coordinating entity⁵ was kept throughout this whole period.

During this period both national level structures were reinforced by new partners who joined in, given their strategic importance for the development of the activities foreseen in the annual action plans. Such is the case, for example, of the National

⁵ The Institute for Social Security under the responsibility of the Ministry for Solidarity and Social Security.

Statistics Institute on the use and dissemination of the homelessness definition, the information system to be developed and also the 2011 census operation. The eight working groups were set up and actively operating until the end of the second quarter of 2010. Most of the outcomes regarding some of the activities mentioned before – e.g. training modules for professionals, initial drafts for risk indicators – were prepared by those groups.

The coordination of the ENIPSA – supported by the executive unit – was responsible for preparing the 2009 activity report of the implementation of the activities. The 2010 report was not finalised, although in early 2011, a summary of the activities implemented until November 2010 among the members of the ENIPSA structures was circulated. The second phase of the implementation period initiated in the second quarter of 2011 was characterised by profound changes in the coordinating team and by the overall institutional changes that followed the shift in political power, which took place after the June 2011 elections. During this second stage, the central structures almost ceased to work: the executive unit still met a couple of times over the two years, but the activities of the enlarged consultative body ceased. The working groups were also dismantled and their activities ceased. No annual reports on the implementation of the strategy were circulated during this stage. In March 2013 the new coordinators of the ENIPSA circulated an executive summary with an overview of the implementation of the activities from 2009 to 2012.

In short, the expected continuity in the collaborative operating mode of the central governance structures of the National Strategy was not achieved. The level of cooperation and communication achieved between the different entities and the different participants during the policy design stage did not withstand the organisational (and individual) changes and, most of all, the institutional setback of the coordinating agency for the implementation of the first Portuguese Homelessness Strategy.

At the local level, the scenario is somewhat different in spite of the impacts of these two contradictory stages within the development of the national governance structures. As referred to before there has been a gradual implementation of local homelessness units – mostly led by the local authorities but also by local social security services and in some cases by NGOs – in different municipalities since the launching of the National Strategy. The main difference regarding the operation of the local units is the level of support that was given by the central structure of the ENIPSA during the two stages of implementation. The evaluation of the Homelessness Strategy had foreseen the involvement of external agencies both in its initial stage and in its latter stage. The former step regarded the diagnosis of the situation in 2009 and the latter, an outcome evaluation using the 2009 base line in order to assess the effectiveness of the interventions carried out during the first years. This evaluation was never carried out due to budgetary constraints and to

the disturbances occurred in the coordination of the ENIPSA. In March 2013, a new coordinating team was established within the Institute for Social Security and the two central structures of the ENIPSA were given a new impetus. New working groups have been established and have started to operate. Budgetary constraints remain within the overall context of public spending cuts.

Finally, it is important to refer that – contrary to other national strategies or plans (e.g. the National Strategy for the Integration of Roma Communities or the Plan for the Integration of Immigrants) – the ENIPSA was never established on a statutory basis. Since the approval of the Strategy in 2009, several efforts and concrete proposals for a Resolution were presented by the Inter-Institutional Group with the agreement of all the statutory and non-statutory entities involved. This proposal of Resolution never succeeded to get through to the Council of Ministers, the approval of which is necessary to turn the ENIPSA into a legally binding document. At the present moment, a new attempt is under preparation following the apparent new impetus given by the Ministry of Solidarity and Social Security to the implementation of the National Strategy.

Enhancing knowledge and improving evidence base for policy development

The Portuguese National Strategy on Homelessness is organised around two main axes, one of which directly relates to enhancing evidence-based knowledge on homelessness through the use and dissemination of an agreed definition of homelessness, and of a shared information and monitoring system. In Portugal, there has been a lack of reliable data on homelessness. The first national survey (one night count) was launched in 2005 under the responsibility of the Institute for Social Security (ISS) and aimed at identifying and characterising “all the people who were sleeping rough, in the city head of the municipality in inland⁶ Portugal, during a fixed period of time.”(ISS, 2005). A total of 467 people sleeping rough were identified and characterised. In 2009, the ISS launched a second national survey addressed at all inland municipalities. A total of 2 133 people in a homelessness situation – corresponding to the official definition of homelessness included in the National Strategy⁷ – were identified across the responding 53 municipalities (out of the 308). The most part of the situations (63 percent) were identified in Lisbon and Porto. In 2011 the Census recorded a total of 696 homelessness situations in Portugal, which cover only conceptual categories 1.1. and 1.2. (roofless) of the ETHOS typology.

⁶ The survey did not cover municipalities in the Autonomous Regions of Azores and Madeira.

⁷ The definition includes both homeless and houseless people, where the former corresponds to all the situations on the street overnight accommodation and unconventional (car, abandoned building...) and the second to situations of emergency accommodation, temporary accommodation or pension or rented room which is paid for by social security services.

Several criticisms have been voiced – primarily by NGO service providers – noting the lack of scope of the national counts undertaken and the fact that they only capture a minor portion of the total homeless population, namely since it excludes all houseless situations. On the other hand, the statistics on clients regularly provided by NGOs are collected in the most diverse ways and their purpose is essentially for the internal use of each service provider, aiming at the management of service provision. Each organisation decides on the type of methodology to be used and the quality of the information produced varies a lot.

The National Strategy on Homelessness set the objective of establishing and disseminating an official definition of homelessness which would be used as a common reference for data collection exercises and to build a monitoring and information system on homelessness based on the development of a client record system and of a service provider's data base. The information system was expected to be finalised by the end of 2010. The dissemination of the official definition of homelessness was initiated following the approval of the ENIPSA, both through the institutional bodies represented in the GIMAE and by a wider dissemination towards the local level, namely through the gradual establishment of the local homelessness units.

According to ENIPSA internal reports (GIMAE, 2010a and b; ENIPSA, 2013a) it was possible to undertake several activities aiming at the dissemination of the official definition – namely during the first implementation stage – although several difficulties were identified during this process (e.g. lengthy and bureaucratic intra-institutional communication channels; little availability of the members of the GIMAE group to participate in dissemination activities, particularly outside Lisbon; some resistance from service providers working in this field). A questionnaire sent to all municipalities during 2012 (ENIPSA, 2013b) in order to update the situation at the local level, showed that 35 out of 58 municipalities⁸ knows and uses the ENIPSA definition of homelessness; 32 out of 60 municipalities confirmed that they knew about the existence of the National Strategy.

As regards the building up of the monitoring and information system on homelessness, the building up of a monitoring and information system on homelessness has not proceeded as planned. By the end of 2010, and contrary to the originally proposal included in the ENIPSA, it had become impossible to proceed with the building up of a specific database and information system on homelessness. Aside from the growing financial constraints, internal difficulties of harmonisation and “ownership” within the different social security services and respective information systems were raising insurmountable obstacles to the original idea. Instead, the

⁸ The questionnaires were sent to all municipalities in inland Portugal (278) and a total of 132 responses were received. The response rate varies according to the different questions included in the questionnaire, which explains the total of 58 and 60 municipalities referred to in the text.

ISS proposed the inclusion of the variables recommended at European level (MPHASIS project⁹) in the social security system. Additionally, the ISS launched a national survey – in 2009 and in 2011 – “to allow a local and national diagnosis of the profile of the homeless population in Portugal.” (ENIPSA, 2013a, p.7) However, the much-reduced number of responses collected in the 2011 survey prevented the utilisation of the data collected.

In brief, the National Strategy failed to meet the main objectives proposed regarding the enhancement of evidence-based knowledge on homelessness. The initiatives undertaken at the national level, so far, have added little to the persisting lack of reliable and robust data on homelessness. The lack of support from the central level during the second stage of implementation of the National Strategy together with the inexistence of any legal obligation to comply to the Strategy’s guidelines and with the lack of any additional funding to implement the measures foreseen have contributed to this mismatch between objectives foreseen and achievements attained. However, it is important to refer that the adoption of the official definition of homelessness at the local level by several municipalities (namely those registering the highest homelessness figures) has created a common reference basis that may be crucial for future developments in the field of data collection on homelessness.

Implementing the National Strategy on Homelessness – from central provisions to local tailoring

The ENIPSA is composed mostly of a set of general aims which are to be implemented at a local level based on specific homelessness plans and under the guidance of local homelessness networks or key focal points of the local social networks (depending on the size of the phenomenon and existing local network). The Strategy proposes the drafting of local plans, which will be set up following a diagnosis of local needs, and provides specific intervention principles and methodological orientations. Although there is no legal obligation or the provision of any additional funding for the creation and operation of the local homelessness networks, a total of 14 local networks (NPISA) were created since 2009. These 14 local units correspond to major urban areas, mostly located in coastal areas where most of the Portuguese population lives and where homelessness is more extensive. Most of these local units were created during the first implementation stage. Some of the major difficulties identified (GIMAE, 2010a and b) as regards the implementation and operation of these units relate, namely to: the lack of participation of some

⁹ The MPHASIS project was funded by DG Employment, Social Affairs and Equal Opportunities PROGRESS Programme and its main objective was to improve the capacity for monitoring information on homelessness and housing exclusion in the EU. More info on the Project available at: <http://www.trp.dundee.ac.uk/research/mphasis/>

key stakeholders; insufficient human resources allocated to carry out the tasks set out in the Strategy as regards the role of the local units; insufficient budget allocation for implementation.

One of the innovative features of the implementation of the ENIPSA at the local level lies precisely in the dynamics created following the approval of the strategy. Several existing local networks – usually coordinated by local authorities – managed to set up specific units for addressing homelessness using the existing local human and financial resources, in order to respond to the objectives and the guidelines set in the National Strategy. The issue was brought to the local public agenda, a diagnosis on homelessness was either made or updated, resources were re-organised and intervention practices re-examined and adapted to the identified needs.

The effort put in involving major local authorities (e.g. Lisbon and Oporto) and the national association of municipalities during the preparatory stage of the ENIPSA and in the first stage of implementation has, in our opinion, given an important contribution to this local “buy-in”.

One of the priority areas explicitly included in the ENIPSA was that a case management approach for homeless individuals be developed and mainstreamed to ensure that an individual’s unique needs would be addressed and long-term solutions found. The introduction of such an approach was to be developed by the local homelessness networks and actively supported by the central ENIPSA team. By the end of the first quarter 2011 a total of 14 local homelessness networks had been created. Eleven NPISA had completed their local diagnosis; five had established their local action plan and three had started to work according to the National Strategy’s proposed approach, and six were discussing and preparing the introduction of the case management approach within the local network.

The monitoring – by the GIMAE – of the implementation of the Strategy’s activities during its first stage (from mid-2009 to the beginning of 2011) showed that the work of the local homelessness networks encountered both facilitating features and obstacles. Among the former it is important to highlight the local stakeholders’ motivation regarding the involvement in the local homelessness units and the ability to develop joint local homelessness diagnoses. As regards the case management approach it was possible to identify difficulties to operationalize some of the solutions identified, namely as regards the lack of non-temporary housing solutions¹⁰. Moreover, difficulties were also felt regarding identified solutions for the

¹⁰ It is important to recall that owner-occupation remains the main housing tenure in Portugal. According to the 2011 Census the owner occupation rate was 73.2 percent.

restructuring of existing accommodation alternatives and the postponing of the announced funding Programme to support homelessness projects (PLASA) within the context of the National Strategy.

According to the latest ENIPSA internal report (ENIPSA, 2013b) by the end of 2012, the number of local homelessness networks had remained the same (14). However, a total of 26 local units (29 municipalities identified homelessness as a relevant issue) reported they were developing activities addressing the homeless population, within the context of the National Strategy's policy orientations. The intervention model proposed by the ENIPSA is being implemented in 16 local municipalities and 13 have already engaged in developing a case management approach (compared to three by the end of 2010). Most of the local homelessness networks are being coordinated by the local authority (6 out of 13), followed by NGOs (3) and the local social security unit (2).

No systematic information is available regarding the achievements and obstacles felt by these local homelessness networks in implementing the intervention model proposed by the National Strategy. However, information collected through interviews with several responsible officials from local homelessness units highlights difficulties regarding namely: the sharing of responsibilities among local partners and changes in existing organisational working models (particularly in bigger territorial units involving a high number of organisations and strong power relationships); the lack of funding support to enable the operation of a model which is staff demanding; the lack of affordable housing and housing support mechanisms to sustain resettlement projects; lack of expertise and resources for the management and treatment of the information collected; overall challenges arising from cuts in benefits and a shift towards emergency services and supports. Several positive developments have also been registered as a consequence of the establishment of these local homelessness networks, namely: the opportunity to bring the homelessness issue to local policy agendas; positive engagement of "new" stakeholders (e.g. the police forces) in a supportive role in addressing homelessness; increased collaboration among local service providers; development of pilot experiences in the area of housing-led approaches to tackling homelessness (e.g. housing first projects) and homelessness prevention (e.g. protocols between statutory prison services and local homelessness units regarding joint working to prevent homelessness following institutional release).

Overall, the local implementation of the National Strategy's guidelines and recommendations has shown considerable drive taking into consideration the overarching policy context, e.g., the lack of any enforceable duty to engage in the activities

proposed by the ENIPSA; the halt registered in the central level support (human and financial) foreseen; and the lack of an actual and rigorous monitoring and evaluation of the Strategy's objectives and corresponding activities.

***Developing effective intervention approaches:
the difficult road towards practice change***

The adoption of consistent intervention methodologies, namely the introduction and development of a case management approach by local homelessness networks aimed at responding effectively to the multiple needs of homeless clients is imperative. Evidence and experience in international literature has shown the potential of case management approaches in responding to the increasing complexity of clients' support needs. Changing intervention practices was an audacious objective and one that needed continuity, sustainability and support. The National Strategy on Homelessness included training and information programmes for the local homelessness networks' staff, as well as the development of specific training resources. These initiatives aimed at supporting the difficult road towards change involved in the implementation of the Strategy's proposed working methodology.

It is important to recall that although some NGOs federations had been involved in the drafting of the ENIPSA and continued to participate in the following implementation stages, their actual capacity to represent the whole homelessness sector cannot be taken for granted. In fact, the Portuguese homelessness sector of service providers is characterised by a wide dispersion of organisations, operating in very different ways and based on diverse organisational philosophies. Changing working practices within the sector was therefore a difficult task.

The training and other support activities foreseen for the initial stage of the ENIPSA implementation might have been a potential drive for achieving those changes. However, although the structuring of the training activities – namely the building up of a training programme to support practitioners – was achieved during the first implementation stage, no follow up took place, i.e. no training was provided to the support services' staff.

The recognition that promoting the use of effective, supportive interventions with people experiencing homelessness involved change in existing practices was one of the major concerns of the strategic approach introduced in the homelessness arena by the approval of the first National Strategy on Homelessness. One of the two major axis of the ENIPSA aims at enhancing the quality of intervention. Thus, the emphasis that was put on the development of resources that would support the proposed introduction of an integrated model for the provision of homelessness services based on the development of a case management approach. The training programme is currently ready but has not received approval for implementation

given “the lack of financial resources allocated to the ENIPSA” (ENIPSA, 2013a: 18). The local homelessness units’ staff of the two major cities should have received specific training by the end of 2012, a target that was not met.

As referred to in the previous section a total of 13 local homelessness units have engaged in implementing a case management approach. However, there is no information on whether those teams received any kind of information and training support previous to – and during –the introduction of this new working methodology. At the central level, the GIMAE was responsible for enabling the necessary support mechanisms for promoting changes towards more effective interventions and for monitoring the results of this process. This target has not been achieved either.

Finally, it is important to refer that the ENIPSA included the implementation – as a pilot project – of a housing first project, which would be monitored and evaluated within the framework of the National Strategy and eventually disseminated following the experimental stage. This experimental project was launched in September 2009 but both its approval and its monitoring followed a path that rather than being integrated into the operational framework of the ENIPSA ran in parallel, through bi-lateral arrangements between the funding entity and the implementing organisation.

Quality frameworks for homelessness services and structures – from intentions to practice

The Portuguese National Strategy on Homelessness identified the need to ensure that homeless people receive quality services and adequate support to meet their needs. The need for developing quality frameworks for homelessness services and structures was one of the recommendations of an evaluation carried out by the Ministry of Solidarity and Social Security in 2007 on the operation of homelessness services – namely emergency accommodation structures – in three major cities (Lisbon, Porto and Setúbal). The evidence produced showed the existence of “severe deficiencies in the operation of the structures and the ineffectiveness of the intervention as regards the insertion and the promotion of autonomy among homeless people” (ENIPSA, 2013a: 20).

One of the objectives of the ENIPSA aimed at responding to this gap by setting up several targets as regards the quality improvement of existing structures and services. These targets included: a) the regulation of the existing social responses by defining a set of minimum operational criteria; b) the recognition of “reference services” within the homelessness sector, and c) the evaluation of the existing structures and services. None of these targets was achieved.

A first proposal for the regulation of existing social responses in this area was prepared and presented but, once again, it still awaits “superior approval”. The activities developed by the group in charge of coordinating this area within the

ENIPSA encountered strong resistance from the very beginning. In fact, the regulation of the homelessness sector remains non-existent. Services and structures operating in this field are designated as “atypical responses”. Introducing specific operational criteria and creating new designations for this type of structures and services within the social security area was particularly difficult. The primary obstacle regarded the “intrusion” of a “collaborative” way of working among statutory and non-statutory bodies linked by a relationship framework usually characterised by multiple dependences (funding, regulation and monitoring), rather than by horizontal partnership.

The objective of developing quality frameworks for homelessness related services is at present on a standby situation and it is unclear how this work will progress within the context of the new impetus that appears to emerge. The lack of a legislative and regulatory context regarding the ENIPSA will certainly continue to hinder any intentions or initiatives in such a sensitive area.

Discussion

The implementation stage of the first National Strategy on Homelessness in Portugal reveals the fragile nature of such initiatives. The lessons learnt throughout the process of implementing the ENIPSA may present an important opportunity for other countries – particularly in southern Europe – to discuss and reflect upon the conditions and challenges that follow the initial stage of any strategic approach to homelessness. The potential for policy change within the homelessness sector created by the approval of the National Strategy was confronted with multiple barriers that evolved across the period of implementation.

In addition, the potential of the ENIPSA for enhancing a strategic development within the state’s role regarding homelessness has been severely affected by the political developments that took place in mid-2011. Social policies are moving away from a policy trajectory supportive of overall strategic approaches, towards piecemeal solutions to social issues. Moreover, the philosophy underlying the social policy trajectory which is now underway, rather than enhancing the mobilisation of partnerships and strengthening the enabling role of the State, is retreating to a model that reinforces existing individualised relationship between those “who fund” and those “who deliver”.

The lack of any clear and transparent allocation of resources to the implementation of the ENIPSA – which was identified at the drafting stage – is one of the key weaknesses that impacted directly on the achievement of the objectives of the Strategy. Conversely, the resistance to the introduction of a model of financing

that would privilege the attainment of specific goals – in line with the Strategy's priorities and guidelines – continues to hinder the move towards actual change in the delivery of services.

The absence of umbrella organisations of homelessness service providers, the strong dependence of NGOs from State funds for their operation and the existing competition between services were additional obstacles to achieving strategic changes in the homelessness sector working practices. Nevertheless, and in spite of the above mentioned constraints and obstacles, the developments that followed the approval of the ENIPSA, also highlighted the potential for change in the homelessness sector at a local level, and the ability of a diverse range of stakeholders to reorganise intervention practices in a coordinated and sustainable way.

The move towards an evidence-based approach in shaping homelessness policies was a crucial step in the implementation of the National Strategy. In spite of the efforts made at the local level – such as the introduction of mechanisms to regularly produce data on homelessness, and the use of a common definition – the results fell short of the intended objectives of the ENIPSA. In fact, strategically addressing the lack of evidence base on homelessness at the national level was a major challenge, which will not be achieved if the changes produced remain limited to the – unsupported – efforts that are being made by the local homelessness units in some municipalities. Once again, local dynamics have proven to be crucial to the implementation of the Strategy. Their potential, however, needs to be supported. In addition, the failure to place the Strategy on a statutory basis hindered the legitimacy of the Strategy within the political process, although it should be noted that in many other countries, their homeless strategies are not placed on a statutory basis. It is of note that in despite this lack of political endorsement of the ENIPSA by central government, in all the municipalities where the new local homelessness units were formed, this development had to go through a legitimating process by local government which have been important key drivers in most of these processes.

The Portuguese strategy was presented as a response to national and European agreements in both the housing and social inclusion domains. However, in the housing domain there is no information on the achievement of any of the objectives set regarding the use of public housing or existing public programmes to facilitate the resettlement of homeless individuals or families. There is, however, evidence that some municipalities have introduced prioritisation criteria in the social housing allocation for homeless people following the set-up of local homelessness strategies as a response to the ENIPSA guidelines. The Housing First pilot project developed in Lisbon, and included as one of the targets of the Strategy was the only initiative achieved with the direct financial support of the Ministry for Solidarity

and Social Security – the ENIPSA coordinating entity. Other Housing First Projects were initiated in other municipalities by the initiative of local authorities but with no support from central state.

At its inception stage, the Homelessness Strategy directly addressed the issue of housing needs and the provision of housing solutions, introducing an important progress in the definition of homelessness policies in Portugal, where housing has always been notably absent. If the approval of the ENIPSA opened a window of opportunity for stressing *housing exclusion* into a strategic approach to ending homelessness, the implementation stage placed the focus of the Strategy back to the original (and sole) *social exclusion* perspective on tackling homelessness in Portugal.

Overall, the implementation of the Portuguese National Strategy on Homelessness provides important lessons for other EU member states. If expectations regarding the role of central government during this stage did not match the involvement and the achievements experienced in the drafting stage of the ENIPSA, the potential for change it created at the local level seems to persist and progress is being made in dealing with change and developing innovative responses to addressing homelessness within a difficult overall context.

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Policy Review Up-date: Results from the Housing First based Danish Homelessness Strategy

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Introduction

The Danish Homelessness Strategy is the only European example of a large-scale Housing First programme, involving more than a thousand participants. The Strategy is characterized by a close partnership between the local municipalities and the national level policy makers. Seventeen municipalities (out of a total of 98) representing about two thirds of the homeless population have been involved in implementing the Strategy. The Strategy combines the provision of resources for targeted initiatives with the testing of different intervention methodologies (an evidence-based approach). This means that a number of specific housing support interventions are tested in the Homelessness Strategy, and that the use of the different interventions is continuously monitored. It involves both monitoring at an individual level in terms of documenting the effectiveness of the different intervention methodologies, and monitoring at national and municipal levels.

The evaluation of the Strategy shows that homeless people in Denmark constitute a very socially marginalized group, and are characterized by a number of other pernicious social problems, in addition to homelessness, such as substance misuse, mental ill-health, physical ill-health, low incomes, poor social and family networks, etc. (Rambøll and SFI, 2013). Homeless people therefore have complex support needs, but despite this, the Housing First approach has proven to be very successful as it enables homeless people to obtain housing and the supports required to sustain their tenancy – and with the right support, nine out of ten homeless people have been able to maintain their new home. Furthermore the evaluation points out that most homeless people are able to move into ordinary housing/apartments, and are not in need of congregate housing.

Despite the positive outcomes and experiences with Housing First, there has been an increase in homelessness in Denmark since 2009, although this increase is not as evident in the municipalities that were part of the Strategy than in those municipalities that did not participate. There has been a particularly marked increase in youth homelessness in Denmark, as a multifaceted interaction between individual and structural exclusion mechanisms results in an increasing number of young people with complex support needs becoming homeless in the early years of adulthood. In the evaluation of the Danish Homelessness Strategy, municipalities point out that the challenge of providing enough affordable housing for socially vulnerable people, especially to young homeless people in larger cities, is one of the main reasons for the recent increase in homelessness in Denmark.

This policy review¹ draws upon an evaluation of the Danish Homelessness Strategy (Rambøll and SFI 2013).² Section two describes the start-up of the Strategy programme. Section three examines the overall development of homelessness in Denmark and in the municipalities involved in the Strategy. Section four describes outcomes in relation to four key targets in the Strategy. Section five describes key interventions in the programme and section six presents the outcomes of these interventions. Section seven presents the development in youth homelessness and the profile of young homeless individuals. Section eight presents results and experiences from the Strategy programme on interventions for young homeless people while section nine discusses the outcomes of the programme.

The Programme

In 2008 the Danish Parliament adopted the first national Homelessness Strategy. The Strategy followed earlier programmes aimed at strengthening social services for socially marginalized groups. The programme followed upon the first national mapping (count) of homelessness, which was carried out in February 2007. The mapping showed that in the count week there were 5 290 people who were homeless. About 500 had been sleeping rough during the count week. About 2 000 were in homeless shelters and more than 1 000 persons were staying temporarily with family or friends (Benjaminsen and Christensen, 2007). Others were in short-term transitional housing or awaiting institutional release from prison, hospital or other treatment facilities, without housing. The count also showed that the majority of the homeless people were registered in larger cities and towns.

¹ A paper with a similar content has been presented as a host country paper at an EU OMC peer review of the Danish Homelessness Strategy in November 2013.

² The author of this paper was one of the authors of the evaluation.

Funding of 500m DKK (€65m) was allocated to the Strategy programme over a period of four years from 2009 to 2012. Eight municipalities, which had 54 percent of the total homeless population in Denmark and including the largest cities in Denmark – Copenhagen, Aarhus and Odense – were invited to participate in the programme. The bulk of the funding was allocated to these municipalities. In a later round, other municipalities could apply for the remainder of the funding. Nine further municipalities, mainly medium-sized towns, were selected to participate in the programme and 30m DKK of the total funding was allocated to these nine municipalities. Four overall goals were set in the programme:

1. To reduce rough sleeping
2. To provide other solutions than shelters to homeless youth
3. To reduce time spent in a shelter
4. To reduce homelessness due to institutional release from prison and hospitals without a housing solution

A key aim of the programme was to develop and test internationally evidence-based interventions in a Danish setting. A decision was taken to make Housing First the overall principle of the Strategy. It was also decided that floating support interventions should follow one of three methods: Assertive Community Treatment (ACT), Individual Case Management (ICM), or Critical Time Intervention (CTI). An implication of the implementation of the Housing First principle was a shift away from the Treatment First/Housing Ready approach, and a criterion for projects to receive funding from the programme was that they were based on Housing First principles.

Other parts of the programme included strengthening street outreach work and implementing a methodology for needs assessment in homeless shelters. Resources were also given to a range of other local services and initiatives. Furthermore, part of the funding was allocated to provide more housing for homeless people including the construction of new housing units. The municipalities applied for specific projects and after a process of negotiating between central and local government, it was decided which specific local projects should be carried out. It was possible for the municipalities to focus on all, or just some, of the four overall goals depending on the local situation. The process of starting up, developing interventions, and implementing them at the local level took a longer time than initially expected, but most interventions had started by the beginning of 2010. As a consequence the programme period was later extended until September 2013.

The Development of Overall Homelessness over the Strategy Period

As most of the interventions of the Strategy started up in Winter 2009/2010, the national homelessness count in 2009 has been used as a baseline in the measurement of the extent of homelessness during the Strategy period. Table 1 shows the trends in homelessness from 2009 to 2013 for both the Strategy participating municipalities and non-participating municipalities. There was a total increase in recorded homelessness of 16 percent, or a rise from 4998 in 2009 to 5820 homeless people in 2013. However, the trend varied by municipality. In the 8 municipalities with a full Strategy programme, homelessness increased by 4 percent on average. In the 9 municipalities with a floating support programme homelessness increased by 11 percent on average, whereas in the remaining 81 municipalities, which had not participated in the programme, homelessness increased by a staggering 43 percent on average. There were also considerable differences within the group of Strategy participating municipalities. In the capital Copenhagen, which already had the highest number of homeless people, there was a modest increase of 6 percent from 1494 to 1581 homeless people.

In the three suburban municipalities of Copenhagen, which were part of the Strategy, homelessness has generally increased (with the exception of Frederiksberg which is an inner-city borough with its own municipality). In the suburban municipality of Hvidovre there has been an especially large increase in homelessness. Furthermore, a substantial part of the large increase in homelessness in municipalities not part of the Strategy has taken place in other suburban municipalities in the Copenhagen area (Benjaminsen and Lauritzen, 2013). A large increase in homelessness also occurred in Aarhus, Denmark's second largest city, with an increase of 32 percent from 2009 to 2013 or from 466 to 617 homeless people, though the rate of increase levelled off between 2011 and 2013.

In contrast to developments in Copenhagen and Aarhus, homelessness in Denmark's third largest city Odense has almost been halved over the Strategy period; the number of homeless people has decreased from 208 in 2009 to 110 in 2013. The evaluation explains this development by pointing to a combination of a strong political commitment to the Housing First principle, a relatively sufficient supply of affordable housing, and an intensive floating support programme.

In Denmark's fourth largest city (and third largest municipality) Aalborg that only had a floating support programme, the homeless population has increased from 218 to 259 people. In the medium-sized towns that were part of the programme, with a few exceptions, there have been for the most part only small changes in the number of homeless people.

Table 1: Overall development in homelessness 2009-2013, Strategy and non-Strategy municipalities

Municipality	Homeless Week 6, 2009	Homeless Week 6, 2011	Homeless Week 6, 2013	Change 2009-13, Percent
Albertslund*	46	46	52	13
Esbjerg	128	130	144	13
Frederiksberg*	233	203	178	-24
Høje-Taastrup*	45	63	63	40
København (Copenhagen)*	1494	1507	1581	6
Odense	208	178	110	-47
Randers	100	64	92	-8
Aarhus	466	588	617	32
8 strategy municipalities with full programme	2720	2779	2837	4
Guldborgssund	120	100	99	-18
Herning	149	167	149	0
Horsens	87	57	77	-11
Hvidovre*	67	130	145	116
Næstved	59	66	86	46
Svendborg	63	45	32	-49
Varde	27	28	28	4
Viborg	62	60	68	10
Aalborg	218	231	259	19
9 strategy municipalities with floating support programme	852	884	943	11
17 strategy municipalities total	3572	3663	3780	6
81 non-strategy municipalities total	1426	1627	2040	43
Denmark, total	4998	5290	5820	16

*In Metropolitan Copenhagen

Source: SFI – The Danish National Centre for Social Research

In particular, there has been a strong increase in youth homelessness over the same period. Table 2 shows the development in homelessness amongst individuals between 18 and 24 years divided between the Strategy municipalities and non-Strategy municipalities in total. In total there has been an increase in youth homelessness in Denmark of 80 percent or from 633 persons in 2009 to 1 138 persons in 2013. The increase has been highest in the non-Strategy municipalities where youth homelessness has doubled, but there has also been a substantial increase of 69 percent in youth homelessness in the Strategy municipalities.

Table 2: The development in the numbers of youth homelessness (18-24 year olds).

	2009	2011	2013	Percent increase 2009-2013
Strategy municipalities	395	622	667	69
Non-Strategy municipalities	238	380	471	98
Total	633	1 002	1 138	80

Source: SFI – The Danish National Centre for Social Research

The evaluation indicates an increase in the extent of homelessness in Denmark but, with the exception of the increase in youth homelessness, this increase is mainly concentrated in Denmark's largest urban areas, and in particular in the suburban area of Copenhagen. According to the evaluation of the Strategy, the municipalities report an increasingly tight housing market in both Copenhagen and Aarhus, with a lack of affordable housing for socially vulnerable people. Such a lack of affordable housing particularly affects the housing chances of young vulnerable people as their social benefits are generally lower, which further reduces the range of affordable housing available to them.

The results from the national count also show how homelessness in Denmark is concentrated amongst individuals with complex support needs. Table 3 shows the percentage of homeless people with mental illness, substance abuse problems (alcohol and drugs combined), both mental illness and substance abuse problems) and neither of these problems. The data are predominantly based on staff assessments of users.

Table 3: Mental illness and substance abuse problems amongst the homeless in Denmark, 2013

Psychosocial problems	All age groups (18+)	18-24 year olds
Mental illness	47	51
Substance abuse	65	58
Either mental illness or substance abuse	78	74
Dual diagnosis	31	32
Neither mental illness or substance abuse	22	26

Source: SFI – The Danish National Centre for Social Research

About four out of five homeless people in Denmark has either mental illness, substance abuse or both. About half have a mental illness, about two thirds have a substance abuse problem and one out of three are mentally ill substance abusers. Only about one out of five have neither of these problems. The figures are roughly similar for the young homeless people between 18 and 24 years, with only a marginally higher percentage without these problems (1 out of 4). This pattern follow a general thesis in homelessness research that homelessness in countries with a relatively low level of poverty and a relatively intensive welfare system is widely concentrated amongst individuals with complex support needs, whereas homelessness in countries with a higher level of poverty and a less intensive welfare system will affect a broader cohort of the population and include a large proportion of poor people (Stephens and Fitzpatrick, 2007).

Effective Interventions but Difficulties in Achieving the Four Main Goals

Although overall the results show that the increase in homelessness has been considerably lower in the municipalities that have been part of the Strategy, the targets that were set for the four overall goals of the Strategy (reducing rough sleeping, reducing the need for young people to stay in a shelter, reducing the general length of shelter stays and reducing homelessness due to institutional release) were generally not met. However, at the same time the Housing First based interventions and methods implemented through the Strategy proved to be very effective in terms of housing retention rates. A general conclusion of the evaluation is that these methods are equally effective when applied in a Danish welfare state context as they are elsewhere as reported in international studies, mainly from the US, and therefore in a very different welfare state context (Rambøll and SFI, 2013). In the following section we shall have a closer look at this paradox. First we will consider the progress regarding the four main targets.

Table 4 sets out the actual number of persons sleeping rough in 2009 and 2013, versus the target number for 2012 for the municipalities working with this target. A substantial reduction in rough sleeping has only been achieved in Odense where the target number was even surpassed. In Frederiksberg (an inner city borough in Copenhagen) rough sleeping has been reduced, but not enough to meet the target. In Aarhus rough sleeping remains almost unchanged. In Copenhagen a substantial increase in rough sleeping has occurred, hence the target has not been met. However, the exact number of rough sleepers in Copenhagen is rather uncertain. Homeless immigrants with no legal right to stay in Denmark are estimated separately in the count, as procedures for controlling for double counts are more difficult to implement for this group, and individuals identified as immigrants with no legal right to stay are not included in the figures in Table 4. However, there is sufficient information in respect of only 134 of the 259 rough sleepers in Copenhagen to conclude that they are both unique persons (no double counts) and that they are not immigrants without a legal right to stay. In other words, the figure of rough sleepers in Copenhagen, and the increase, may be inflated by rough sleeping immigrants with no legal right to stay and without sufficient identification at the time of the count.

Table 4: Rough sleeping in municipalities with specific targets of reducing rough sleeping

Municipality	Count 2009	Target 2012	Count 2013
Albertslund	5	2	4
Frederiksberg	28	10	18
København	174	70	259
Odense	34	17	9
Aarhus	66	10	61
Total	307	109	351

Source: Rambøll and SFI (2013).

Table 5 shows the number of young homeless people (between 18 and 24) who stayed in a homeless shelter for each year from 2007-2012. For this target the baseline year was set to 2007. As Table 5 shows the targets originally set were not met in any of the municipalities. In some municipalities, reductions were achieved whereas in other municipalities the number of young people in shelters increased. However, there is a tendency for an overall reduction in the number of young people in homeless shelters setting in from 2010 when the Strategy started operating with the number of young people in shelters falling from 440 in 2010 to 349 in 2012. The last right column for 2012 excludes shielded shelter places for young homeless people, as many of these places were established as part of the Strategy to avoid young homeless people having to stay in a regular shelter. As can be seen, more than a third of the shelter stays for young people in 2012 were in such shielded youth shelters. We shall consider the challenge of youth homelessness in greater detail in section 8.

Table 5: Young people (18-24 years old) in homeless shelters: Stays and persons

Year Municipality	Number of stays (18-24 year olds)						Number of persons (18-24 year olds)				
	2007	2010	2011	2012	2012 *)	Target 2012	2007	2010	2011	2012	2012 *)
Esbjerg	36	51	129	73	73	0	20	36	59	50	50
Frederiksberg	29	43	43	35	18	4	21	29	35	29	17
København	210	240	196	177	82	82	193	220	166	136	66
Odense	115	90	76	68	68	25	41	56	39	39	40
Randers	31	43	67	85	10	3	10	27	49	46	7
Aarhus	237	233	144	93	89	10	60	65	53	43	43
Total	658	700	655	531	340	124	345	433	401	343	223

*) excluding stays in youth shelters

Source: Rambøll and SFI (2013).

Table 6 shows the development in the number of long shelter stays – more than 120 days – compared to the target set for 2012. The baseline year was also set to 2007 for this target. The target was not met as the number of long shelter stays remained more or less unchanged over the period and all municipalities are far from achieving their targets.

Table 6: Long shelter stays (more than 120 days)

Municipality	2007	2010	2011	2012	Target 2012
Albertslund	9	14	11	8	0
Esbjerg	84	67	76	71	20
Frederiksberg	51	75	85	76	21
Høje-Taastrup	22	24	24	21	5
København	526	525	532	569	400
Odense	68	74	48	70	20
Randers	25	40	40	36	21
Aarhus	118	130	109	137	20
Total	903	949	925	988	507

Source: Rambøll and SFI (2013).

Table 7 shows the development in institutional release from prisons and hospitals without a housing solution. For this target, a considerable reduction was achieved although the target set for 2012 was only met in two municipalities.

Table 7: Individuals awaiting release from prisons or discharge from hospitals within one month and without a housing solution

Municipality	2009	Target 2012	2013
Albertslund	9	3	2
Esbjerg	4	1	5
København	51	27	33
Odense	10	4	1
Randers	10	0	4
Aarhus	22	4	20
Total	106	39	65

Source: Rambøll and SFI (2013).

The Interventions of the Strategy Programme

A key aim of the Danish Strategy has been to implement the Housing First principle. A main part of the Strategy was to strengthen floating support services in line with evidence based methods for homeless individuals being re-housed. The three methods ACT (Assertive Community Treatment), ICM (Intensive Case Management) and CTI (Critical Time Intervention) were implemented in different combinations in the Strategy municipalities.

Figure 1: Floating support methods in the Danish Homelessness Strategy

ACT is a multidisciplinary form of floating support where a team of social support workers, a psychiatrist, an addiction counsellor, a nurse, a social office worker and a job center worker, deliver support services directly in a persons own home. This method is for individuals with complex support needs such as severe addiction problems and often a dual diagnosis of addiction and mental ill health. Individuals need the multidisciplinary support as they have great difficulties in utilizing existing services. An ACT-team has only been established in Copenhagen. At the end of the evaluation period 92 individuals had been assigned to the ACT-team. An ACT-like intervention in Aarhus can best be described as an extended version of ICM.

ICM is the provision of a case manager who gives both social and practical support and coordinates the individual's use of other support and treatment services. ICM is given for a longer time period, in principle as long as the individual has the need for this support. In contrast to the ACT-method, the target group for the ICM-method is individuals who to a considerable extent are capable of using other support services, but who need support in this process. The ICM programme has been the largest of the floating support programmes in the Strategy with a total of 1 010 individuals assigned to ICM-support in the 17 municipalities in total.

CTI is the provision of a case manager who offers support for a limited time period of nine months in the critical transition period from shelter to own housing. The target group for this method only needs more intensive support in the transition phase in which contact is established with other support services; the other support services take over after the nine months if there are still support needs. A total of 406 individuals have been assigned to the CTI-programme.

Table 8 gives an overview of the number of individuals who have been assigned to the three types of floating support and to other parts of the programme. The figures represent the number of courses for each method, therefore the total number does not represent unique individuals. An individual may for instance have started out having contact with a street outreach team, then had a needs assessment followed by an ICM-intervention. The table only includes interventions that have been financed from the Strategy programme. Local services and interventions not funded by the Strategy are not included in the figures.

Besides the floating support interventions, 757 homeless people have had a course with a street outreach team, and a risk and needs assessment has been carried out in respect of 1 481 individuals. In addition, 145 persons have been assigned to a programme aimed at securing a housing solution upon release from prison ('Schedule for a good release'). Compared to the extent of overall homelessness in the municipalities (Table 1), it is notable that the extent of the floating support programme in the city of Copenhagen has been quite modest compared to the overall number of homeless people in the city, and has been based on only two of the three support methods, namely ACT and CTI but not ICM.

Table 8: Number of courses for each intervention

Municipality	ACT	CTI	ICM	Street out-reach	Needs assessment	Good release	Total
Albertslund			30		23	0	53
Esbjerg		51	241		215	28	535
Frederiksberg		3	81	125	24		233
Høje-Taastrup			28				28
København (Copenhagen)	88	82		441	585	8	1204
Odense		91	11		326	46	474
Randers			81		188	2	271
Aarhus	17	17	326	191	106	61	718
Total 8 municipalities	105	244	798	757	1467	145	3516
9 municipalities		162	212		14		388
Total 17 municipalities	105	406	1010	757	1481	145	3904

Source: Rambøll and SFI (2013).

A part of the programme has been to provide new housing units and additional places in institutional accommodation. By June 2013 a total of 453 new units or places had been established. Some 125 of the housing units are in independent scattered public housing, while 26 are independent flats in congregate housing, 4 are in independent private housing, 55 are in alternative housing (skæve huse) and just 3 are in dormitory accommodation. A total of 199 places are in institutional accommodation; of these 16 are in medium-term (S.107) accommodation, 91 are in long-term (S.108) accommodation and 92 are in homeless shelters (S.110 accommodation). Most of the latter places are shielded places for young people or women. Transitional flats have also been established both in public housing (14) and in private housing (6). An additional 21 units have been established in other unspecified forms of housing.

A large part of the new housing units and places take the form of institutional accommodation and only about one third are in independent scattered housing. However, in addition to these units and places independent scattered housing has also been provided through the municipal priority access system to public housing.³

³ The public housing sector comprises 20 percent of the total housing stock and is open to all regardless of income level. Municipalities have a right to refer individuals with social needs to one fifth of flats that become vacant, and in Copenhagen one third of flats that become vacant. Rent must be paid out of social benefits and an additional supplementary benefit for housing. This means that flats which have a rent which is too high to be paid out of transfer benefits cannot be used by municipalities for referral to cash benefit recipients in need for housing. Many groups other than the homeless 'compete' for housing through this mechanism – e.g. single mothers with children, disabled people and vulnerable elderly people. Particularly in larger cities, demand outnumbers the supply of vacant flats for municipal referral and in most municipalities there is a waiting time to get assigned to a flat through this priority access mechanism.

The numbers above mainly include additional independent housing that has been provided through the programme by special agreements between municipalities and public housing organizations.

The Effectiveness of Interventions

The individuals who have received support from the Strategy have been followed by a monitoring system which measures both the extent of support received and outcomes on a range of variables such as housing situation, mental health, addiction and daily functions. The information was based on staff assessment. Table 9 shows housing outcomes for individuals attached to one of the three floating support interventions, CTI, ICM and ACT. In the table only individuals with a minimum of two recordings are included; also cases with insufficient information regarding the housing situation at either the first or last measurement have been excluded. In total the table includes 1 095 people out of the 1 521 that have been attached to the three floating support interventions. Clearly therefore there is a relatively large number of people for whom housing outcomes could not be determined. There are various reasons for this discrepancy. People who died during the period were excluded. Also people who were moved into carehomes during the period due to escalating care needs have been excluded as such housing transitions do not measure the effectiveness of the Housing First programme. Especially the ICM programme has been applied rather broadly and shorter courses of contact between an ICM support worker and rough sleepers or shelter users trying to establish a relation may have been entered into the registration system though such contact may have ended abruptly reflecting the unstable situation for people in an acute homelessness situation. Including only individuals with two recordings or more in the measurement of housing outcomes (in table 9) meets a concern to include only those people into the measurement, who have been given a reasonably substantial intervention and not conflating the measurement by including contacts which in reality more have a character of outreach work and which generally reflect the challenges of intake into the programme. In this sense the outcomes in table 9 gives the most adequate picture of the actual effectiveness of Housing First based interventions. Finally it should be mentioned that the monitoring system is based on municipal social support workers entering registrations for their users into the system. In this sense the nature of the monitoring system reflects the large scale of the programme and does not have the more rigorous nature of a (smaller scale) research project such as most randomized controlled trials.

Table 9: Housing outcomes for CTI, ICM and ACT-interventions

Housing outcome	CTI (%)	ICM (%)	ACT (%)
Have been housed and maintained housing	95	76	94
Lost housing	3	8	7
Lost housing but re-housed in other housing	(1)	(4)	(-) ⁴
Lost housing and not re-housed	(2)	(4)	(7)
Not been housed throughout period	2	16	0
Total	100 (n=316)	100 (n=717)	100 (n=62)

Source: Rambøll and SFI (2013). Due to rounding the percentages do not always sum to 100 percent.

Of those who have been housed the majority remain housed throughout the monitoring period. Less than 10 percent lost their housing and were not re-housed. However, amongst the persons receiving ICM-support quite a large group (16 percent) were never housed during the period. The qualitative interviews conducted point to a combination of several factors that explain why some individuals did not get housed despite being attached to an ICM-programme. One of the main reasons reported in the evaluation is the lack of affordable housing. In some municipalities there are also reports of difficulties in turning around a well-established practice of housing referral based on the 'housing ready' model in the municipal priority access system to public housing instead of basing housing allocation on the Housing First-principle. Finally, there are also in some cases a mismatch between support needs and the ICM-support. Some of the ICM clients have more complex support needs and difficulties in utilizing the existing support system, and are likely therefore to come within the group targeted by ACT-support. However, ACT-support is not available in any of the municipalities providing ICM-support.

The results in Table 9 do not contain any information on type of housing. However, a qualitative finding from the programme has been that independent, scattered housing works better for most individuals, and that with intensive floating support, those individuals with complex support needs are capable of living on their own in independent, scattered housing. Additionally, the findings indicate that congregate housing may have unintended negative consequences such as conflicts amongst the residents, and that residents often get ensnared in an environment dominated by substance abuse.

⁴ It has not been possible to record movements from one place of housing to another for the ACT-programme in the general monitoring system. A separate reporting from the ACT-team shows that 26 percent of those in receipt of ACT had moved from one place of housing to another during the period. These movements have mainly taken place for individuals who were initially placed in congregate housing whereas only few movements have happened for those who were initially placed in scattered housing.

Table 10 illustrates a range of other outcomes reported by staff. The table includes the combined outcomes for all three floating support interventions and for all age groups combined.

Table 10: Outcomes – changes from first to last reporting (%)

Item	More positive	Unchanged	More negative
Alcohol	17	65	18
Hard drugs	14	72	14
Hashish	16	65	19
Physical problems	19	58	23
Mental problems	25	52	24
Daily functions	26	50	24
Financial situation	33	44	23
Social network	29	45	26

The Table is based on outcomes for 1 111 individuals and is for the CTI, ICM and ACT-programmes combined.
Source: Rambøll and SFI (2013).

On the majority of items the situation of the individual remains unchanged over the period, and for most items the number of persons with a more positive assessment more or less equals the number of persons with a more negative assessment. There are slightly more individuals with a more positive assessment than a more negative assessment on the items daily functions, financial situation and social network, whereas there are more people with a more negative than positive assessment on physical problems. In the qualitative interviews, it was noted that when formerly homeless people obtained housing, their physical problems which were unmet when rough sleeping, re-emerged, and unmet health support needs came to the surface. The question is whether the rather large number of individuals with unchanged or more negative outcomes on these items should be seen as a failure of the Housing First model? The qualitative interviews with homeless persons shed some light on these results. Most of the interviewees expressed great relief at finally obtaining housing, but they also explained how they faced severe challenges in life such as continued addiction and weak social relations. Many also explicitly stated that if they did not receive floating support they would lose their housing again. This shows, that despite still having on-going difficulties, the overwhelming majority remained stably housed, once they are provided with floating social support. However, many challenges still remain and individuals often need other interventions, such as access to meaningful social activities that can facilitate contact to other people and help counteract loneliness.

The experience from this large-scale Housing First programme in Denmark demonstrates that Housing First, driven by evidence-based floating support interventions is an effective approach to enable individuals with complex support needs to exit

homelessness and retain their housing, with housing retention rates in excess of 90 percent. An important point is also that it is not possible to predict who is likely to end up losing their home again. Therefore, the experiences point to Housing First as the 'default intervention' meaning that own housing with intensive floating support should be tried as the first-line intervention for the rehousing of homeless people and that other housing forms (congregate housing) should only be used for those individuals who (repeatedly) do not succeed living on their own even with intensive floating support. For these individuals it is important to have other options such as high-intensive supported accommodation, congregate housing or alternative housing such as the 'skæve huse'. It is also important to underline that while Housing First offers a combination of housing and support that gives a high chance of becoming re-housed and sustaining the tenancy, many challenges still remain and that further interventions and support are most often needed.⁵

The Rise in Youth Homelessness

Youth homelessness has increased over the last few years. In the national count in 2009, 633 young people between the age of 18 and 24 were recorded as homeless in the count week. This figure increased to 1 002 in 2011 and 1 138 in 2013, an increase of 80 percent in four years. This increase has occurred in both Strategy and non-Strategy municipalities and is therefore a general trend rather than the result of an increased focus on young homeless people in the Strategy municipalities. In contrast to the sharp rise in homelessness amongst 18 to 24 year olds, homelessness amongst 13-17 year olds remains low. Only 26 young teenagers aged between 13 and 17 years were recorded homeless in the count. Twenty-one of these are reported as staying together with at least one parent, most in short-term transitional housing, at women's crisis centres or with family or friends, while 5 were recorded as not being with any parent, but were instead staying with other relatives or friends. The low number of homeless teenagers is largely a result of very intensive welfare services for children with support needs. In the following analysis we shall only look at homelessness in 18-24 year olds.

The count in 2013 showed that 74 percent of homeless 18-24 year olds are males. First generation immigrants account for 6 percent of the homeless 18-24 year olds while a further 16 percent are children of immigrants. However, the percentage of homeless youths with an immigrant background is higher in the large cities; in Copenhagen 37 percent, and in Aarhus 40 percent of homeless youths are either immigrants or children of immigrants. The largest category amongst the homeless

⁵ These conclusions are in line with the results from the Housing First Europe social experimentation project (see Busch-Geertsema, 2013).

youth accounting for half of the total, were youths staying temporarily with family or friends during the count week. Youths sleeping on the streets in the count week accounted for 6 percent, while 23 percent had stayed in homeless shelters, including emergency night shelters. Minor groups were awaiting institutional release from prisons or hospitals without a housing solution, while others were reported with an unspecified homelessness situation.

Slightly more than half of the homeless youth were recorded as having some form of mental ill-health. This number has increased from 35 percent in 2009 and 43 percent in 2011. Substance abuse is a problem for 58 percent of homeless youths. The most common substance abused by the young homeless is hashish which is reported for 50 percent. Almost one in five use hard drugs and 13 percent report a problem regarding the abuse of alcohol. One in three of the young homeless are reported to be mentally ill substance users while one in four of the homeless youth are reported to have neither a mental illness nor a substance abuse. For 33 percent of the homeless youth, mental illness is reported as an important cause of their homelessness and for 32 percent drug addiction (including hashish) is reported as an important cause. For 18 percent eviction is reported as an important cause, showing that despite their young age, these young people have already experienced an eviction. For 38 percent financial difficulties are reported, and for 25 percent a lack of appropriate housing is mentioned. Some 31 percent reported that they were no longer able to stay with friends or family. Only 34 percent of the 18-24 year old homeless people are reported to have a social support person and equally only 34 percent are reported to be on some waiting list for housing – 30 percent for individual housing and 4 percent for supported housing.

The evaluation of the Strategy points to the combination of a group of young people with severe social problems, a shortage of affordable housing and relatively low incomes as the main reasons why it has been a challenge for the municipalities to fully implement the Housing First approach for young homeless people, although the results from the Homelessness Strategy show that Housing First is the most appropriate approach for young homeless people. At the same time the complex support needs of the young homeless people show a need for developing holistic interventions with an emphasis on both the housing and the social support dimensions.

Experiences from the Strategy Programme on Interventions for Young Homeless People

A substantial number of those who received housing and support from the Strategy are young people aged between 18 and 24. This age group comprises about one quarter of all persons who have received support from the CTI, ICM or ACT programmes. In Table 11 housing outcomes for individuals 18-24 years and 25 years and above are compared with the outcomes for those over 25 years of age. More than one in four of the young homeless never got housed despite being attached to a support programme. The corresponding figure is only 8 percent amongst persons 25 years or older. Of those who become housed most stay housed, but 9 percent of the total group of 18-24 year olds lost their housing; 5 percent were not re-housed, compared to 3 percent of those aged 25 years and older.

Table 11: Housing outcomes for 18-24 year olds (%)

Housing outcome	18-24 year old	25 years or older
Have been housed and maintained housing	63	88
Lost housing	9	5
Lost housing but re-housed in other housing	(4)	(2)
Lost housing and not re-housed	(5)	(3)
Not been housed throughout period	28	8
Total	100 (n=335)	100 (n=803)

Source: Rambøll and SFI, 2013.

The housing outcomes are not broken down by housing type, but the qualitative experiences from the programme show that as with older homeless persons scattered housing works for the young homeless whereas conflicts and a negative environment marked by substance abuse arise more in congregate facilities. The somewhat higher (but still small) number that lose their housing may be a consequence of unmet support needs, but the difficulties of paying rent out of a relatively low income are also highlighted in the qualitative interviews with municipal civil servants and support workers.

It is a general experience in the municipalities that many of the young homeless people are already known to the social system and many have received social interventions already from childhood. This indicates a general challenge in service provision in the transition into adulthood for children who have been receiving support from the social system. Although initiatives have been taken to strengthen after-care in the transition from childhood into adulthood, for most there will be a change from the often highly intensive interventions for vulnerable children into often less intensive services for young adults. Often these children have weak family ties and social networks, and at the same time many are 'system-tired'

meaning that they have a long history of social interventions, and show resistance to receiving further support and may have withdrawn from the support system. Therefore it can be a challenge to establish contact, build a relationship, and maintain contact and motivation for further interventions, and it is important to develop new ways for working with this group. When contact is established, the Strategy experiences suggest that being able to assign a case manager with a relatively low caseload to each person is of key importance to ensure that the young individual gets access to other necessary interventions such as cash benefits, social activation measures, and treatment if necessary.

Even when contact is established and a support relationship is formed, the municipalities' experiences show how structural barriers such as the lack of affordable housing remain a challenge in many cases. Through the Strategy programme, more shielded places for youth in emergency/temporary accommodation have been established to accommodate young people in an acute homelessness situation. However, the evaluation shows, that there is often a considerable waiting time until a permanent housing solution can be established and therefore homeless young persons often have to stay in such temporary places for quite a long time.

In the qualitative interviews, mixed experiences regarding the stays in temporary accommodations were recounted. Some of the young individuals staying in temporary accommodation with other homeless youth, found the longer stays manageable, especially as the alternatives are emergency shelters or random couch surfing with friends who often also have social problems. Other interviewees complained about conflicts, drug use, and drug dealing etc. in such places. According to the staff interviews, some individuals may benefit from a longer stay but the main reason for long stays is the long waiting time for ordinary housing; staff interviews point in the main to the most favourable option being rapid access to ordinary housing with sufficient floating support. On the other hand, there are good experiences with designating apartments in scattered housing for individual young homeless people and through intensive case management supporting them in learning how to live on their own and thereby also sustaining a tenancy.

The interviews strongly suggest that the intensive floating support methods of Critical Time Intervention (CTI) and Intensive Case Management (ICM) are equally well-suited for giving support to young homeless individuals as for homeless people in general. Thus, CTI is a method of providing support for young people in need of intensive support for a relatively short period and around becoming housed and linking up with existing community services, with ICM the main support intervention for young people with relatively more complex and longer-lasting support

needs.⁶ However, the methods used must generally be adjusted to the particular needs of building a relationship, maintaining contact, and supporting continuous motivation that characterizes the situation of the young homeless people, and thus there may be a need for further methodological development and refinement.

Hence, an important finding from the programme is that the Housing First principle apply equally to young homeless people as well as to older or more entrenched homeless people. Also, for the large majority of young homeless individuals, housing in independent scattered housing with floating social support remains the most favourable option, whereas congregate housing for young people seems to involve the same risk for social conflicts, stress and an environment marked by addiction problems and other social problems, as this form of housing does for homeless individuals in general. Finally, the tendency of a rising number of homeless young people with complex problems point to a general need for more focus on early prevention and early intervention including a need to strengthen support in the transition period from adolescence to early adulthood for a group of young people with severe psychosocial challenges and who have often been known to the social system since their childhood.

Conclusion

As the Housing First paradigm spread from the US to Europe, Housing First has been incorporated, at least in part, as a leading principle in homelessness strategies in several countries including Norway, Ireland, Finland and France. However most examples of Housing First programmes in Europe are small-scale, often being local projects in only a few cities and with a small number of participants. The Danish Homelessness Strategy is one of the few examples of a large-scale programme (with more than a thousand participants) and also an example of how this has been possible due to a strong political commitment to the programme both at central and local government level. The results from testing the support methods CTI, ICM and ACT in a Danish context are overwhelmingly positive, with housing retention rates in excess of 90 percent, demonstrating that these interventions have the same high success rates in bringing homeless individuals into housing as in other countries where these methods have been used and tested. The results show that with intensive floating support designed around evidence-based support methods, most homeless people can become housed, and even in ordinary

⁶ The ACT-method has almost exclusively been used for individuals aged 25 years and above with very severe support needs.

housing. This is an important result that generally underlines the need for continuing the shift away from Treatment First/Staircase models towards Housing First that is taking place in many countries.

Despite the impressive results of the interventions that have been developed, implemented and tested through the Strategy, overall the developments in homelessness in Denmark show the paradox of effective interventions for those who have received these interventions, but at the same time that the overall goal of reducing homelessness has not been achieved. Homelessness has actually increased during the Strategy period, albeit much less in the Strategy municipalities than in the non-participating municipalities. A range of barriers at both micro and macro level explain this development.

A key barrier is an increasing lack of affordable housing available for allocation to people with a relatively low income. This is especially the case in Denmark's two largest cities, Copenhagen and Aarhus, which have both experienced a general population growth exceeding 1 percent annually in recent years. In contrast, in Denmark's third largest city, Odense, there is a reasonable supply of affordable housing, and well developed methods for allocating dwellings to marginalized groups, and in this city it has been possible to halve the level of homelessness over the Strategy period. More specific developments in housing policies reinforce the lack of affordable housing for marginalized groups. Paradoxically, one of the measures adopted to deal with the economic crisis has been to intensify the process of renovating public housing estates. This generally improves the quality of housing, but such renovations are widely financed by loans and increased rent levels. As social benefits and housing support have not risen accordingly, an unintended consequence is a decrease in the proportion of the public housing stock that is affordable for people on social benefits. A further mechanism which reduces the number of housing units available for marginalized groups is the use of social mix policies and especially 'flexible letting', which enables certain groups to be given precedence in new lettings in public housing estates in order to strengthen the social mix. Municipalities and housing associations locally set the criteria and special priority has been given to people in employment. However, this mechanism also reduces the number of flats available for socially vulnerable groups.

The lower cash benefits for young people between 18 and 24 years old is an important barrier for finding affordable housing for this group. The lower benefits have been set at the same level as student benefits, in order to motivate young people to avail of education rather than rely on cash benefits. However, students have the possibility to supplement their income from jobs which the cash benefit receivers cannot do, and for socially vulnerable young people, with a low chance of starting education, the lower cash benefits therefore significantly reduces the

possibility of finding affordable housing. Young people between 18 and 24 years with certain psychiatric diagnoses (mainly schizophrenia, other psychotic diagnoses, schizotypal disorder and borderline) are exempt from the lower benefits, but a range of other conditions such as ADHD are not covered by this exemption.

Besides the individual and structural barriers described above, organizational and cultural challenges of implementing Housing First are highlighted in the evaluation. It should be borne in mind that the programme has been a pilot programme introducing the Housing First approach and aimed at developing and testing Housing First based interventions in Denmark. The process of developing and implementing the methods has resulted in a large increase in knowledge of these interventions in the municipalities and has also shown that the mind shift away from Treatment First/Housing Ready is a long intensive process, which necessitates a continued focus on organization and implementation. Challenges also appear in other parts of the support system. The Treatment First approach is still widespread in the addiction treatment system, and in the housing allocation system. In some municipalities it has been possible to achieve a shift in attitude, whereas in others it remains a challenge. This also depends on local organizational aspects, for instance whether or not the housing allocation office is organizationally integrated with the social/homeless services. Also in the shelter system, it has been a challenge to implement the Housing First approach and to facilitate the mind shift away from long shelter stays to earlier placement in own housing with support. Here it should be borne in mind that from the viewpoint of the shelters the reality often facing their users is long waiting times for housing and often also a scarcity of available floating support.

As mentioned, the overall scale of the Danish programme is relatively large with more than thousand individuals served by the floating support services established through the programme. Still, these services do not cover the whole target population of homeless persons in need of support. Figures from the last national count in 2013, show that only 28 percent of homeless people have a social support worker attached and only 32 percent are on a waiting list for housing (27 percent for own housing and 5 percent for institutional accommodation). Here it should be borne in mind that individuals who have been housed through the Homelessness Strategy and maintained their housing no longer count in the homelessness statistics.

Setting ambitious goals was an important part of securing a strong political commitment to the Strategy – and this commitment has been very important throughout the Strategy period for implementing the Strategy and its interventions. At the same time it should be borne in mind that the programme has mainly been a large-scale social experimentation project aimed at developing evidence-based

and effective methods for providing support to homeless people with complex support needs when becoming re-housed. In this sense the programme has been very successful and the results are very valuable.

The results show that with right combination of housing and targeted support most homeless people can exit homelessness, and that with intensive floating support the majority are able to sustain a tenancy in mainstream housing, with only a minority in need of more specialized housing and support services such as integrated housing in congregate facilities. The results indicate that these conclusions are also valid for young homeless people. With intensive support young homeless people can be housed in regular housing and a process of reintegration into society can begin. Amongst the three intervention methods tested in the Danish Strategy, the ACT-method is especially aimed at mentally ill substance abusers who fail to use or benefit from the existing treatment system. The experiences from the ACT-programme has shown that this method is a very successful way of providing support for homeless individuals with complex support needs, and that the method enables the provision of holistic support for this group. The team in Copenhagen serves about 80 individuals at any given time. Considering that the latest national count from February, 2013, showed that there is more than 1 500 homeless mentally ill substance abusers, there is a considerable potential to upscale the ACT-programme, both in the capital, where the pilot scheme has been tested, and in other larger municipalities. Also considering, that most homeless individuals in Denmark either have mental illness or engage in substance abuse, there is also potential to upscale the provision of the two other floating support methods which have been tested in the Strategy, ICM and CTI. The extent to which such a scaling up of the programmes is needed, and their dimensions in different municipalities and in different subgroups of the homeless, could be further examined.

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The Growing Criminalization of Homelessness in Hungary – A Brief Overview

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The City is for All

Introduction

Hungary is in the news these days. Most recently, the country appeared in international headlines because of the latest modification of the constitution (now officially called Fundamental Law), which represents a significant step in the codification of an increasingly authoritarian legal and political regime. Besides other issues such as infringing on the freedom of the press and the independence of the Supreme Court and introducing measures that penalize poverty, the intensive criminalization of street homelessness has been a hallmark of the current government. In the following, we first provide a historical background to these recent events by examining state policies towards homelessness in the past few decades. Then, we present the legal developments that have led to Hungary becoming the first country in the world that specifically allows for the penalization of street homelessness in its highest law.

Housing Poverty in Hungary under State Socialism

While large-scale housing poverty has been a great problem in Hungary throughout the 20th century, the eruption of visible homelessness is usually associated with the country's transition from state socialism to capitalism in the late 1980s. In order to understand the "sudden" appearance of homelessness, we will examine policies regarding housing and homelessness under state socialism, discuss the causes that led to the greater visibility of homelessness around the regime change, and explore the ways in which the Hungarian state is currently dealing with this problem.

Together with all its political and social contradictions, the four decades of state socialism (from 1948/49 to 1989) played a significant role in addressing the severe housing crisis that had plagued Hungary since the end of the 19th century. In 1952,

all apartment buildings were nationalized and public housing was centrally distributed. Standards were introduced regarding the number and size of rooms that each person was entitled to. To respond to the acute housing shortage, hundreds of thousands of prefabricated housing estates were constructed. Partly as a result of these efforts, housing conditions improved significantly for all segments of society; overcrowding was less rampant and the provision of basic infrastructure such as electricity, water and sewage also improved significantly (Ferge, 2002).

Despite these improvements, a survey in the 1970s suggested that Hungarians identified housing as their most pressing problem (Széleányi, 1990), which had several reasons. First, there was still an acute shortage of urban housing as a result of both immigration and natural population growth. Second, and probably more importantly, the distribution of housing was closely connected to social inequalities as well as personal and political connections. Third, despite significant public investment, inadequate housing continued to affect many people. According to the 1980 census, out of 10.7 million Hungarians, 191 000 people lived in institutions for children or youth, 92 000 lived in workers' hostels, barracks or service apartments, 60 000 in work therapy institutions and 33 000 in other social institutions. Around 30 000 people were estimated to be effectively homeless and a similar number of people lived in places like huts, train cars, caves, storage rooms and garages (Oross, 2001, p.113).

In addition to the construction and distribution of public housing, workers' hostels played an important role in the housing strategy of the socialist state. In 1960 the number of workers' hostel residents reached a high of 208 000 (Gyóri, 1997, p.3). While the hostels were originally intended as a temporary solution, they often became the permanent residence of marginalized citizens. In 1985 20 percent of hostel residents did not have any other place to stay and the majority of residents came from severely disadvantaged backgrounds (Oross, 2001, p.114).

The socialist regime had a difficult time dealing with people who did not have a permanent home or were engaging in what was considered "deviant" behaviour. Because structural reasons could not be cited for the existence of poverty, criminalization and institutionalization were standard government responses to homelessness. People without a permanent home were often deported to correctional facilities, hospitals or psychiatric institutions and the elderly poor – who sometimes resorted to begging – were committed to social homes (Horváth, 2012). Alcoholics were sent to a work therapy institution, which combined the elements of a jail and a workhouse. People who got arrested for the "dangerous avoidance of work" were punished by a fine, compulsory work, short-term detention and/or municipal expulsion. In 1985 alone, 5 780 people were prosecuted for this offence (Gyóri, 2010).

Although the capitalist transformation of Eastern European economies started long before the Hungarian Socialist Workers Party stepped down in 1989 and free and democratic elections were declared, the early years of the 1990s represented a huge break with the previous political and economic regime. An 'everything-is-up-for-grabs' atmosphere characterized the first years of capitalism. Wealth was radically redistributed through the highly unregulated privatization of public assets, firms, land and housing (Ferge and Tausz, 2002, p.176). In addition to privatization, both foreign direct investment and national debt were extremely high, which made Hungary extremely vulnerable to global economic trends.

Hungarian society paid a huge social price for the economic transition. The structural adjustment that took place between 1988 and 1995 destroyed more economic assets than the Second World War (Tamás, 2008). The introduction of foreign capital and modern technology rendered existing skills and infrastructure obsolete and many unskilled workers redundant. Between 1989 and 1992, around one third (1.5 million) of all jobs disappeared. Both relative and absolute poverty increased over threefold (Ferge, 2002, p.15) and one of the most visible outcomes of the regime change was the sudden surfacing of homelessness in public spaces. Over the winter of 1989-1990 hundreds of homeless people engaged in a series of protests to demand work and shelter, which brought this long hidden problem to the attention of both politicians and the general public.

After 1989, the socialist system of public housing was completely dismantled. The property rights of publicly owned apartments were transferred to local municipalities, which sold the majority of their newly acquired housing stock. While in 1980, 25 percent of all housing in Hungary, and 55 percent of all housing in Budapest was owned by the state, by the end of 1996, the share of public housing decreased to about 5 percent nationally, and 13 percent in Budapest (Günther, 2000). The apartments that remained in municipal ownership turned out to be of very low quality. Most of them are located in the most disadvantaged areas of the city, in poorly maintained buildings and without basic amenities. As municipalities are not interested in preserving or improving their housing stock, the condition of social housing has further deteriorated.

Homelessness Today

In today's Hungary, poverty remains one of the most pressing social issues. The number of people living under the subsistence minimum is estimated to be 3.7 million, or nearly 40 percent of the population (Központi Statisztikai Hivatal, 2011, p. 2). Millions of people are also affected by housing poverty. The number of people living in substandard and/or extremely overcrowded conditions is 1.5 million. In 2012 413

000 households had arrears in utilities beyond 3 months (Hegedüs & Horváth, 2013, p. 47) and tens of thousands have been in danger of eviction because of mortgage default. In 2011, overall household debt in Hungary was the sixth largest in the European Union (Habitat for Humanity Magyarország, 2012, p.3). In addition, 300 000 people live in segregated communities where poverty and unemployment are highly concentrated, and 50 percent of Roma citizens live in racially segregated areas with inferior infrastructure (Habitat for Humanity Magyarország, 2012, p.22). One million people cannot heat their homes properly and the occurrence of cold-related deaths is ten times higher than in other developed countries (Koltai, 2012).

It is difficult to say exactly how many people are directly affected by homelessness today. The number of "effectively homeless people" or those who live on the street or in shelters is at least 30 000 and it is estimated that around 100 000 people are affected by some form of homelessness every year (HVG, 2012). In Budapest (population close to two million) at least 4 000 people live in public spaces at any one time and around 6 000 individuals sleep in various institutional settings such as night shelters, temporary shelters and homeless hospitals. The populations most likely to become homeless include young people growing up in foster care, the un- and underemployed, former prison inmates, people with mental health or substance abuse issues (Győri, 1995), and the victims of domestic violence (Buzás and Hoffmann 2010). While the majority of homeless people are men between the ages of 38 and 44 (Győri and Maróthy, 2008, p.16), the proportion of homeless women has risen from 10 percent to 25-30 percent since the regime change (Buzás and Hoffmann 2010). Although in general, the educational level of homeless people is not significantly different from the general population, many of them are trained in obsolete professions, and young homeless people tend to have very low qualifications (Győri and Maróthy, 2008, p.17).

Today, Hungary has no comprehensive national housing strategy and social housing policies are extremely limited. The ratio of social housing is one of the lowest in Europe (2-3 percent) and social housing residents are among the most vulnerable members of society (Hegedüs, 2009). The amount of the monthly housing subsidy for low-income households is so low that it does not even cover basic housing expenses. While the winter moratorium on evictions suspends all court-ordered evictions between December 1 and March 1, it does not apply to squatters who tend to come from the most marginalized communities.

Public support for housing is not only limited in scale and scope but also very unevenly distributed. In fact, between 2000 and 2004, the only post-transition period characterized by a proactive housing policy, state subsidies favoured the acquisition of private property and supported the more privileged sections of society. Despite plans to launch a social housing program and other initiatives to support low-income

Hungarians, state-sponsored subsidies for mortgage loans turned out to be by far the best financed and most far-reaching, which mainly benefited the well off in society. In this period, a total of 60 percent of all state subsidies for housing went to the upper 20 percent of the population (Hegedüs, 2009).

With regards to social services, the emergency responses to the “homeless crisis” of 1989 have been institutionalized without addressing the root causes of the problem. The main aim of the relatively broad network of drop-in centres, overnight shelters, temporary shelters and street social work is not to prevent homelessness or secure permanent housing, but to feed, clothe and temporarily shelter people in emergency. At the same time, there are still not enough shelter beds to host all homeless people and many existing shelters are in a poor condition. While there are some small-scale initiatives to improve services, there is hardly any room for general improvement; public financing for homeless and other social services has continuously declined since 2006. At the same time, the institutionalization of emergency solutions distracts attention and resources from long-term solutions and leaves the underlying causes of social injustice intact.

Codifying the Criminalization of Homelessness

From a legal perspective, the post-transition Hungarian state has taken numerous steps to hide the problem of homelessness from public view. While there were a number of local laws against begging and rummaging through garbage, the process accelerated in the early 2000s, when the Mayor of Budapest first ordered the removal of homeless people from underground pedestrian passages (Török and Udvarhelyi, 2006). Another alarming sign came in 2009 when the Mayor of the 11th district declared “homeless-free zones” in one of the biggest districts of Budapest. However, legislation tended to become even stricter and more all-encompassing in the ensuing years. In the following, we will describe some of the most important government actions from 2010 to 2013.

In 2010 the Hungarian Parliament passed a law, which allowed local municipalities to ban the “inadequate use” of public spaces. Taking this opportunity, the general assembly of Budapest adopted a decree, which prohibited the use of public spaces for “habitual residence” and the storage of belongings for this purpose. This was declared to be a petty offence and could result in a fine of up to 50 000 HUF (about €165). The decree applied to all public spaces in the city. Moving further on this path, this kind of legislation was raised to the national level in December, 2012 and was placed into Act 69 of 1999 on Petty Offences. If someone was found in violation of the newly adopted clause, they could be sentenced to confinement or a fine of up to 50 000 HUF. There was one exception: local governments that did not provide

appropriate shelter could not apply this regulation. However, what was meant by “appropriate shelter” was never defined, which made it possible to apply the law almost universally.

In the spring of 2012, a new law was adopted: Act 2 of 2012 on Petty Offences. Article 186 of the new law declared that if someone uses public space in a way that is “different from its original designation” – for habitual residence or for the storage of personal property used for habitual residence – they commit a petty offence. The sanction was initially a fine, but in the case of non-payment it could be transformed into incarceration. If repeated, this crime became punishable by a maximum fine of 150 000 HUF (approximately €500).

Importantly, the law also allowed the imposition of an on-the-spot fine, which created a highly unjust practice: if someone admitted to committing the petty offence on the premises, they were excluded from any further legal remedy. *The City is for All*, a Hungarian homeless rights advocacy group and the Hungarian Civil Liberties Union (HCLU) encountered a number of cases where the “perpetrators” did not realize what they were signing. However, once this statement was made, it could not be revoked anymore.

Decision of the Constitutional Court [38/2012. (XI. 14.)]

In November 2012, the Hungarian Constitutional Court annulled the above article of the Petty Offences Act as well as the section of the Law on Local Governments, which made it possible to penalize “flagrantly anti-communal behaviour.” The plenum listed a number of reasons for its decision.

First, it emphasized that the annulled legislation had a Janus-face, as very similar actions were sanctioned by both administrative law (“flagrantly anti-communal behaviour”) and the petty offences law (rough sleeping).

Second, the Court emphasized that the fact that someone lives in public space does not infringe on other people’s rights, cause damage or endanger the habitual use of space or public order. As a result, there is no reason to define this as a petty offence.

Third, as the Court highlighted, a petty offence requires the subjective fault of the offender (intention or negligence). However, as homelessness is a social condition, the facts are independent of the person and the terms of subjective fault cannot be detected. In this way, by establishing objective liability, the law punished a social status rather than a specific behaviour.

Fourth, the legislation under discussion did not make a difference between substantive and procedural norms, which has weakened the rule of law. Specifically, while the Law on Local Governments has authorized municipalities to create sanctions for “anti-communal” and “flagrantly anti-communal” behaviour, it left the definition of these terms to the discretion of the authorities.

Fifth, according to the statement of the Court, there is no constitutional argument to limit somebody’s freedom of movement and human dignity. As a result, the state does not have the right to force homeless people to live in shelters or any other places.

Finally, by declaring that homelessness is a social problem that cannot be solved with the tools of criminal justice, the Hungarian Constitutional Court made it clear that making rough sleeping a petty offence is not only clearly against the rule of law, but also highly unjust.

Breach of Fundamental Rights

After the Constitutional Court annulled the above-mentioned regulations, the Fourth Amendment of the Fundamental Law, which came into effect in April 2013, incorporated provisions that authorized local governments to penalize habitual residence in public spaces. All international conventions such as The Charter of Fundamental Rights of the European Union, the Universal Declaration of Human Rights as well as the national constitutions of democratic states declare the right to human dignity, the right to the freedom of movement and the right to private life. However, even though the Hungarian Fundamental Law itself acknowledges human rights, the fact that it allows local governments to effectively prohibit street homelessness means that it does not meet basic human rights requirements.

In addition, the Fundamental Law fails to provide a strong enough guarantee for comprehensive social support. Article 34(3) of The Charter of Fundamental Rights of the European Union says that: “In order to combat social exclusion and poverty, the Union recognises and respects the right to social and housing assistance so as to ensure a decent existence for all those who lack sufficient resources, in accordance with the rules laid down by Community law and national laws and practices.” In contrast, the Hungarian Fundamental Law says that “Hungary shall strive to provide the conditions for housing with human dignity and to guarantee access to public services for everyone.” The phrase “shall strive” indicates that the Hungarian state does not recognize the right to social and housing assistance, it merely attempts to ensure it, even if it is not successful in doing so. All of this implies that the current Hungarian government is not really committed to addressing homelessness in a meaningful way.

Beyond the specific critiques regarding the penalization of homelessness, the opinion of the Hungarian Civil Liberties Union is that the whole structure of the Fourth Amendment violates innate human rights. In fact, several regulations introduced by the Fourth Amendment had been earlier annulled by the Constitutional Court because they were in breach of fundamental rights. Having the very same articles included in the Fundamental Law means that they are no longer *formally* unconstitutional. However, their *contents* continue to be against human rights as well as both universal and European values.

Taking a stand against criminalization

While The City is for All (AVM) mobilizes homeless people against criminalization, HCLU provides legal aid and pursues strategic litigation to support homeless people and demonstrate the illegitimacy of the current legislation. After the Constitutional Court's decision, all of the procedures that had been undertaken under the annulled law were ceased. However, HCLU warned that all former decisions should also be reviewed, and the fines imposed returned to citizens. In the end, HCLU was successful in convincing the Court to expand its verdict to address this issue.

In order to understand how many people had been affected by this law, HCLU filed a public information request. The response received indicates that between April and November 2012, altogether 39 545 000 HUF (around 132 000 EUR) were incurred as fines and the fine was replaced with incarceration in a total of 24 cases. There were big differences among the various counties of Hungary, which indicates that the execution of the law greatly depended on the practices and (financial) interests of local governments.

Based on the Fourth Amendment, the Petty Offences Act was modified and it came into force on October 15, 2013. According to the Act, there are certain areas – UNESCO world heritage sites – which are automatically “prohibited zones.” In addition, local governments have the right to designate further areas, where habitual residence is prohibited. Since the law was passed, HCLU has been monitoring law-making at the local level as well as the practice of penalization, while AVM requires public data on a monthly basis regarding the legal procedures initiated against homeless people under this Act.

Many local governments have passed decrees since they got the legal authorization to do so. As a result, almost the entire downtown of Budapest has become a prohibited area. Besides, we can already see that there are certain districts in Budapest (district IV and V), and two towns (Füzesabony and Várpalota), which began to persecute homeless people. Most of the above-mentioned authorities had

begun this practice even before the modification of the Petty Offences Act, which means that they had no legal possibility to do so. HCLU initiated legal supervision procedures in all these cases and turned to the competent prosecution as well.

Another highly questionable measure is that the petty offence procedure must be carried out in a designated homeless shelter. In Budapest, a building has been designated as an office where public servants are on duty 24 hours a day so that homeless people can be prosecuted any time.

Conclusion

Overall, the criminalization of homelessness is on the rise in Hungary and the Hungarian legislature has also failed to understand that people cannot be forced to move to homeless shelters against their will. Both *The City is for All* and HCLU want to take every possible step to stop this process, and intend to turn to the European Court of Human Rights. Finally we continue our work to protect the fundamental rights of people who are homeless and to advocate for more long-term solutions to the problem of extreme housing poverty.

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Reflections on the Leuven Roundtable on Homelessness: the End of the Beginning?

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Introduction

On 1 March 2013, a meeting of Ministers and Ministries from 24 EU countries met to discuss the issue of homelessness and to explore the possibilities for future co-operation on the issue. The meeting, arranged under the auspices of the Irish Presidency of the Council of the EU, was co-chaired by Jan O’Sullivan, the Irish Minister with responsibility for Housing and Planning, and Laszlo Andor, the European Commissioner with responsibility for Employment, Social Policy, Health, and Consumer Affairs Council (EPSCSO) matters. The meeting agreed on six principles that should underpin European co-operation on the issue of homelessness. This policy review seeks to outline the process involved in bringing that meeting about, and to draw conclusions about how issues, which are not areas of EU competency, such as homelessness, can be addressed and advanced at a European level. Using the event as a case study it also reflects on European policy-making and where homelessness and housing exclusion might sit in that context.

Homelessness Policy and the EU

While many issues at European level can be dealt with by a single council formation, e.g. financial or economic issues by Economic and Social Affairs Council (ECOFIN), the issue of homelessness is not an EU competence. As a national responsibility, it resides with various different Ministries in different countries, e.g. health, environment, or social protection. This means there are no regular mechanisms within the conventional EU institutional structures where Ministers with this responsibility meet and no regular council meeting where questions relating to homelessness can be addressed. However, homelessness is an issue common to all countries in the EU, and while the fundamental causes are generally similar, the nature and extent of the problem and responses can vary widely.

The main opportunities to progress homelessness at a European level to date have been through the Open Method of Coordination (OMC). Gosme argues that the placing:

... of homelessness on the social OMC agenda through the common objectives has been an important first trigger for mobilisation of state and non-state actors... to support homelessness policy-making (2012, p.8).

The OMC allows for a shared competence on social policy matters between the EU and Member States, with the EU co-ordinating policies which are developed at national level in accordance with needs (Gosme, 2012, p.5). Spinnewijn (2009) charted the development of EU engagement with the issue of homelessness in the first decade of the century, noting the following reasons why it did not become as well integrated into the social inclusion agenda as other issues:

- (a) Lack of agreement on indicators related to homelessness.
- (b) Late emergence of homelessness as a priority issue in Member State National Anti-Poverty Strategies (NAPs).
- (c) Homelessness is commonly not the responsibility of the Social Protection Committee (SPC) delegate's Ministry.
- (d) Insufficient resources [allocated] within the Commission to advance the issue.

However, he notes a rising level of interest in the issue from 2008. In recent years, there have been significant moves at European level seeking further co-operation, up to and including a European Homelessness Strategy. The economic crisis in general has resulted in an increase in people in housing difficulty, ranging from mortgage distress and increased levels of eviction to literal homelessness. The 2012 Annual Growth Survey (European Commission, 2011) reported increased homelessness in several countries as a result of the economic crisis. Tacitly, countries that were experiencing high levels or indeed chronic levels of homelessness among migrant communities were acutely aware of the potential of deeper European-level involvement in homelessness at a policy, support, and financial level.

In 2010, the European Consensus Conference on Homelessness, hosted by the Belgian Government in conjunction with the Commission, sought to draw together governmental, practitioner, academic and non-governmental experts to find a consensus on key issues related to homelessness to serve as a basis for developing policies on homelessness at a European level. In 2011, a number of key European institutions and actors – the European Parliament (2011), the Committee of the Regions (2011), and the European Economic and Social Committee (2012) all made calls for more concerted EU action on homelessness, and in 2012, the

EPSCO adopted conclusions calling on Member States and the European Commission to “develop and promote adequate schemes for persons who are homeless”(COEU, p.11).

The attitude of the Commission to increased EU involvement in homelessness was less clear. The Commission had co-sponsored the 2010 European Consensus conference on homelessness, and also in that year, in the Joint Report on Social Protection and Social Exclusion (EC, 2010) noted that comprehensive strategies were key to fighting homelessness and housing exclusion. It also went on to emphasise the importance of governance in structures designed to combat homelessness, the key role of prevention strategies, and the need for robust monitoring and evaluation strategies (EC, 2010). However, there was a marked reluctance to move towards a strategy on homelessness on three principal grounds. First, there was a view that as it was an area of national competence, then the EU should not act outside of its competence; second the case for a strategy had not been made; and third, the Commission had not fully settled on its view of homelessness.

The Social Investment Package (SIP), published in November of 2012 (European Parliament, 2012), surprised many in its approach to homelessness. It was clear in the year running up the publication of the SIP that thought on the issue was rapidly evolving, and it was evident that there was considerable internal debate. The publication of a full *Staff Working Paper on Confronting Homelessness* (EC, 2013) as part of the SIP was a step further than many had expected. It also aligned well with the view of advocates for housing-led approaches and EU co-operation on this matter. While it stopped short of advocating a full EU Homelessness strategy, it did signal an acknowledgement that addressing homelessness was now a key part of social inclusion policy at a European level.

Pressure from Member States and Lobbying Efforts

It must also be acknowledged that there has been on-going pressure from various member states in relation to advancing European co-operation on homelessness. For example, as mentioned, the Belgian Government hosted the Consensus Conference as an initiative of the Presidency of the EU Council in 2010, co-organised with the European Commission. However, a key event in the context of preparation for the Roundtable meeting was the call by the French government, in March 2012, for a European strategy on homelessness. The paper was presented informally at first, and then formally communicated to the Commission later that year. It proposed a strategy based on five principles: housing first; importance of supply; importance of supports to maintain housing; prevention; and choice.

In addition, enhancing European collaboration had long been the goal of NGOs working in the area of homelessness, especially FEANTSA (the European Federation of Organisations Working with the Homeless) and its members. Gosme argues that European networks not only participate in:

... stakeholder dialogue with the Commission drawing attention to emerging needs and policies, but are also vehicles for mutual learning and centres of expertise which can support policy formulation based on evidence from the ground (2012, p.11).

There have been on-going ad hoc meetings (conferences, peer reviews, projects) which have brought together key national and European stakeholders to share learning and best practice. In addition this on-going dialogue has been supported by the work programme of the European Observatory on Homelessness.

The Roundtable

Early in 2012, Jan O'Sullivan TD (member of the Irish Parliament), Minister for Housing and Planning in Ireland stated her intention to hold a meeting of European Ministers with responsibility for homelessness during the Irish presidency in the first half of 2013. Upon taking up the role of Minister of Housing and Planning in December 2011 Minister Jan O'Sullivan highlighted that homelessness would be one of her core priorities, stating:

I am determined that my role as Minister for Housing will also see substantial progress in tackling the continuing scandal of homelessness in Irish society. I am working closely with the various voluntary bodies which are committed to ending homelessness so that everyone can access secure, safe and sustaining accommodation.¹

O'Sullivan, a Labour Party TD for a constituency with a high level of social exclusion saw homelessness as the most urgent problem in the housing side of her portfolio. The Presidency offered an opportunity to advance the issue at a European level. The intention of the meeting was to:

...bring added focus to the EU's involvement in the area of homelessness, to discuss issues of common interest and possible future cooperation so as to signal the strong support among member states towards addressing and tackling the issue of homelessness.²

¹ <http://www.labour.ie/janosullivan/>

² <http://eu2013.ie/news/news-items/20130301post-homelessnessroundtablepr/>

At first, it was conceived of as an “informal meeting” of Ministers, as routinely happens during Presidencies. However it became clear that a meeting in, or close to Brussels might be more opportune; attracting a greater number of attendees, and producing a more focused outcome. Minister O’Sullivan had expressed a strong view that the meeting should go beyond discussion to make some conclusions and suggest actions for the future. In the early stages it was proposed that there would be a meeting of Ministers to be followed by a meeting with the Commissioner to discuss the outcomes. However, with the Commissioner’s agreement to attend and indeed co-chair the meeting, there was a strong base for meaningful and productive discussions.

In preparation for the meeting, the Irish Presidency developed a discussion paper for circulation proposing a “framework for co-operation” (OMHP, 2013a, pp.6-7) which adopted the principles in the aforementioned French paper at its core. However it also sought to address a number of other contentious areas on the issue of homelessness at a European level. In particular, it emphasised the importance of a common reference framework, data, and research.

The paper was, however, deliberately conservative in its goals. While adopting the principles from the French paper as a basis for co-operation, the Irish Government were consciously not calling for a European Strategy on Homelessness. This was in recognition of the importance of building a broad consensus on the issue across countries and in acknowledgement of the marked sensitivities around a “strategy”. Some of the sensitivities are directly related to the competency issue and the fact that not all countries would welcome European intervention in this “domestic” matter however others related to fears of imposition of definition and measurement methods undermining national data collection systems and also having budgetary implications. The Irish Government deliberately focused on ensuring this meeting brought as many players as possible around the table to build this broad consensus. This was for three reasons. First, the meeting and paper was seen as part of a process moving towards greater European cooperation and not an end in itself; secondly as the meeting fell outside the formal European apparatus for its outcomes to be meaningful, it was important that as many countries as possible were represented and that the Commission was involved. Thirdly, while the event was part of the official Presidency programme, marshalling the required political and diplomatic resources for more complex negotiation was not possible in the context of overall Presidency priorities. In the drafting of the discussion paper, there was extensive consultation, including with the Commission around certain sensitive issues, in language it drew heavily from SIP, and cautiously approached matters around the definition and measurement of homelessness. In addition, bilateral engagement with other Member States in advance of the meeting was important.

Discussion and Conclusions

For many reasons, homelessness and housing exclusion, though clearly recognised as severe forms of social exclusion, have struggled to find their way onto a central place in the policy agenda at European level, notwithstanding competency issues. Key to this problem appears to be the difficulty in agreeing common indicators (Spinnewijn, 2009, p.303). Given the rising level of interest in an increased level of European engagement on the issue, the Irish Presidency initiative was designed to explore the possibilities for further co-operation. The economic crisis that beset Europe from 2008 must be seen as one of the key changing contexts. Certainly, it acted as an important catalyst for the increased focus on the issue. The rise in housing-related social exclusion including homelessness as a result of the adverse economic circumstances is well recognised and indeed is cited in the Commission Staff Working Paper as the principal reason for more “urgent concerted action” on homelessness (EC, 2013, p.1).

The event is noteworthy for a number of reasons. Overall, the first meeting of EU homelessness Ministers is a significant milestone in itself. The high level of attendance reflects the growing acknowledgement of the problem and a willingness of Ministers to come together to exchange views on it. The decision of Commissioner Andor to attend, and indeed, to co-chair the event is an important step in Commission engagement on the issue of homelessness. This indicates the Commission, although clearly wary of embarking on a potentially fraught new work stream, acknowledges combating homelessness as a key part of the social inclusion agenda. It was also evident that Ministers were interested in discussing closer working, with an additional EU dimension. Finally, the agreement on the six principles sets out an agenda on which the next steps can be based, and they are a “good fit” with the focus on homelessness within the SIP.

As Hill (1997) notes the relationship between policy and politics cannot be underestimated and one of the key lessons from the Irish initiative is the centrality of politics to policy making. The Council of the European Union operates in an extremely crowded policy landscape, with limited time, and many demands. As with all policy areas, working in a 27-member state structure presents challenges in terms of dealing with such a variety of political and policy differences, and with national sensitivities and nuances. In addition, there are a wide range of actors involved in the Presidency planning process, ranging across the national government apparatus, and into official channels in the European Council itself. Given the nature of the Union as a multi-state, multi-lingual entity, the range of processes and precision of language requires time and resources to navigate. In addition, while all countries share the problem of homelessness, the nature and extent varies across the Union. Attitudes and approaches to dealing with the issue are also diverse.

Accordingly, strong and single-minded political will to bring the matter to the table is vital. Overall, the approach of aiming for broad consensus rather than a radical shift in direction and overly circumscribed outcomes were important to an agreed output from the meeting.

Gosme describes “Europeanisation” as a three-tier process including:

... top-down processes influencing national agendas, bottom-up processes influencing the EU agenda, and horizontal cross-national influencing... which are empirically linked in practice” resulting in greater interconnectedness between national policy-making and European policy making processes (2012, p.5).

Certainly there are elements of all these in relation to homelessness at a European level. It is perhaps too early to say where the Roundtable initiative sits in the overall “Europeanisation” of homelessness policy. From a position where the issue was very marginal to the social OMC, there has been a marked rise in the level of interest at a European level in recent years. The OMC clearly does allow for cooperation but the process is slow and incremental where policy is built step by step allowing for “mutual adjustment” and protecting against lasting mistakes (Lindblom, 1959, pp.81–82). Perhaps such an approach is particularly appropriate in complex and contested areas however, and importantly it does not facilitate radical policy change (Randall, 2011, p.292). Indeed this very point was raised by Gosme (2012) where she queried whether there had been a “conscious decision” not to push for EU evaluation and monitoring in relation to homelessness given it was a “sensitive policy area” (p.16) within the competency of member states who might be reluctant to fit their national homelessness policy making into an EU monitoring framework.

The SIP is the context identified for the Commission to support and facilitate Member States on homelessness, so there is a clear need to determine a course of action for this to take place. Clearly a specific European forum where homelessness can be addressed continues to be absent. It appears that the Social Protection Committee remains the vehicle through which actions on foot of the Report must be progressed. There is unlikely to be an appetite for a new structure, so it appears that some new agreed programme and method of working must be conceived. There have been recent calls for a “Roadmap” to ensure implementation of the homelessness-related aspects of SIP. However, it must be cautioned that overall the SIP resides in the EPSCO council formation which does not include many Ministries with responsibility for homelessness. While the Irish initiative gave the issue a new impetus, Presidencies are transitory and further meetings of Ministers will require homelessness to be reflected in the priorities of those Presidencies.

While the Leuven Roundtable demonstrates that Member States are anxious to co-operate with each other on the issue of homelessness, and they have agreed on the six principles on which that co-operation should be based, the issue is now to translate those principles into further steps and concrete actions. Many of the drawbacks and obstacles to progress on homelessness that were identified in this article in relation to the OMC remain in place. The Irish initiative, as mentioned, explicitly sought consensus between Member States and with the Commission. It sought to advance the issue without bringing about disruptive change or challenge. This may be seen as its strength and indeed also weakness. It remains to be seen how the circumspection displayed in the agreement reached at Leuven will overcome these. Therefore the Roundtable might be conceived of as the “end of the beginning” of EU engagement on homelessness.

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Analysing Costs and Benefits of Homelessness Policies in the Netherlands: Lessons for Europe

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- › **Abstract_** *Although cost-benefit analysis is commonly used to evaluate social policies, studies on the benefits and costs of homelessness are still scarce in Europe. This paper reports on a cost-benefit analysis of homelessness policies in the Netherlands. This analysis was prompted by a need for government to evaluate the 'return on investment' in a plan for social relief in the main cities. The cost-benefit analysis conducted substantiates claims that the first stage of this plan generated positive results. Moreover, it indicates that a planned shift to prevention and 'housing first' during the second stage will generate financial benefits. The results indicate that investing €1 in effective homelessness policies avoids at least €2 of costs in other important domains (health care, criminal justice and housing), with the net saving depending on the target group. Both the results and the analytical framework developed have been broadly endorsed by academic experts and field practitioners as suitable and plausible. The findings have been used by local policy makers to improve their policies. The planned large-scale decentralisation of long-term health care can further improve incentives for optimising homelessness policies. The framework can be used for follow-up research at a regional/local level and for cross-national comparisons.*
- › **Key Words_** *Homelessness policies, cost-benefit analysis, social investment, effectiveness, prevention, decentralisation*

Introduction: Rationale for cost-benefit analysis

In recent years two important developments have influenced social policies in many western countries: A diminishing availability of public funds and increased expectations with regard to quality. These developments have spawned further initiatives to optimise public policy efforts, both within specific policy areas and for cross-cutting initiatives that span more than one policy area. This has generated a number of key principles for public policy. The most important of these are:

- General efficiency: delivering qualitatively good services at the lowest possible costs;
- Client orientation: focussing on clients and their social context, whereby outcomes should be attuned to individuals' specific needs and capabilities;
- Continuity of support: guaranteeing continuous support, both over time and between different responsible authorities, including clear case management;
- Timely support: emphasising and increasing prevention (social care) and primary care (light/short care for mainly one dimensional problems) instead of expensive secondary care (specialised care/cure for complex problems);
- Coordinated support: more efficient coordination (integral service provision) of social, primary and secondary care through optimisation of different policy-chains (e.g. social support/welfare, public and general health care, mental health care, and youth/family care).

Cost-benefit analysis can test various claims of efficiency and effectiveness and hence contribute to efforts to optimise social policies. Homelessness is one of the most complex policy domains. A number of studies on the costs and benefits of initiatives to tackle homelessness have been performed in Anglo-Saxon countries such as Australia, the USA, Canada, and the United Kingdom (e.g. Ministry of SDES, 2001; Mondello *et al*, 2007; Culhane, 2008; Zaretsky *et al*, 2008; Larimer *et al*, 2009; UK Government, 2010).

On the European continent, such studies are much scarcer but they do exist. A recent example is a national cost-benefit analysis of the effects of homelessness policies (HP) in the Netherlands, conducted in winter 2010 for the Ministry of Public Health, Welfare and Sport (Cebeon, 2011). Important developments in responding to homelessness in the Netherlands, which triggered the analysis, are outlined below.

Dutch context

About ten years ago, thousands of people lived on the streets in the Netherlands (mainly in the largest cities) or stayed for lengthy periods in overnight shelters. This was partly caused by the insufficient capacity of community shelters. The high level of homelessness had consequences for society as a whole as well as for homeless individuals. It generated a great deal of public disorder and petty crime and also resulted in a deterioration in the health status of many homeless people due to their care avoidance.

The urgency of the situation prompted a joint effort by the Dutch government and the four principal cities, (known as the G-4) Amsterdam, Rotterdam, The Hague and Utrecht, resulting in a Plan for Social Relief. During its first stage (2006-2009) the plan focussed on providing immediate improvements in the conditions for those homeless people living on the streets, by active guidance and supporting their move towards rehabilitation as well as measures to prevent homelessness targeted at those at serious risk of eviction or those leaving detention/institutions.

Based on the G-4 agreement, the cities developed strong links with a chain of relevant partners, such as (mental) health care providers and housing corporations. They adopted a new approach consisting of the following elements:

- Every homeless person applies for support at a *central municipal access point*. They are then screened by public health care professionals to check if they meet the admission criteria¹ (see Planje and Tynman, 2013 for further information on the admission criteria);
- An integrated plan is made for every homeless person, which covers all relevant areas of life. On this basis, *personalised trajectories* out of homelessness are initiated and managed by a service provider professional;
- Progress and results are *monitored* based on uniformly registered client-information; periodic meetings are held between municipal supervisors and client-managers on individual trajectories;
- *Seamless co-operation* by all chain partners in a structural framework under municipal policy guidance. Agreements are made with health care insurance boards and housing corporations on the provision of long-term health care and housing;
- The formation of (outreaching) *flexible assertive community treatment-teams* which facilitate the intensified participation of (mental) health care providers and others as necessary;

¹ Important criteria are lack of a registered residential address, living in the region for at least two years, suffering from multiple problems, and not being self-sufficient.

- *Increased capacity*, most notably in the provision of meaningful daytime activity, debt relief as well as specialised long-term supported/supervised accommodation, which includes people with very complex problems due to chronic addiction and/or mental illness.

With the execution of this first stage, the desired breakthrough has largely been achieved. The situation has improved considerably for homeless and potentially homeless people themselves as well as for society at large. The new approach has helped many homeless people get off the streets, leading them into supported pathways out of homelessness and improved the well-being of many clients by creating stable incomes, health and housing. Moreover, it has prevented many people from becoming homeless; the number of evictions and people becoming homeless after being released from prison or long-stay institutions has decreased. Another result is a significant decrease in petty crime committed by homeless people.

Substantial social investments have been made in order to achieve these results. Total expenditures of the G-4 plan amounted to around €175 million up to 2009. The G-4 cities contributed about one third of that figure. Partly in light of tighter public budgets and also because of the magnitude of the investment required, the question was raised as to what extent these expenditures have provided positive (financial) benefits.

At the same time, more fundamental challenges remained that called for additional efforts. To address them, the Dutch government and the G-4 agreed on a second stage of the plan (2010-2013). The purpose was to shift efforts towards enhancing the capabilities of vulnerable persons/families (including residential clients) to be self-sufficient in various domains, including social networks, employment and daytime activity.

Therefore a national analysis of costs and benefits was needed that would:

1. Develop a methodological framework to assess the costs and benefits for the entire policy domain;
2. Establish the main benefits of HP in other policy domains and, where possible, quantify them;
3. Demonstrate how available public budgets for homeless people could be allocated more effectively.

It was decided that the analysis should be broader in scope than the G-4 plan, because the results have to be relevant also for other large cities that have developed similar plans. This policy review first highlights the cost-benefit model developed and its operationalisation. It proceeds by describing and quantifying the main benefits for each target group, which are compared with costs. Finally, the limitations of the study and lessons for future policy and research are discussed.

Model and Operationalisation

Character of the study

An exploration of existing cost-benefit analyses in the Dutch field of homelessness yielded only a small number of relevant studies. The most comprehensive is a study by Gort (2007), who used (administrative) data of the municipality and the police and justice department for a sample of about one hundred clients in supported pathway out of homelessness, in conjunction with insights from (former) police and public health experts to make an internal business case for the city of Rotterdam. Through extrapolation to the total client-group he concluded that investing €1 in homeless services and (mental) health care generates more than €2 of cost savings for police/justice and insurance companies. Another example regards a study at the level of one service provider. Boers (2006) analysed how specialised supported housing by this provider affected the reconviction rate of about one hundred clients who have left penal institutions. She quantified the reduction in social costs and compared these with total service costs. The main limitations of these studies were a focus on specific target groups (many of which were higher need clients) and benefits for the criminal justice system, while the effects of homeless services were entangled with those of (mental) health care.

Usually, cost-benefit studies focus on the costs and benefits of individual policy programmes, which are often limited in scope (for a particular period) and have rather well-defined goals and target-groups. The basic cost-benefit model then can be derived from available official documents together with input from relevant officials (policy-makers). Often, such analyses are facilitated by (readily available or quickly gathered) targeted data with a direct link to the programme.

In essence, our study was set up along similar and broadly accepted methodological lines. However, to perform a total cost-benefit analysis for the entire policy field (national/meta-level) from a small, specific knowledge base meant that we had to invest much (more) time in:

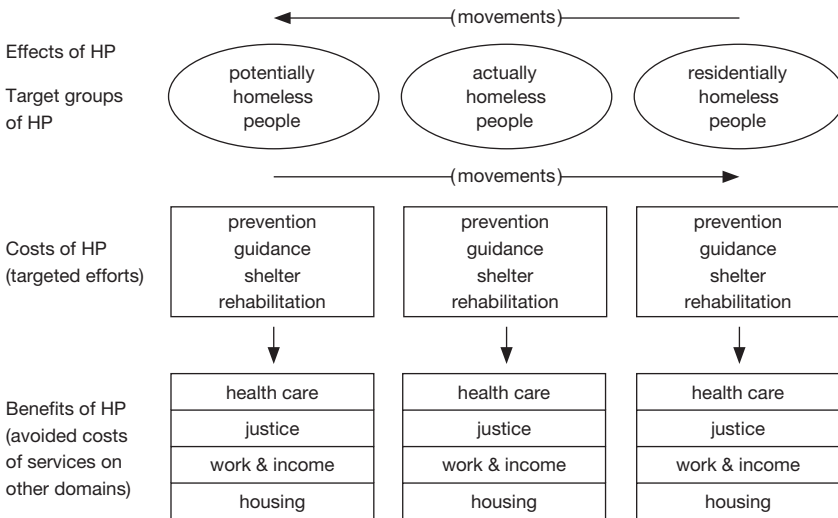
- Defining and delimiting scope, in terms of target-groups, policy aims, time horizon, baseline situation, and relevant categories of costs and benefits (HP versus other domains);
- Setting up a basic model that transcends the level of specific programmes and can still generate meaningful insights regarding the costs and benefits of policy-efforts;
- Gathering existing data (including policy/scientific research and official sources of public service costs) from different sources, and linking it in a meaningful way to the policy field and identified target-groups (defining which types of service costs can be regarded as benefits of HP and how to operationalise these avoided costs).

In order to mitigate the inherent limitations of this approach and the short duration of the study, we discussed the concept model and its preliminary results extensively in several panel meetings with experts in the field (street-level and policy-advising experts of the main cities, representatives of clients and university professors). Moreover, the operational model was tested during a broader expert conference with representatives of (mental) health care institutions, shelter providers, other cities and independent/academic experts as well. Finally, the study profited from the critical input of municipalities, shelter providers, mental health care providers, and health insurance companies via representatives of their national associations.

Cost-benefit model

The structure of our cost-benefit model consists of four basic elements, depicted in Figure 1.

Figure 1: Basic structure of cost-benefit model



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The model starts from the (intended) effects or policy aims of HP. HP aims to fulfil both a preventative and a rehabilitative function. HP provides the necessary supports to prevent the present situation of vulnerable and homeless people from deteriorating. HP can also fulfil a rehabilitative function by promoting the social (re) integration of homeless people. It is envisaged that movement between the different target groups will deliver both aims of HP. The study distinguished three target-groups to which HP are usually aimed. These are summarised in Table 1.

Table 1: Definition and estimated numbers of target groups

Target group	Definition	National numbers*
1. Potentially homeless people	Vulnerable people/families at serious risk of eviction, including formerly homeless and/or formerly clinical clients of mental health institutions	60000
2. Actually homeless people	People without a residence, who need to resort to staying outdoors, in a public shelter or with friends or family, without knowing where they will stay the next night	17800
3. Residentially homeless people	People registered as habitants of institutional housing for homeless people	13000

* Sources: 1. City-plans for social relief and Bos *et al.* 2010, p. 2. Central Bureau of Statistics 2010, p. 3. City-plans for social relief.

These groups can be seen as different stages of homelessness. Each stage requires a particular approach to improve people's situation, involving a mix of instruments (prevention, guidance, shelter and rehabilitation). The model only takes into account the costs of (initial) HP efforts that are needed to realise the desired effects (stabilisation or a move to another target-group). Such efforts include both temporary expenses (such as the start up of trajectories) and longer term expenses (such as aftercare by providing housing support). The costs of the 'stable situation' itself (i.e. maintaining the initial or improved situation) are left out of the equation.

A basic assumption in the analysis is that by preventing undesirable changes (for example the shift from 'potentially homeless' to 'actually homeless' through eviction) and stimulating desirable changes (for example the shift from 'residentially homeless' to 'potentially homeless'), various types of costs in other domains are being avoided/offset. The study shows that these benefits of HP are most substantial in health care and criminal justice, and to a lesser extent also materialise in the domain of housing.

Operationalisation

To operationalise the model (i.e. to fill in the qualitative and quantitative links) several steps were taken for each target-group. As a first step, the main potential cause-effect relationships were described to make clear which effects HP are likely to achieve in different situations. Secondly, a baseline situation was defined in order to isolate HP results from a situation 'as if there was no HP'. Thirdly, we gathered existing data about the service utilisation of people in target-groups and approximated their costs in different domains. These data were quite heterogeneous, varying in scope (one subgroup or all groups; one type of service or a broad range), content (definitions, time-periods, etc.) and quality (from practitioners' observations to scientific design). We used this input to quantify the service utilisation costs of target-groups in all relevant domains. The resulting quantities involve observing a time horizon of about ten years to incorporate both short and long-term effects.

A next step was to conceptualise the effectiveness of HP in establishing cost offsets elsewhere. We tested assumptions on (a) success rates for HP in stimulating desirable changes and preventing undesirable changes (numbers of affected people in target-groups) and (b) the degree to which outcomes can be attributed to HP. HP are not executed in isolation but within a chain of mutually dependent institutions. Examples of chain partners are mental health care providers (outreaching teams, addiction care), providers of general welfare support (early intervention, guidance and short-term support), income related welfare support (budget-control assistance, debt relief, labour participation), police/justice department (fighting public disturbances and crime) and housing corporations (preventive housing support). The inherent overlap of responses to homeless people generates a necessity for cooperation. HP cannot result in desired effects without effective contribution from other actors and vice versa. Hence, provisions for target-groups must be applied and analysed in coherence with other domains. Final steps were to determine the benefits in different domains (using the results of previous steps) and to compare total benefits with total costs of HP.

Results

Intended effects and required HP efforts (see Figure 1)

Targeted HP efforts can generate different types of effects with regard to people in each target-group. The cost-benefit analysis focussed on effects that are expected to be the most notable, in terms of appearance as well as substance. Both these intended effects and the required HP efforts are summarised in table 2.

Table 2: Intended effects and required HP efforts per target-group

Target-group	Intended effect of HP	Targeted HP efforts
Potentially homeless people	1. Unstable situation is stabilised with help of HP efforts and (most) potentially homeless people are prevented from becoming actually homeless (again).	Limited guidance/support to keep people 3 years in trajectory. Limited ambulant housing support for 2 years.
	2. Eviction cannot be averted and with help of HP efforts some potentially homeless people are guided directly to supported housing (housing first), in order to prevent them from becoming actually homeless. Indirectly, these efforts keep several people from becoming a repeat offender.	Transitional use (3 months) of overnight shelter until supported housing is available. Guidance and 1 year aftercare: case management, extra intensive for those at risk of becoming repeat offender.
	3. Eviction cannot be averted and with help of HP efforts some potentially homeless people are guided directly to protected housing in order to prevent them from becoming actually homeless. Indirectly, these efforts keep several people from becoming a repeat offender.	Transitional use (3 months) of overnight shelter until protected housing is available. Guidance and 1 year aftercare: case management, extra intensive for those at risk of becoming a repeat offender
Actually homeless people	1. With help of HP efforts some (self-supporting) actually homeless people are guided directly to independent housing (e.g. without structural support).	Transitional use (3 months) of overnight shelter until housing is available. Limited ambulant housing support for 3 months to enable a new start. Guidance and 6 months aftercare: Limited case management for further stabilisation.
	2. With help of HP efforts some actually homeless people are guided to permanent housing with ambulant support.	Transitional use (3 months) of overnight shelter until housing is available. Ambulant housing support for 6 months to enable a new start. Creating social support system to guarantee new situation. Guidance and 3 year aftercare: Limited case management for further stabilisation.
	3. With help of HP efforts most actually homeless people are guided to supported housing. Indirectly, these efforts keep several people from becoming a repeat offender.	Transitional use (3 months) of overnight shelter until supported housing is available. Heroin-assisted treatment for 1 month (start-up). Supported collective housing for 6 months to get used to housing. Structured daytime activities for 6 months. Guidance and 1 year aftercare: case management, extra intensive for those at risk of becoming a repeat offender.

Target-group	Intended effect of HP	Targeted HP efforts
	4. With help of HP efforts other actually homeless people are guided to protected housing. Indirectly, these efforts keep several people from becoming a repeat offender.	Use of emergency shelter for 1 week. Transitional use (3 months) of overnight shelter until protected housing is available. Heroin-assisted treatment for 1 month (start-up). Structured daytime activities for 6 months. Guidance and 1 year aftercare: case management, extra intensive for those at risk of becoming a repeat offender.
Residentially homeless people	1. With help of HP efforts some residentially homeless people move to supported permanent housing.	Ambulant housing support for 6 months to enable a new start. Sustaining a social support system for 1 year to guarantee new situation. Guidance and 3 years aftercare: Case management for further stabilisation.
	2. The situation of most residentially homeless people in supported housing is stabilised and with help of HP efforts they are prevented from becoming actually homeless again.	Case management for 3 years.
	3. With help of HP efforts some residentially homeless people move on from protected to supported housing.	Supported collective housing for 1 year to get used to housing. Guidance and 1 year aftercare: Case management.
	4. The situation of residentially homeless people in protected housing is stabilised and with help of HP efforts they are prevented from becoming actually homeless again. Indirectly, these efforts keep several people from becoming a repeat offender.	Case management for 3 years, extra intensive for those at risk of becoming a repeat offender.

Quantification of Benefits and Costs (see Figure 1)

In order to quantify HP benefits per effect, it was necessary to estimate (a) the number of people in the target-group who make a desired movement with the help of HP efforts and (b) how much HP contribute to avoiding/reducing costs in other domains. The way these indicators of effectiveness and the intended effects of HP were operationalised, is summarised in Table 3.

Example: to quantify effect 1 of potentially homeless people (situation with HP), it was assessed that approximately 85 percent of this target-group (a) can be supported so as to prevent them from becoming actually homeless (situation without HP). About one third of the resulting cost avoidance elsewhere can be attributed to HP efforts (b).

Table 3: Part of target-group and HP contribution per effect

Target-group	Effect	Intended effects: from... to...		(a)	(b)
		Situation without HP	Situation with HP	% Target-group	HP contribution
Potentially homeless people	1	Actually homeless	Potentially homeless	85%	33%
	2	Actually homeless	Residential homeless: Supported housing	12%	50%
	3	Actually homeless	Residential homeless: Protected housing	3%	50%
Actually homeless people	1	Actually homeless	Outside target-groups of HP	2.5%	50%
	2	Actually homeless	Potentially homeless	15%	50%
	3	Actually homeless	Residential homeless: Supported housing	30%	67%
	4	Actually homeless	Residential homeless: Protected housing	20%	67%
Residentially homeless people	1	Supported housing	Potentially homeless	3%	50%
	2	Actually homeless	Residential homeless: Supported housing	54%	67%
	3	Protected housing	Supported housing	6%	67%
	4	Actually homeless	Residential homeless: Protected housing	34%	67%

In the cost-benefit analysis, an effect is defined as a particular change in the living situation that people in the target-group make as a result of HP. Column (a) shows approximately which part of each target-group experiences the effect. In the case of potentially homeless people, the figure for effect 1 was mainly derived from data about the number of G-4 evictions related to rent arrears or complaints. In 2006-2009 about 10-12 percent of the target-group fell into this category (Maas and Planije, 2010). The inverse of this figure is taken as representative for the number of people who are able to sustain their tenancies. Estimates for the other effects were mainly derived from the observations of Wolf *et al* (2002) regarding the number of marginalised people who have been actually homeless in the recent past.

Estimates for effect 2 of actually homeless people were derived from observations of Wolf *et al* (2002) about the number of people who have been homeless for less than one year. The figures for effect 3 and 4 were derived from Cebeon (2010a),

while expert estimates provided the basis for the figure of effect 1. For residentially homeless people, the estimates were mainly derived from Cebeon (2010a). This study provides insight regarding the 'moves' residential clients and (reached) actually homeless people in Amsterdam would be likely to make within coming years. Asked for their opinion, experts accepted these estimates as broadly suitable indicators. They also provided informed estimates for the risk of becoming a repeat offender: About one third of the group affected by effect 2 and 3 of potentially homeless people, effect 3 of actually homeless people and effect 4 of residentially homeless people, and about half for effect 4 of actually homeless people.

Note that the numbers in column (a) for actually homeless people do not add up to the entire target-group. The main reason for this is that HP did not yet effectively reach substantial numbers of actually homeless people. Some other people have to be guided to medical institutions, e.g. due to severe mental illness and/or problematic drug/alcohol use. To a much lesser extent, this reason also holds for some residentially homeless people.

We examined the sensitivity of these estimates for their impact on the resulting benefit-cost ratios (BCR). In all scenarios the risk of becoming a repeat offender is downgraded by one quarter. If proportion 1 of the potentially homeless group changes by 5 percent and these people become part of subgroups 2 and 3, then the BCR changes by about 1 percent. This 'inelastic' impact points to the dominance of subgroup 1 (i.e. the success of prevention). For the actually homeless group a scenario was tested in which more/less people were guided to forms of 'housing first' (effect 1, 2 and 3) instead of to protected housing (effect 4). If subgroup 4 changes by 25 percent, while the other groups change inversely with an according percentage, the BCR changes by about 6-8 percent. A comparable scenario was tested for the residentially homeless group by supposing that more/less people move on (effect 1 and 3) instead of staying for longer periods in institutional housing (effect 2 and 4). If subgroups 2 and 4 change by 5 percent, while the other (small) groups change inversely by 25 percent, the BCR changes by about 3 percent. Although exact figures are impossible to establish, it seems reasonable to conclude from these analyses that the estimates provide a quite robust basis for a quantification of HP benefits.

As column (b) shows, the avoided costs cannot be entirely attributed to HP efforts. To a varying degree, the cost difference is also due to efforts of other chain partners. These multiple influences call for a separation of the contribution of HP from that of others. Due to a lack of actual data, we made global estimates of the HP contribution, mainly based on expert knowledge. Important considerations were that the role of HP in a situation of independent living (potentially homeless: effect 1) is generally smaller than in a situation of social exclusion. In the latter case, HP normally have a leading role in guiding people to a residential setting (e.g. actually

homeless: effect 3 and 4) and helping clients to improve their situation and move on to a more self-supporting setting (e.g. residentially homeless: effect 2, 3 and 4). Given the involvement of so many other institutions, it does not seem to be realistic to assume much higher HP contributions.

Total HP benefits have been quantified by multiplying the mean avoided utilisation costs per person of all included public services (see Appendix) with the relevant numbers of people in the target-group (a) and the attribution-factor of HP (b). The results are summarised in Table 4 and compared with total costs.

Example: the tenancies of 51 000 potentially homeless people can be sustained with the help of HP efforts (effect 1), which wards off the descent into actual homelessness. In the domain of health care, this probably avoids about €700 million of expenses that would otherwise have been spent on these people if they had descended into actual homelessness.

Table 4: Quantified benefits and costs of HP per target-group (€million)

Target-group	Effect	N*	Benefits: Housing €million	Benefits: Work & income €million	Benefits: Health care €million	Benefits: Criminal justice €million	Total benefits of HP €million	Total costs of HP €million
Potentially homeless people			38	pm	920	314	1272	589
	1	51 000	38	pm	702	208	948	461
	2	7 200	0	pm	171	81	252	102
	3	1 800	0	pm	46	25	71	26
Actually homeless people			0	pm	374	183	557	280
	1	450	0	pm	11	4	15	6
	2	2 700	0	pm	55	17	72	61
	3	5 350	0	pm	172	83	254	143
Residentially homeless people			0	pm	344	126	469	135
	1	400	0	pm	2	1	3	3
	2	7 000	0	pm	172	47	219	68
	3	800	0	pm	18	-2	16	15
	4	4 400	0	pm	151	80	231	48

* N = number of people: fraction from Table 3 times total target group. pm = pro memoria: presently unavailable, but to be added later.

Due to rounding a minor discrepancy exists for a number of figures.

Table 4 indicates that HP efforts help to avoid approximately €1.3 billion of expenses that would otherwise have been spent on public services used by potentially homeless people if they transitioned into actual homelessness. For the other target-groups total HP benefits can reach approximately half of this figure (€0.5 to €0.6 billion). The benefits in the case of actually homeless people result most notably

from providing shelter to large groups by guiding them towards supported or protected housing (effect 3 and 4). Avoiding a relapse into actual homelessness generates the main benefits in case of residentially homeless people (effect 2 and 4). In all cases, the benefits of HP manifest themselves most forcefully in health care and to a lesser extent in the domain of criminal justice.

These HP benefits were compared with total costs of targeted HP efforts, required to realise these effects. These costs have been quantified mainly by using an available dataset, gathered by Cebeon (2009).² This is one of the most complete financial datasets and covers data (specified extracts from administrations) of centre-municipal expenses on homeless-related public services.

Comparing total benefits with total costs of HP shows that social investment in HP appears to generate clear positive net-results for all target-groups. Spending €1 on HP efforts helps to avoid costs of public services in other domains that range from about €2 (in the case of actually homeless people) to €3.5 (in the case of residentially homeless people).

Conclusion

The study successfully addressed the goals set by the Ministry of Public Health (see section 1): It generated a usable framework for public policy, it described the main effects of HP for three target-groups and it provided a first quantification of benefits (avoided costs of public services in other domains) at a meta-level. The main results are summarised in Table 5.

Table 5: Summary of main results

Target-group	Main effects of HP	Benefit-cost ratio
Potentially homeless people	Preventing eviction and a relapse into actual homelessness. Quick provision of supported housing ('housing first') whenever eviction does occur. Such prevention keeps a number of these people from turning to become a repeat offender.	2.2
Actually homeless people	Encouraging exit to self-sufficiency ('ordinary life'). Offering guidance to supported permanent housing ('housing first'). Offering guidance to institutionally supported/protected housing. This keeps a number of these people from turning to become a repeat offender.	2.0
Residentially homeless people	Preventing a fall/relapse into actual homelessness, with the side effect of keeping a smaller group from becoming a repeat offender. Encouraging moving on from protected to supported institutional housing, and from supported institutional housing to supported permanent housing.	3.5

² For correct comparisons, these data (fiscal year 2008) have been updated.

For all target groups, opportunities were distinguished for further optimisation of individual situations through specifically directed efforts by HP and partners in relevant policy chains (especially mental health care). These underpin the need and focus of the second stage of the G-4 plan: More (effective) prevention, housing first, and helping residential clients to move on.

Apart from the quantitative results, the study generated the following important findings:

- *Prevention is better and cheaper than cure*: although it is difficult to establish the precise benefits of prevention, quantitative results (combined with qualitative insights) can contribute to more balanced decision making with regard to HP. The study showed that HP avoid the use of expensive public services if they succeed in fulfilling their preventive function, especially among the potentially homeless and residentially homeless groups;
- *Sheltering homeless people is better and cheaper than leaving them on the streets*: by providing adequate shelter, guidance and support, HP help to avoid significant costs of services in other domains, especially health care and criminal justice. The study (quantitatively) showed that the efforts to seek proper shelter for actually homeless people and to guide them into an pathway out of homelessness, have offset costs elsewhere (over and above the costs of HP efforts);
- *Effective homelessness policies require efforts from all chain partners*: (potential) cost savings appeal to all actors in the affected domains and point to important benefits of joint and integral approaches to the target groups of HP. In this multidisciplinary dynamic, it is important to communicate clearly the key role and contribution of each of the actors involved. In addition, perverse incentives need to be avoided or addressed in a situation where the benefits do not accrue equally to all actors in the chain.

Discussion

Limitations of study

Although attractively broad in its scope (an entire policy field), this study had limitations as well. First of all, by focussing on *public* costs and benefits, it was not a full societal cost-benefit analysis. Not taken into account were costs of privately funded services for homeless people, nor private costs for clients or society (citizens and firms). Among others, such costs include informal (private) care for homeless people as well as private costs due to crimes or offences committed by homeless people.³

Further, the study did not aim to quantify all public benefits. The accent was on domains with substantial benefits. We noted that substantial differences in HP effects exist across different public domains. In health care and criminal justice, for example, benefits are substantial, as the use of high cost facilities can be avoided due to clear benefits of HP. In other domains (e.g. work and income), benefits are much more limited, because the contribution of HP to effects is more limited.⁴ On the basis of a first screening of available information, the domain of work and income was excluded from the analysis (but mentioned as per Table 4). Other reasons for the exclusion of services/domains concern relatively low costs (avoiding their use does not result in substantial benefits) as well as insufficient data. Examples are care by general practitioners, welfare services and some types of offences. Although the unexamined benefits of excluded services/domains can play a role with certain target-groups, in general, they are not expected to lead to fundamentally different outcomes of the cost-benefit analysis.

Third, due to limitations in the available data it was assumed that moving from one target-group to another does not change the cost-benefit structure of each group. However, in domains like criminal justice and work and income such an assumption may be too strong due to behavioural influences. For example, if only a few people live on the streets, efforts by the police and criminal justice system could be less than estimated. This in turn reduces the quantified benefits for people who are prevented from becoming actually homeless. Despite limitations, the model and its outcome have been broadly accepted as suitable and plausible, and supports efforts to improve HP in the Netherlands and cross-nationally.

³ Although (the prevention of) such private costs have not been quantified, their (quantitative and qualitative) significance is beyond any doubt. Informal care and support form an essential part of the available spectrum of assistance for homeless people. In addition, societal cost of transgressions by members of the target-groups (both damage and grief) can be substantial.

⁴ For example, often becoming potentially homeless after being actually homeless has no effect on employment status and hence does not avoid any unemployment support/benefit.

Lessons for policy:***Decentralisation as a promising approach to optimise benefits***

The findings of our study have already been used by policy-makers in several cities to prevent large cuts in HP budgets and to improve HP by shifting the focus to prevention and housing first. On a higher policy level, initiatives have been taken to improve the current cost-benefit imbalance for local government as well. At the moment, municipalities bear the main HP burden, while other actors (e.g. national government and health insurance companies) gain most of the HP benefits. This provides adverse incentives to municipalities to generate benefits by investing in (better) HP. Recently, the Dutch government has planned large-scale decentralisation of important parts of long-term health care (LTHC) and all youth care to municipalities.⁵ These decentralisations shift responsibilities for tasks that yield potential HP benefits to municipalities. This contributes to restoring the costs-benefit balance for HP and realigns policy incentives.

These plans build on quite successful experiences in social support. In 2007, a first part of LTHC (household service⁶) was decentralised to municipalities within a new legal framework: The Social Support Act (SSA). Given this new set of tasks, many larger municipalities developed new (comprehensive) practices. The most important are:

- An optimised access to services, through the creation of ‘one-stop shop’ for citizens who need support;
- A more integral screening of the real and most urgent needs of citizens and a stronger focus on their capabilities instead of disabilities;
- Improved efficiency, through use of markets (buying services through procurement), a streamlined back-office (contract-management, registration of service use, etc.) and increasing inter-municipal cooperation;
- More organisational coherency, through horizontally connected chains; municipalities have intensified cooperation with local partners (such as housing corporations, welfare organisations and health care providers). This has improved their service in a number of ways; a greater ability to customise support for clients (demand-orientation), a stronger focus on social networks and collective solutions, as well as being more closely attuned to the characteristics of (neighbourhoods in) the municipality.

⁵ Secondly, these reforms involve the formation of social teams, that are more or less responsible for the (entire) support of vulnerable families (including forms of child care) in a borough/suburb and hence form horizontally integrated services.

⁶ Help with instrumental activities of daily living (e.g. cleaning) as well as advise on keeping one's household.

Overall, these practices have proven to generate positive results. For example, in the first years since the introduction of SSA more citizens have received support while informal carers provided more help as well. The average costs per user have decreased, mainly by a shift in product-mix, client satisfaction is stable at relatively high average levels, and the new tasks have been performed at cost levels below budget (De Klerk *et al*, 2010; Van der Torre and Pommer, 2010).

Although the economic crisis has changed the policy context considerably, decentralisation still seems to be a promising approach to yield net-benefits of policies, both in the field of homelessness as well as in other social policy-domains. Its success largely depends on the creation of two conditions to facilitate improvements. First, policy goals and domain boundaries are defined broadly (using general laws). An important innovation of the SSA in this respect was the shift from individual rights to claim certain services to the requirement of municipalities to support citizens in strengthening self-sufficiency and societal participation. Municipalities have substantial freedom to make local choices with regard to services, policy⁷, organisation and cooperation with local (private) partners; this allows them to ensure that initiatives are coherent with the nature of local needs and to provide tailor-made support.

Secondly, municipalities receive an integral, sufficient and stable budget, which they can largely spend as they see fit. SSA budgets are distributed as a general grant that is allocated on the basis of global, cost-orientated objective indicators. This type of budget allocation allows for variations that arise from demographic and social-economic differences between municipalities and from changing circumstances over time. This allocation system is coupled with regular financial and outcome monitoring, which periodically brings the budget allocation in line with observed changes in policy and costs over time. In this process, special attention is focussed on mapping perverse incentives and modifying the system in order to adjust for them (Huigsloot and Boerboom, 2007).

Inspired by this success, municipalities have indicated willingness to receive larger parts of LTHC within their jurisdiction, to further increase synergies. They have found a willing ear in government. The costs of providing LTHC are ever increasing, partly as a result of the supply-oriented organisation of care and perverse financial incentives.⁸ All of these challenges can be addressed through decentralisation. Recently, government planned to decentralise almost all long-term home care to municipalities as well as parts of long term institutional care, starting from 2015.

⁷ For example setting minimum levels of care and benefits, as well as the conditions under which citizens are liable for them.

⁸ Incentives are focussed on maintaining (or expanding on) the status quo, with weak incentives to prevent the use of expensive (institutional) facilities.

Municipalities will receive the available budgets (based on current service use) with a substantial efficiency discount. This discount is derived from both municipal SSA-experiences as well as research that indicated room for increased efficiency in the current LTHC-system (e.g. Cebeon, 2010b, Ministry of Finance, 2010). As a result, the associated structural resources of municipalities for SSA-related tasks will more than double, to about €10 billion.

Lessons for research: framework for comparative (European) analyses

The framework developed for cost-benefit analysis makes it possible to assess the financial effects of policy in such an intricate public domain as preventing and tackling homelessness. Additional research can generate a more refined model. Such research can occur along multiple lines. A first line is by widening the scope of possible HP effects under examination and by specifying different aspects of the model. Relevant input can be gathered from (longitudinal) case studies as well as from client-data. Incidentally, the availability and specificity of client-data is currently increasing, as more (larger) Dutch municipalities have started gathering (detailed) information on the level of self-sufficiency of clients in various life domains. Such information can be used to show how HP efforts impact the lives of clients over time.

Two other lines that additional research can take, are (i) incorporating the specifics (e.g. target groups, types of public services, types of cost) of regional/local or other national contexts in more policy-oriented studies, and (ii) fine-tuning to particular target groups (e.g. youngsters or families with multiple problems) and applying the methodology to social investments in a broader range of policy areas (such as prevention of addiction and domestic violence). These lines can be explored, using the framework developed for cross-national comparisons as well. The need for such analyses has recently been stressed by the European Commission in its Social Investment Package. They could be devised by clearly defining target groups, types of services and cost categories. Then data can be gathered in different countries about the costs of a basic set of services, and used to build (stylized) national cases. In this way, the framework enables comparisons, which can stimulate discussion about how to improve social policies, by generating insights from good or best practices and providing references to guarantee certain (minimum/effective) policy-efforts. Exploring the cost-benefit framework along these lines can produce useful insights on how social policies can improve the lives of vulnerable citizens and provide budgetary savings at the same time.

Appendix: Mean Service Utilisation Costs per Person

Mean (annual) utilisation costs per person in the target groups for public services in different domains were derived from data about numbers of users, mean usage frequencies, volumes and durations of use. The resulting mean utilisation costs were calculated over a period of ten years (without discounting for future prices) and are reported (rounded off numbers) in Table 6 for each target group.

Table 6. Mean utilisation costs (€'s per person) for public services in different domains

Public service – Target group	Potentially homeless €	Actually homeless €	Residentially homeless in supported housing €	Residentially homeless in protected housing €	Repeat offender €
Housing					
Eviction	1 490	–	–	–	240
Rehousing	380	–	–	–	60
(Dis)Connecting electricity, gas, water	190	–	–	–	30
Forgone rents	160	–	–	–	30
Health care					
Institutional long term health care	–	–	–	–	18 930
Ambulant guidance (home care)	3 510	0	8 780	47 390	5 270
Medicines	7 750	1 860	9 300	9 300	5 330
Methadone treatment	730	1 090	1 450	1 450	1 070
(Poli)Clinical care	5 740	10 330	6 120	6 120	7 260
Emergency transport	120	990	250	250	510
Hospital emergency treatment	40	1 190	170	170	550
Hospital ambulant treatment	530	150	300	300	250
Clinical cure of (drug) addiction	1 320	10 930	1 580	1 980	5 170
Clinical cure of mental illness	1 320	20 370	1 320	1 660	8 850
Assertive community treatment	0	3 750	2 500	2 500	2 400
Flexible assertive community treatment	9 000	2 250	4 500	0	3 780
Missed premiums	1 260	3 190	1 890	630	2 100
Criminal justice					
Theft and financial crimes	2 770	8 320	4 160	2 080	6 850
Damage and public order	390	1 050	520	260	870
Offences under Opium Act	400	1 200	600	300	1 000
Institution for repeat offenders	–	–	–	–	30 340
Municipal special Investigation officers	580	1 550	770	390	1 280
Close following of criminals by police	1 390	4 180	1 390	1 390	3 230
Aftercare for ex-prisoners	170	670	240	90	370
Basic policing (public disturb.)	580	1 550	770	390	1 280

Explanation: – = not relevant for this target group. Main sources: **Housing**: Volkskredietbank Groningen 2007, Berenschot 2010, Cebeon 2010a, Maas and Planije 2010; **Health Care**: Mensink *et al*, 2008, Theunissen *et al*, 2008, Bos 2010, GGZ NHN 2009, Altena *et al*, 2010, Van Bergen *et al*, 2010, CVZ 2010, Cebeon 2010c, VWS 2010, NZa 2010/2011, Vektis 2010, Zorgverzekeraars Nederland 2010; **Criminal Justice**: Groot *et al*, 2007, Czyzewski and Van de Wetering 2009, De Heerand Kalidien 2009, Wartna *et al*, 2009, Tollenaar and Van der Laan 2010, Buster and De Rooij 2010, Weijters and More 2009.

Using these data, the costs saved per person were quantified for each effect per target-group. For example, effect 1 of potentially homeless people regards a desired movement from being actually homeless (which is prevented) to being potentially homeless (tenancy is sustained) (see Table 2). The costs avoided in this way were quantified by calculating the differential between the costs of a 'mean user' in both target-groups. For emergency transport costs this cost differential is about €870 (€990 minus €120). Quantification of the other effects and target-groups follows in the same manner. An exception is made for health care services with utilisation costs that are intentionally higher in the desired situation (given health problems of people). In these cases the cost savings were taken to be zero. Well-known examples are connected with suboptimal use of medicines, ambulant guidance, and hospital ambulant treatment by actually homeless people compared with other target-groups. When these people are guided into shelter/institutional housing, they may access health care services they were unable to (but nevertheless entitled to receive) during their homelessness.

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Homelessness Policy in the Netherlands: Nationwide Access to Shelter under Pressure from Local Connection Criteria?

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- › **Abstract_** *In many Dutch municipalities access to shelter is only given to a person when he or she has a 'local connection' to the geographical area: Homeless people who come from elsewhere are to be given shelter in the area from which they originate. Legally however, community shelter services funded by any municipality should be accessible to all those living in the Netherlands. Therefore, the question is to what extent shelter services are accessible nationwide and how often are homeless people not provided shelter because they do not have a local connection. Although this appears as an abstract policy issue, in practice this may have major consequences for a vulnerable group of people. In the present study, we collected data through surveys among municipalities and shelter organizations. In addition, interviews were conducted with representative organisations of homeless people. To test policy in practice, mystery guests (people with experience of homelessness) visited shelter facilities. It is concluded that under the current practice shelter is not accessible nationwide for all eligible homeless applicants.*
- › **Keywords_** *Homelessness, policy, emergency shelter, local connection, nationwide access of shelter*

Introduction

In the Netherlands, the Social Support Act (2007) provides the main legal framework for emergency shelter. The primary responsibility lies at central government level: National government monitors the support given to individuals and groups nationwide and makes sure that all individuals are entitled to adequate support. Article 20 of the Social Support Act states that the national government provides funds for municipalities to arrange emergency shelter. A total of 43 *central* municipalities receive funds from national government for the purpose of supporting homeless people and preventing homelessness under the provisions of the Social Support Act. The central municipalities coordinate policy and finances in the 368 *local* municipalities in their respective regions. The 43 central municipalities were appointed through an 'Order in Council' in connection with the Social Support Act. Based upon this mandate local municipalities are expected to develop a policy for arranging emergency shelter.

Before the introduction of the Social Support Act, emergency shelter was provided through the Welfare Act (1994). The leading principle of the Welfare Act was the so-called 'nationwide access' principle. According to this principle a homeless individual could request emergency shelter in any municipality, which had an emergency shelter. In the process of developing the Social Support Act, it was emphasised that the 'nationwide access' principle was to be maintained. In the years following the introduction of the Social Support Act, a number of municipalities introduced the requirement for an individual to have a local connection to the region before he or she was deemed entitled to emergency shelter. Local connection can be proven if a person can provide documentation that shows evidence of residency within the region over a period of two out of the previous three years.

Attempts were made between the 43 central municipalities to agree on a Code of Conduct concerning the so-called 'local connection criteria'. The Code of Conduct was intended to solve problems arising from this principle; that is that persons in need of shelter were refused access since they did not meet the local connection criterion. This Code of Conduct never materialized. Instead, the Association of Netherlands Municipalities created a '*Toolkit Nationwide Access and Local Connection*' (VNG, 2011) in which the principle of 'nationwide access' was elaborated.

The Ministry of Health, Welfare and Sport received information that access to emergency shelter was limited in a number of municipalities. In addition, the European Federation of National Organisations working with the Homeless (FEANTSA, 2012) asked the European Committee of Social Rights if current Dutch policy and practice on sheltering the homeless conflicts with the relevant provisions

of the Revised Social Charter¹. FEANTSA states that the criterion requiring local connection is problematic for (among others) groups such as homeless individuals without proof of registration in the municipal registry and former addicts who wish to escape their drug dealers and addicted friends. The Trimbos Institute² was commissioned by the Ministry of Health, Welfare and Sport to investigate the policy and practice of conditionality of access to (emergency) shelter.

This article starts with a short introduction, which describes the legislative and political context of the access to social relief. Second, methods are discussed and findings are presented based on five distinct stages in the process of access to shelter. Finally, the paper focuses on the translation of policy into practice.

The Local Connection in Brief

In the Netherlands, homelessness became a specific policy focus with the adoption of the Strategy Plan for Social Relief in 2006. The Strategy Plan was meant to improve the situation of homeless people in the four largest cities (G-4) in The Netherlands: Amsterdam, Rotterdam, The Hague and Utrecht. The principal objectives of the Strategy Plan are to provide each eligible homeless person with an income, suitable accommodation and effective support and care. Central to the plan is a person-oriented approach in which individualized care plans consist of personal aims concerning housing, (mental) health care, income and daily occupation activities (Tuyman *et al*, 2011).

In 2008, the Strategy Plan was adopted by 39 other central municipalities, which formulated an Urban or Regional Compass: Local variants to the Strategy Plan (Planije and Tuyman, 2011). As mentioned before, these 43 central municipalities receive funds from national government for the purpose of supporting homeless individuals and preventing homelessness according to the policy set out in the Social Support Act. From 2009 the allocation of funds has been based on objective

¹ The European Social Charter (revised) of 1996 guaranteed fundamental social and economic rights of all individuals in their daily lives. The rights guaranteed include the following: right to protection against poverty and social exclusion; right to housing; right to protection in cases of termination of employment; right to protection against sexual harassment in the workplace and other forms of harassment; rights of workers with family responsibilities to equal opportunities and equal treatment; rights of workers' representatives in undertakings.

² The Trimbos Institute seeks to enhance quality of life by engaging in the development and application of knowledge about mental health, addiction and associated physical illnesses. The activities of the Institute are intended to contribute to and facilitate changes in mental health and addiction care in order to elicit individual health gains within the Dutch population, promote more effective treatment methods and provide models for more efficient care.

criteria (e.g., the number of inhabitants and the number of persons belonging to a socially disadvantaged group). Many municipalities also devote a large part of their own budget to combating problems related to homelessness. As a result of the considerable influx of homeless persons experienced by some municipalities, several regional authorities for shelters felt the need to make access to community shelter services conditional on a local connection. They introduced a requirement of a (local) connection to the region meaning that a person is only entitled to emergency shelter when a local connection is apparent. The local connection criterion carries the potential risk of jeopardizing the 'nationwide access' principle of the emergency shelter, causing some groups of homeless individuals to be deprived from shelter opportunities.

The nationwide access principle is set out in the Social Support Act in which it is stated that community shelter services funded by municipalities are accessible to all those living in the Netherlands. To guarantee nationwide access the '*Toolkit Nationwide Access and Local Connection*' was developed. This Toolkit contains policy rules, which municipalities may use to determine which is the most appropriate city or municipality to provide a person with shelter. These rules are based on agreements made in 2010 by the 43 central municipalities. To ensure nationwide access, it was agreed that:

- Every person in the target group is entitled to apply for emergency shelter in each municipality.
- The municipality in which the person in need registers for shelter provides the necessary first shelter ('bed, bath and bread') and then decides which city or municipality is responsible for the person-oriented approach based on the chance of a successful care trajectory (i.e., mental health care, housing, income and daily occupation activities). The responsible municipality will take over care and will provide for shelter and the necessary care trajectory.

The Toolkit-rules are implemented by the municipalities on a voluntary basis. This has resulted in diversity in local legislation and practice. Some local governments have 'outsourced' the mandate to private parties (for example, shelter facilities or central admission facilities) who decide on who to provide with shelter. In these municipalities there is usually little regulation, except for a covenant with the shelter organization in some cases. Other cities, for example the so-called G-4 have come up with a common approach in their legislation and policies (Hermans, 2012).

Methodology

We collected data through surveys among central municipalities and shelter organizations. In addition, client representative organisations were consulted. Moreover, mystery guests (people who formerly experienced homelessness) visited shelter facilities to test policy in practice.

Surveys

In each of the 43 central municipalities, the official responsible for social relief was asked to fill out a written questionnaire on local connection and accessibility of shelter. The questionnaire included items on policy rules, practice of application and admission, transfer of clients and rights and obligations of clients. All but one municipality replied, resulting in a 98 percent response rate. To gain insight into the extent to which people are denied access to shelter on the grounds of local connection criteria, municipalities were asked to provide the researchers with their documentation regarding shelter applications. Twelve out of 43 municipalities provided information on the total number of applications for shelter, the number of people not admitted to shelter and the number of people not admitted to shelter because they lacked a local connection.

To gain insight into shelter practice, we approached the largest (night) shelter services in 39 municipalities. These night shelters are operated by non-governmental organizations, mainly funded by municipalities. In each of the shelter facilities, the unit manager was asked to fill out a written questionnaire. In a number of municipalities (including the G-4) homeless people who apply for shelter have to register in a central admission facility. These facilities were approached as well.

The total sample consisted of 49 organizations: 39 (night) shelters and 10 central admission facilities. Of the 49 organizations that were asked to fill out a web questionnaire (online survey), 44 responded (90 percent); 34 of the 39 (night) shelter services responded (87 percent), and all of the central admission facilities participated in the study. Questionnaire topics included items concerning application procedure; provision of information; assessing local connection; transfer of shelter applicants; and the presence of registrations. Some of the items in the web questionnaire corresponded to the survey administered to municipalities. This provided a perspective orientated on daily practice in shelter facilities, and a complementary 'double check' on the municipality perspective. In addition to the surveys, some municipalities and shelter facilities were contacted by phone for additional information.

Representative organizations of homeless people

To better understand the practice of application and admission in shelter facilities, telephone interviews were conducted with employees of eight representative organizations of homeless people and 'street advocates'³. The underlying idea was that these organizations would have an overall view of the accessibility of shelter in practice. Interviews were conducted with employees of eight organizations from eight municipalities. Interview topics were overall experiences with homeless people with accessibility of shelter; transfer of clients; provision of information and handling by staff; application of the local connection criteria; consequences of the requirement of meeting local connection criteria for specific groups; and suggestions for improvement. Interviewees were asked if they were aware of homeless people who experienced problems resulting from the local connection regulations and to provide the relevant case reports.

Testing policy in practice using a mystery guest protocol

To test the practice of application and admission to shelter facilities, we used a 'mystery guest' design. Nine individuals who had experienced or still experienced homelessness were recruited through client organizations. Contact was lost with three people, despite several attempts by phone, email and SMS. Eventually, six individuals participated in the present study as 'mystery guests'.

To test shelter admission practice, mystery guests presented themselves as being homeless and applied for shelter in central municipalities. During the application process the mystery guests kept to a script that contained a number of fixed elements, including:

- Municipality of origin different from municipality of application;
- Unable to provide for own needs because of serious mental health issues, including addiction, combined with problems in other areas (to meet the criterion of belonging to Public Mental Health Care target group);
- A specific reason for applying for shelter in the municipality concerned.

All mystery guests attended a training session led by a researcher, assisted by a unit manager of a night shelter facility and a client representative, before data collection. The training consisted mostly of practicing the script that which mystery guests were going to follow when applying for shelter. Each mystery guest was given the opportunity to practice the script by role-playing. All participants received

³ A street advocate is a confidential advisor and proponent for people who are homeless or at risk of becoming homeless.

feedback from the other trainees. In addition, other matters were discussed: The purpose of the study, a structured checklist form, cancellation letter, confirmation of participation form and financial rewards.

To avoid mystery guests being denied access to shelter on grounds other than the requirement of local connection, they were instructed to use the above-mentioned elements with each application. They recorded their experiences on a checklist. Applications were made locally at the shelter unless registration was only possible by phone. None of the mystery guests actually made use of a bed in the night shelter during the mystery guest study. When all requested information was collected they made themselves known as mystery guests operating on behalf of the Trimbos Institute. They were paid for each application made.

The mystery guests applied for shelter at least once in every central municipality, with the exception of three municipalities. In total 51 applications for night shelters and central admission facilities were made (23 by phone). This provided an impression of the application procedure in practice: The way in which shelter staff acted at first application, the admission policies used, handling by staff, the information provided and information available.

The next section of this article describes our findings based on the following topics: 1) municipal policies, 2) application and assessment, 3) access to shelter, 4) transfer of clients, 5) information provided at application. Each topic starts with the relevant text from the Toolkit. It is followed by the perspectives of the municipalities and shelter organizations. An impression of the implementation of the admission policy in practice is given by the experiences of the mystery guests.

Findings

Municipal policies

Regulations regarding local connection criteria as formulated in the Toolkit (VNG, 2011) are recommended to serve as a standard example for municipalities to adopt and implement. These rules are important for two reasons. First, laid down policies may prevent arbitrary outcomes of shelter access. Second, the clear setting of rules ensures the democratic process of participation by stakeholders, such as shelter services and client organizations. One year after publication of the Toolkit it was found that 26 out of 43 municipalities (62 percent) did not set rules regarding the eligibility criteria for shelter. Eleven out of 43 municipalities adopted the Toolkit model-policy rules, 9 municipalities made some adaptations. More than four out of 5 (83 percent) of all municipalities use the following definition of region: the central

municipality and surrounding municipalities. Some municipalities use a narrower definition (region = central municipality), others a somewhat broader definition (region = province).

Of the central municipalities, 70 percent translate policy into written agreements with shelter organizations, for example in relation to decisions to grant shelter. Remarkably, shelter organizations and municipalities interpret these agreements differently. When asked what these agreements imply, 67 percent of shelter organizations – compared to only 21 percent of the municipalities- took the view that they should deny access to shelter applicants from outside the region. However, 59 percent of the municipalities – compared to 33 percent of the shelter organizations – believe that shelter organizations should determine which region is the most suitable to provide a person shelter. Thus, municipalities and shelter organizations seem to disagree regarding the agreements made on accessibility of shelter at an administrative level. Based on a number of telephone interviews with staff of central admission facilities, the discrepancy between municipalities and shelter organizations at operational level seems even larger. Contrary to municipal policy in their region, these employees stated that people from outside the region could not apply for shelter. According to the mystery guests, it regularly seemed as if staff of shelter organizations were not at all or were only partially informed of the regulations on local connection. The above underlines the importance of the question regarding who determines access to shelter at the operational level. According to half (52 percent) of the municipalities and 44 percent of shelter organizations, access is determined by the shelter organization. Six out of ten municipalities (59 percent) agreed with the statement that in practice the decision whether or not someone should be admitted to shelter is taken on the spot by staff of the shelter organization. A quarter (24 percent) of the municipalities and 42 percent of shelter organizations believe that municipalities and shelter organizations jointly determine access. Some municipalities indicate that they have delegated the authorization of admissions to the management of the shelter facility: In exceptional cases, the shelter facility consults the municipality. Final decisions lie at municipal level.

Two-thirds of shelter facilities (69 percent) agree with the statement that the requirement of local connection criteria is necessary in order to prevent too many people applying for shelter. The majority (67 percent) also agrees with the statement that people with a local connection should be given priority to access shelter above people from elsewhere. Thus it seems that within the shelter sector there is support for applying rules concerning local connection criteria. This may be related to the pressure experienced in the shelter sector: Due to a lack of shelter capacity not all applicants can be admitted. Therefore, choices have to be made and staff would rather select people with a local connection than people from elsewhere.

Application and assessment

The Toolkit (VNG, 2011) contains model-policy rules for the application and assessment process. The following criteria are applicable to determine which municipality or region is the most appropriate to provide a person shelter:

- a) The city or municipality with the greatest chance of implementing a successful exit from homelessness. An assessment is made based on the following facts and circumstances:
 - Whether the person has lived for at least two of the last three years in a particular municipality. Local connection is proven when a person can provide documentation that shows evidence of residency within the region over a period of two out of three years (for example, registration in the Municipal Personal Records Database;
 - Whether the person has a 'positive' social network in this locality;
 - Whether the person is known by local care agencies or the police;
 - The person's place of birth;
 - Reasons for removing the person from his former (negative) social network
- b) The preference of the person for shelter in a particular city or municipality; legitimate reasons to meet the wishes of the client.

Shelter organizations were asked by what means people can apply for shelter. In most organizations, one can apply for shelter by phone (86 percent) or at the shelter location (82 percent). Nineteen shelter organizations indicated that applications may also be done through the central admission facility. According to 18 organizations (41 percent), clients can also register by internet/ email. Finally, applications can be done by third parties, such as referring agencies (for example, mental health care facilities or addiction care services).

Various eligibility criteria are used for admission to shelter facilities. As shown in Table 1, the most frequently mentioned (80 percent or more) criteria are: Being homeless or roofless; minimum age of 18 years; abide by house rules; and local connection. The criterion of belonging to the Public Mental Health Care⁴ target group is used by half of the shelter organizations.

⁴ Public Mental Health Care (PMHC) deals with the care and policy for people who have multiple problems in various areas of their life, and often psychiatric or addiction problems. They can no longer provide for their own means of existence or will end up in such a situation in the absence of the appropriate support. PMHC encompasses medical care, practical support, rehabilitation and shelter as well as the policy developed by the state and municipalities for these vulnerable citizens.

**Table 1: Admission criteria most frequently used
(percent of shelter facilities that use the criterion)**

Criterion	percent
Being homeless or roofless	93
Minimum age of 18 years	82
Abide by house rules	82
Demonstrable local connection	80
Possession of a valid ID	66
Belonging to Public Mental Health Care target group and not being able to sufficiently provide for own needs without shelter or care	52
Citizen Service Number*	46

*A unique personal number allocated to everyone registered in the Municipal Personal Records Database

Shelter organizations use admission criteria that are in line with the policy of the Social Support Act. The Act leaves room for interpretation, for example, when it comes to the phrase *'being inadequately self-sufficient to participate in society'*. Regarding this criterion, some municipalities and shelter organizations argue that an individual should belong to the Public Mental Health Care target group. Based on the results of the municipal survey, there is no nationwide accessibility of (emergency) shelter: Of the 43 central municipalities, 17 percent claim that not all homeless individuals can apply for shelter and 10 percent claim that applications from people from outside the region will not be processed. This is consistent with the experiences of the mystery guests for whom in a number of cases the application for shelter was not successful: As soon as it became apparent to the staff that there was no local connection, they made clear that applying for shelter was not an option. This is in contrast to the model-policy rule from the Toolkit, which states that the central municipality must ensure that every homeless individual can apply for shelter.

According to the Toolkit, it should be determined which locality is the most suitable for providing shelter after application. Most municipalities (81 percent) claim that this is done for every person who applies for shelter. However, the determination of the most appropriate locality seems complicated and only half of the shelter organizations (48 percent) claim that it is possible to do this in a correct manner. The guiding principle in determining the most suitable locality for shelter should be the city or municipality with the greatest chance of ensuring successful exists from homelessness. This means that a number of facts and circumstances have to be considered. Both municipality and shelter organizations were asked which criteria are used to determine the most appropriate locality. We also asked about the weighting of these criteria (see Table 2).

Table 2: Criteria used to determine which locality is the most promising for providing shelter*

	Municipalities (N=39-41)		Shelter organizations (N=38-43)	
	<i>Decisive</i>	<i>Standard</i>	<i>Decisive</i>	<i>Standard</i>
Main residence in last three years	49	44	42	37
After care as former detainee	10	56	10	64
Presence of a 'positive' social network in this locality	7	73	10	41
Place of birth	8	40	8	33
Known by local care or shelter facilities	7	64	5	47
Reasons for pulling the person away from his former (negative) social network	8	60	2	36
Chance of completing trajectory successful in region	7	62	2	44
Known by the police	-	30	5	16
Preference of the person for shelter in a particular city or municipality	-	30	2	23

* Possible answers were: *decisive* (necessary condition or very weighty argument); *standard* (customary procedure); *if objection is made* (not customary but it weighs in appeal procedures); *no argument*; *unknown/inapplicable*.

It is striking that for both municipalities (49 percent) and shelter organizations (42 percent) the criterion 'Main residence in last three years' is most commonly used as decisive. Furthermore, the criteria 'Chance of completing trajectory successful in region' and 'Preference of the person' is hardly ever used as decisive arguments. Compared to shelter organizations, municipalities apply more standard criteria in determining the most promising locality for shelter as is shown in Table 2. Possibly, this is where the distinction between policy and practice reveals itself. In other words, according to the agreements made, these criteria should be taken into account but in practice this is not always the case. Another explanation might be that shelter organizations do not abide by the agreements made. A number of facts to determine which locality is the most appropriate for providing shelter (such as place of birth, registration in the Municipal Personal Records Database, registration with care facilities) can be verified relatively easily. It is more difficult to determine the presence of a person's social network or to find out what are reasonable grounds for pulling a person away from his former (negative) social network. This might explain why these criteria are rarely used.

Representatives of homeless individuals are under the impression that there is some weariness in applying the regulations for access and local connection; because employees of shelter facilities are not always informed accurately regarding the admission policy of the shelter organization, they tend to resort to tangible requirements for admission such as a registration in the Municipal Personal Records Database.

In practice, the questions asked by staff upon application for shelter are indicative of the extent to which it is determined which locality is the most suitable for providing shelter. In almost all applications (96 percent) by mystery guests, some socio-demographic characteristics were sought. Shelter organizations equally inquired about applicants' identities, local connections and need for care. The need for care is more fully examined upon application at central admission facilities than at (night) shelter organizations. Night shelter organizations are often set up along the lines of an easily accessible facility that provides basic needs: an extensive intake process and examination of the need for care does not fit that model. However, it should be ensured that in all applications for (night) shelter it is carefully determined which locality is the most appropriate for shelter. According to the mystery guests not all their applications were registered.

Access to shelter

Municipalities were asked about the availability of information regarding the number of people not admitted to shelter. 12 of the 43 municipalities maintained a register that recorded the reasons for related to reasons for not providing shelter. Together these 12 municipalities provide for shelter in an area with 4.6 million inhabitants. Based on the registered data of these municipalities, the following can be outlined: 3 applications per 1 000 inhabitants are processed on average each year; on average half (52 percent) of all applicants were admitted for shelter; in three out of ten rejected applications it appeared that the local connection criterion had been of importance. However, these statistics are not complete and are only loosely comparable: In some municipalities applications for shelter are registered at all times, while in other municipalities applications for shelter are only registered in certain cases; in some municipalities all applications run through a central admission facility, while in other municipalities only a few shelter organizations have registrations available. To summarize, the available figures regarding influx and numbers of applications rejected are insufficient to draw firm conclusions at present.

Whether a homeless individual gets admitted to shelter is determined after the process of application and assessment. The Toolkit (VNG, 2011) states that as long as the applicant is awaiting a final decision, the municipality must, if necessary and possible, provide temporary accommodation and support. In theory, most municipalities follow this policy. Most municipalities (84 percent) and almost two-thirds of the shelter organizations (62 percent) claim that they provide (temporarily) shelter for applicants who do not have a local connection. However, this does not match the experiences of our mystery guests: Out of a total of 51 applications, access to shelter and care was only given 4 times (8 percent). In 10 out of 51 cases the mystery guests were offered temporary shelter. Still, temporary shelter was usually not offered pending the decision concerning local connection; mystery guests were

often advised to leave the next day in order to apply for shelter in their hometown. No admission to shelter resulted from the remaining 37 applications (73 percent). In 47 of the 51 applications for shelter made by mystery guests, access was not given or was only temporary: in 36 of these cases (77 percent), not having a local connection was one of the reasons, in 27 of these cases (57 percent) not having a local connection was the *only* reason.

According to the Toolkit, it would be appropriate to provide temporary shelter for applicants who are awaiting admission/ the decision on local connection. Two thirds (62 percent) of the municipalities and 70 percent of the shelter organizations claimed to do so. However, temporary shelter for the mystery guests was effectively offered in only 8 out of the 27 relevant cases (30 percent). Providing temporary shelter is an important first step to implement the so-called 'warm transfer' of clients. By this term we mean the opposite of a 'cold transfer', which is characterized by refusals or referrals without any support. Thus, a 'warm transfer' is meant to create conditions to facilitate a smooth transfer; time for further inquiries and time to contact another shelter organization to form transfer agreements. The next section focuses on this so-called warm transfer of clients.

Transfer of clients

The Toolkit includes the following model-rules concerning the transfer of clients from one shelter facility to another. If it turns out that shelter is best provided in another locality, the municipality or shelter organization commissioned by the municipality, contacts the other municipality to organize a (warm) transfer of the client. While the client is awaiting transfer, the municipality may provide temporary shelter and support if necessary. Arrangements are to be made concerning the transfer of a client, such as the date of transfer; the accommodating organization; the mode of transport and any travel assistance; and the transfer of personalized data. If the client is not admitted to shelter in another locality, he should be provided shelter (if capacity is available) in the municipality of admission ('guarantee scheme').

Based on the surveys it remains unclear how often transfers of clients occur. Around 40 – 50 percent of the municipalities and shelter organizations claim to 'always or 'often' make agreements regarding the transfer of clients. Around 10 percent of the municipalities and shelter organizations state that they never make such arrangements. Thus, warm transfer does not appear to be customary. This finding has been confirmed by the experiences of the mystery guests: In 47 of the 51 applications made by mystery guests, access to shelter was not given or only temporary shelter was provided. In only 7 of these 47 applications (15 percent) another shelter organization was contacted for the purposes of arranging a transfer. Contrary to the mode of transfer as described in the Toolkit, mystery guests were often provided with addresses of other shelter organizations and were urged to seek shelter over there.

On the other hand, in 10 cases the mystery guests were offered temporary shelter, which is an important first step in the implementation of 'warm transfer'. In 65 percent of the applications, mystery guests were referred to another municipality or another institution without any support: this usually involved referral back to their own region, to the police, to social welfare, or to addiction centres. Mystery guests were sometimes referred to another nearby municipality despite the fact that the mystery guest had no local connection with that municipality either.

According to municipalities and shelter facilities, the following factors complicate the transfer of clients:

- Lack of (contact) information: Not all municipalities have up to date lists of contacts that can be reached in case clients need to be transferred. Moreover, mystery guests indicated that in some cases employees of shelter organizations lack the correct information for referring a client.
- Lack of capacity: It is difficult to get a homeless individual placed in a municipality in which the shelter is already fully populated. The experiences of the mystery guests demonstrate that in 30 percent of the rejected applications, a lack of capacity was one of the reasons for not providing shelter.
- Lack of a consistent policy: Differences exist between municipalities in how the criterion of local connection is applied. This hampers a smooth transfer because discussions may arise about how to proceed and about which party will bear the costs. As a result, it might be unappealing for municipalities to provide shelter for homeless people who do not have a local connection.
- 'Difficult-to-place' clients: There are indications that shelter organizations attempt to transfer 'unruly' clients to other institutions. 'Unruly' clients are people who do not abide by house rules and cause a lot of nuisance. They are not welcomed everywhere. Not having a local connection is being used as a ground for not providing shelter to this group of clients. These people often need specialized care, such as daily supervision in a low stimulus environment aimed at people with multiple problems and mild intellectual disabilities.

Provision of information

According to the Toolkit, a confidential advisor may assist clients. It is also mentioned that the municipality is responsible for the provision of proper and sufficient information on the rights and obligations, both in oral and written form. Based on the municipal survey, it is apparent that clients only rarely seek assistance during an inquiry or objection procedure concerning local connection. Almost all municipalities (93 percent) believe that it is the responsibility of shelter organizations to inform people about their rights and obligations. This finding is confirmed by employees from shelter organizations. According to 35 organizations (81 percent), clients are always informed verbally of their rights and obligations. Six shelter organizations only provide information verbally when requested or in special situations (e.g., when there is no local connection or when an applicant is underage). Clients are also informed of their rights and obligations in writing. More than half (57 percent) of the shelter organizations indicated that they actively provide clients with written information, for example by providing leaflets. A further eighteen shelter facilities (41 percent) stated that written information is available (for example in a leaflet stand at the registration desk). Mystery guests were mostly informed verbally, in their experience written information seemed relatively unavailable. The nature of the written materials differs, ranging from a copy of the house rules to comprehensive information about the appeal procedure and privacy policy.

According to the Toolkit, in all cases in which it is decided whether or not a person should be granted access to shelter, municipalities are required to issue an administrative decision. The decision should be based on sound reasons (Article 3: 46 General Administrative Law Act) and refer to the policy rules applied. Applicants for shelter should be made aware of the possibility of filing a notice of objection. Municipalities and shelter organizations were asked whether clients are given written evidence (copy or administrative decision) of the admission decision (approval or rejection). Written evidence is not often provided. According to ten municipalities (24 percent) and nine shelter organizations (21 percent) clients are always given written evidence when shelter is not provided. Written evidence of the admission decision was rarely given to the mystery guests: Evidence was provided in only 2 of the 28 applications at the desk.

Less than half (48 percent) of the municipalities had established an appeals procedure for clients who disagree with the decision not to grant them access to shelter. In such municipalities clients can file a notice of objection to a specially appointed committee (at the municipality or shelter organization).

Conclusions

In conclusion, there is much support amongst municipalities and shelter organizations for a local connection requirement. Several municipalities and shelter organization make serious efforts to guarantee the nationwide accessibility of shelter by complying with the Toolkit. However, there is still work to be done. Four steps have been observed in the translation of policy concerning the nationwide accessibility of (emergency) shelter in The Netherlands into practice. First, municipalities made agreements on nationwide accessibility in consultation with the Association of Netherlands Municipalities, as evidenced in the model-policy rules in the Toolkit. Second, translation of the model-policy rules for local governance (central municipalities) took place. Third, local policies were generated in the form of procedures and processes. The fourth and final step was to translate the agreements made into practice: The manner in which executive staff handles applications for shelter. The net result of these four steps is that currently in practice the nationwide accessibility of shelter is not guaranteed for all eligible homeless applicants. The following, partly interrelated, reasons for the observed discrepancy between theory and practice seem apparent:

Limited interpretation and insufficient implementation of the Toolkit

Municipalities tend to opt for 'hard' unambiguous criteria that are easy to check administratively. This explains why municipalities prefer to investigate whether a person is registered in the Municipal Personal Records Database than determine which locality promises the greatest chance of a successful care trajectory. This undesirable outcome means that homeless individuals who have never resided in any city for longer than two years or who have lived abroad in the previous three years, are not admitted for shelter. Whenever national or local authorities plan to make guidelines for local connection, the concept of local connection may cause conflicts and misinterpretations, which has to be taken into account.

Many municipalities have not yet established policy rules regarding the eligibility criteria for shelter. As this may lead to arbitrariness and impede access to social rights, this is an undesirable situation. It is recommended that every central municipality establish policies concerning local connection and accessibility to shelter facilities. Establishing rules creates clarity for executive shelter organizations and shelter applicants regarding what to expect and respective rights and obligations. By monitoring the extent to which municipalities have adopted policy rules it is possible to identify trends as well as to determine the relationship between policy and practice.

Determining the most appropriate locality for shelter remains complex: Only half of the shelter organizations report that this is possible to do in a correct manner. Various reasons are mentioned: Insufficient capacity for conducting a comprehensive intake assessment; no clear and simple criterion to determine which municipality promises the greatest chance of a successful trajectory out of homelessness; the easily accessible character of (night) shelter organizations does not seem to be in line with a comprehensive intake process at admission for shelter. In addition, municipalities believe a tangible local connection is important. When a homeless individual is not able to show tangible evidence of contact with care or shelter facilities or when a homeless person is not registered in the Municipal Personal Records Database, the burden of proof often lies with the homeless individual himself. For example, applicants may be required to provide bank statements in order to prove their whereabouts in the previous few years. Homeless people cannot always provide the necessary documents to prove their local connection. It should be recommended that (night) shelter facilities provide temporary shelter for all eligible clients. A back office, for instance a central admission facility, would then make a decision regarding the most suitable locality afterwards. The severity of one's situation should be the principal criterion in municipalities where too many people apply for shelter, not a local connection.

Differences between policy and practice

Shelter organizations often seem to have a different perception of the agreements than municipalities. Staff at registration desks of shelter facilities regularly acted contrary to the facility's admission policies: some mystery guests found that they could not apply for shelter or that no assessment was made. Possibly, staff members are not always knowledgeable regarding policies or have a general sense but not enough tools to bring policy into practice. For instance, if employees refuse to grant someone access to shelter due to the absence of a local connection, they do not perceive this as a decision within the meaning of the General Administrative Law Act⁵. Employees are aware of the unpleasant situation of the relevant applicant, but in their view the applicant was just in the wrong place. Therefore, training and regular instruction of executive staff is of importance. The development of an assessment tool (for example a flowchart or checklist) may support staff members of shelter organizations in the careful application of the admission policy.

⁵ The General Administrative Law Act contains rules for orders made by administrative authorities and that creates the right of appeal to an administrative court. This Act regulates the process of administrative decision-making in a general sense and provides a general framework for legal protection against the orders issued.

Demand for shelter exceeds supply

It has been shown that there is a shortage of capacity in homeless shelters, combined with a growing inflow and a faltering outflow in many municipalities (Tuynman and Planije, 2013). Choices have to be made in the light of this shortage. Municipalities pay for the costs of services for homeless people. Therefore, some local municipal councils choose to give priority to their 'own' homeless citizens. At the executive level, staff regularly observe how people are queuing up to secure temporary accommodation from night shelter organizations. As a consequence, employees feel compelled to refuse access to people who do not have a local connection without conducting an intake assessment or arranging for transfer to another shelter. However this shortage should also give rise to a stronger (policy) focus on prevention, improving inflow and outflow, agreements with other municipalities on transfer of clients and – if necessary – expansion of shelter services.

Improper use of local connection criterion

In certain cases, the local connection criterion seems to be used improperly as a reason for denying people access to shelter. There is confusion about the concept of eligibility in some cases. For some municipalities eligibility means 'eligible and having a local connection', meaning that people with no local connection are not eligible. However, local connection and eligibility are two different matters. Under Article 1a and Article 8 of the Social Support Act, people may be entitled to social support. Key aspects of these articles are a legal residence status, not being excluded from social support and a need for care because one cannot participate in society. Homeless people who do not have a local connection can therefore indeed be eligible. The local connection criterion is sometimes used to deny a person access to shelter because of the costs of services for homeless people. Some of these costs are related to the provision of a benefit under the Work and Welfare Act (WWA).

Disagreement about which municipality will bear the cost of the benefit is mentioned several times as a limiting factor for transfer of clients. Finally it is mentioned that 'unruly' clients who do not abide by house rules and cause a lot of nuisance are not welcomed everywhere. For this group of people, not having a local connection is being used as grounds for not providing shelter. This issue has been known for a long time and potential solutions are not easy to achieve. Instead of denying access, shelter organizations should be able to quickly refer these clients to an appropriate care facility. It may be helpful to revise the current assessment and referral under the Dutch General Exceptional Medical Expenses Act and Health Insurance Act. It should also be considered whether the capacity of forensic or judicial care facilities is sufficient.

Increase of feedback mechanisms

The staff of shelter organizations have a great deal of discretionary power within the current system for the implementation of nationwide accessibility and local connection. There is little verification and countervailing power. Therefore, a vulnerable, often unassertive group is at risk of being subject to arbitrary outcomes. This was indeed demonstrated in the present study: Mystery guests having comparable profiles and demand for care were treated in different ways within the same shelter organization, depending on the employee present. There are various ways to organize the assessment and to incorporate controls on the exercise of power, both in the design, implementation and accountability of policy.

Regarding policy design, municipalities should at least establish policy rules. Representatives of homeless people could be asked for submissions regarding the agreements made on accessibility of shelter and local connection. They may also be involved in reviewing policy implementation. It is also suggested that the services of a confidential advisor are offered in respect of each application by a homeless individual. Another suggestion is to devote more attention to providing shelter applicants with information, for example by providing contact details of a street lawyer when an applicant disagrees with the decision on admission. Written evidence of the admission decision (approval or rejection) is rarely provided. The course of the application procedure is often informal: In various applications for shelter by mystery guests they were briefly questioned and then referred to the municipality of origin without further support or documentary evidence. It seems that municipalities and shelter organizations are rather hesitant to provide written evidence of their decisions in some cases. This might happen in order to prevent clients from appealing against the decision, or out of concern for excessive administrative burden. For some municipalities it is common practice to provide written evidence (copy or administrative decision). Their experiences might help to give an impression of the corresponding administrative burden.

Only half of the municipalities provide an appeal procedure for clients. It is important for municipalities to formalize appeal procedures and to set this out clearly in agreements with (staff of) shelter organizations. Homeless people should be made aware of the possibility to appeal. Many municipalities were found to have little knowledge of matters such as the transfer of clients and the availability of information for clients. It is recommended that municipalities should be better informed since the support of this vulnerable group of homeless individuals is their responsibility. Registration of the number of people (not) admitted to shelter may provide an indication of the need for measures to be put in place to constrain the power of local actors. Registering and publishing these figures may help horizontal accountability. It is worth considering vertical accountability as well: The national government has responsibility for coordinating nationwide accessibility of shelter in decentralized policies.

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“Neo-homelessness” and the Greek Crisis

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› **Abstract** *This policy review focuses on the impact of the financial crisis and austerity measures on housing exclusion and homelessness in Greece. Despite homeless persons having been recently recognized in legislation as a specific vulnerable social group, the Greek state has not put in place any supportive measures for homeless persons and also has not developed a prevention policy to safeguard its citizens who struggle with the impact of the crisis. A “new generation” of homeless has appeared in Greece; the profile of this “new generation” of homeless is different to that of the “traditional” homeless of the country. The general impact of the crisis in Greece, especially on the most vulnerable groups, cannot yet be measured, but it is clear that new initiatives are required in order to promote the development of social solidarity in Greece.*

› **Keywords** *Austerity, homelessness, neo-homeless*

Introduction: The General Greek Policy Framework

The Greek Constitution provides clauses guaranteeing the right to housing. For example Article 21, paragraph 4 stipulates: “The acquisition of dwelling for those that deprive it or those inadequately sheltered is subject to special care by the State”. Despite the constitutional recognition of a right to housing, efforts to tackle homelessness in Greece have only been initiated relatively recently. This lack of housing results also to the exclusion of other fundamental rights, such as employment (Greek Constitution, article 22 par.1) and education (article 16, par.2). The introduction of social rights in the Greek Constitution does not establish an enforceable juridical claim. Usually, legislation is needed to activate, specify and interpret

the normative content of the constitutional provisions that establish social rights. The enforcement of social rights depends upon the provision by the state of goods or services, or the provision of the cash equivalent of goods and services, and involves the redistribution of resources and income. In this sense, the implementation of a constitutionally guaranteed social right is contingent on the availability of funds to those exercising state power. Consequently, people who lack housing or live in inadequate, inappropriate accommodation cannot demand that the State addresses their housing needs (Papaliou, 2010).

In Greece public policies provisions for the social inclusion of homeless persons are residual. There is no provision for specific income support programs for homeless people or specific measures with regard to the promotion of their employment. The situation is further complicated by the different ministries involved in multiple aspects of the housing issue: Thus responsibility for housing matters lies with the Ministry of Environment; responsibility for social policy lies with the Ministry of Health; the Ministry of Development is responsible for housing market regulation issues; and the Ministry of Interior and the Ministry of Citizen's Protection (formerly Public Order) share responsibility for migration. Furthermore, there is no social housing stock in the country and the Workers' Housing Association (OEK), the only organization for social housing, which provided houses to its members (workers paying contribution to the organization through their salaries) was abolished last year.

The "definition of homelessness" was set out recently in Law 4052 published on February 28, 2012. In article 29 of the abovementioned Law, there are three provisions, which state:

1st. "The homeless are recognized as a vulnerable social group, which is provided for by social protection. The homeless are defined as all persons legally residing in the country, that have no access, or have unsafe access to sufficient privately owned, rented or bestowed housing that meets the required specification and has basic water services and electricity.

2nd. The homeless include especially those who live on the street, in hostels, are hosted, out of necessity, temporarily in institutions or other closed structures as well as those living in inappropriate accommodation.

3rd. By Decisions of The Minister of Health and Social Solidarity and the respective competent Minister published in the Gazette, are regulated the specific issues for implementation of the present, especially the content, scope and timing for providing social protection, as well as the procedure and the implementers of the homeless' registration."

As it is clearly evident, while the legislation did accede to long-standing demands by providing a legislative definition of homelessness, and the acknowledgement that homeless persons are a specific social vulnerable group, the clauses provided are limited and exclude non-legal residents of the country. Furthermore, due to a lack of specific policy initiatives the law has until now not been called into play.

“Traditional” Homelessness

At the beginning of the 90’s, homelessness in Greece was considered “imported”. This erroneous impression was due to the fact that an increase in the housing problems of Greek citizens coincided with an increase in the number of immigrants and asylum seekers. Naturally, soon enough it became apparent that immigrants and natives alike were faced with housing problems. The Greek State was not prepared and ill-equipped to develop tools for the prevention and management of social problems that stemmed from changes in the last decades in the economic and social structure and in the fabric of family life due to a reduction in employment in the agricultural sector, the rapid urbanization of the population, the entrance of women to the labour market and other shifts in the structure of the labour market.

More specifically, as Greek society evolved the traditional structure of the family changed. Up until now the family in Greece has operated as a redistributive mechanism, i.e. it collects resources for the support of its members in need and delivers social services, for example the care needs of children and old people are met by non-salaried work of women (Bilanakis, 2007). However, the Mediterranean family model is being westernized very rapidly and solidarity among the family members can no longer be relied upon. As a result many persons without family support can find themselves in a situation of poverty and social exclusion (National Centre of Social Research, 2002).

The available data regarding the number and characteristics of homeless people in Greece derive from sketchy estimations of both the public and private organizations which target specific vulnerable groups such as drug users and abused women; no data is available for example on immigrants or people released from prisons. The first systematic attempt to register the homeless population, was started by the NGO “Klimaka” in 2006 in Athens, Thesssaloniki and Larissa (Vlantonis *et al*, 2006). The information collected revealed that one third (33 percent) of the homeless population had received the obligatory education, almost half (46.5 percent) of the respondents had been homeless for more than 3 years while the rate of delinquency within the homeless population (25 percent) was greater than that in the general population. The lack of recognition of the population as well as

the lack of any effort to collect official data on the issue has resulted in the total absence of support measures and public structures that could stem the rise of homelessness in the country.

Crisis and the “Neo-Homeless”

The term “neo-homeless” was introduced by the NGO Klimaka, in order to describe a diversified homeless population, which emerged not long after the outbreak of the fiscal crisis in Greece. The homeless population in Greece can be categorized into three main categories. The first consists of people in homelessness due to a combination of the following factors; unemployment and low income; mental health problems, mostly with dual diagnosis (gambling, drug abuse, alcoholic abuse); and the absence of a supportive network. Persons who fit into this category are mainly Greeks and immigrants suffering from mental health disorders and commonly are long-term homeless. The second category is the new homeless generation. This population consists of homeless people who had until recent years a satisfactory standard of living and have a higher educational level. People in this category have found themselves homeless due to financial difficulties and unemployment. Immigrants in this category are persons with a good level of societal integration. The third category includes immigrants, asylum seekers and refugees in a stage of transition; such persons face intense housing problems (complete rooflessness) for a short time but they mostly live for a long time in inadequate housing and extreme overcrowding (Alamanou *et al*, 2011).

Research on homelessness in the financial crisis (Theodorikakou *et al*, 2012) indicates that 1 out of 5 “neo-homeless” persons has high/higher educational level, while their former occupation was commonly in the technical, construction, or tourism and related sectors, or they were self-employed; economic sectors that seem to have been adversely affected by the crisis. Among the main findings of the survey are also the following:

- Over 6 in every 10 person surveyed (64.8 percent) have been homeless for less than two years, while more than half “reside” in the historic centre of Athens.
- A similar proportion (63.8 percent) of the respondents had been sleeping rough during the last year
- One in ten (10.5 percent) respondents said they sought refuge in a car



- One in seven (14.3 percent) respondents said they have gone at least once to a hospital to spend the night.
- For more than half (52.4 percent) ensuring food is not a daily problem. Just less than half (47.1 percent) indicated that clothing is not a problem but for over 4 in 10 (41 percent) respondents indicated that finding a place to bathe is a problem.
- Half of them live with zero euro or up to 20 euro per month
- Almost 6 out of every 10 (58.1 percent) are not covered by any sort of health insurance
- Among their most important needs they prioritize housing (85.6 percent), health care (83.1 percent), work (76.5 percent) and personal care (75 percent)
- Three in ten (29.8 percent) respondents believe that they became homeless due to financial problems; while one in six (17.3 percent) attribute their homelessness to unemployment
- When asked who is responsible for the crisis in Greece almost half (47.6 percent) answered the politicians and one in four (25.7 percent) answered all Greeks

Compared to the “traditional” homeless population, the “neo-homeless” group does not have severe mental health disorders, or problems of delinquency, and they appear to have a greater potential for rehabilitation and social reintegration than the ‘traditional’ homeless. However, the loss of residence is a particular stressor since the “neo-homeless” had until recently an adequate standard of living and most of them never expected that they would face such extreme survival problems. This is a huge change in their lives, which causes shock, especially in the beginning, and triggers strong expressions of anxiety, sadness, anger, fear, anxiety, etc. Their present situation and their inability to adequately support their families, negatively affects their self-image and their role not only in the immediate family context but also in broader social relations.

Conclusion: A Societal Response to the Impact of the Socioeconomic Crisis

The low quality of the built urban environment, namely the absence of additional social housing sites and servers provided at public expense, and the poor quality of residential extensions, concerns the majority of the Greek population, especially the inhabitants of Attica. Four issues need to be addressed to prevent housing exclusion:

1. The immediate problem of homelessness
2. The problem of tenants with low and/or precarious income
3. The problem of the property costs for both owned and rented properties
4. The lack of public and social infrastructure, which complements housing and the degradation of the urban environment (Portaliou, 2006).

None of these four issues have been addressed by the State while the homelessness situation has worsened due to the austerity measures imposed by the government. The inability of the social system to deal with the problems caused by the economic downturn and the weakness of the market coupled with the rising costs of the welfare state and reductions in benefits has not only failed to resolve the problems, but rather intensified them.

A decade before the global and European crisis, several special analysts, like David Gordon and Peter Townsend, pointed out that in Europe in the last two decades of the 20th century: “the speed of social polarization seems to have been faster in the last two decades of the 20th century than at any other time in recorded history, because wages and the labour market were deregulated, progressive taxation reduced, means testing of benefits extended, social insurance weakened, and publicly owned industries and services substantially privatized” (2000, p.9).

Nowadays the deepening social polarization that Gordon and Townsend warned of is a reality and has continued to develop and worsen with time. However, it is difficult to absolutely evaluate the human cost of the crisis in Greece, as the impact, especially on the most vulnerable population groups, cannot yet be measured. In addition, the catalogue of social challenges remains long, is constantly expanding and includes, among others, an increase in the population at risk of poverty, as well as increases in social discriminations, the long term unemployed, the employed poor, the under pensioned elderly and child poverty. Every new prediction regarding the consequences of the crisis and each new estimate of the indicators of inequality and poverty – however dramatic – is soon surpassed by the new facts, something that reinforces the precariousness and complicates the mapping of the total spectrum of the new polymorphic and complex reality.

It seems that a new socially excluded group has been created in Greek society; a group which experiences all the major and extreme aspects of poverty and social exclusion and whose members are deprived due to financial reasons of most of their civil rights. But, it may be that the profile of the neo-homeless population can create a new social dynamic which demands that basic needs are guaranteed by

the State. The homeless march organized in Athens on April 12th, 2013, where homeless people protested in front of the Greek Parliament requesting nothing more but a house, suggests that this is more than just an idealistic aspiration.

In the financial crisis there is a wide, and, probably, growing gap between the scale of the problem we face and the scale of the solutions we offer. Social solidarity, not as a characteristic of a welfare state, but as a characteristic of a society arises as a reaction to a global sphere where capitalism dominated due to the absence of any alternative. However, this evolutionary process may lead to a society of risk, the risk of isolation, exclusion, poverty, unemployment, and personal insecurity (Katsadoros, 2011).

As actions unfold to cope with the crisis, Greek citizens are engaged in mounting civil unrest while stark inequalities are widening and are linked to many other social ills. The increase in the number of suicides, the emergence of the “neo-homeless”, the increased rate of delinquency, and economic insecurity are not “effects” of a pathogenic state in crisis. They are the logical consequences of a system that is divorced from social reality.

The emergence of social movements driven by social aims arises in Greece primarily as a response to the unsuccessful capitalistic structures but also in response to basic needs that had been inadequately met, or not met at all, by public services or for profit enterprises. Solidarity and innovation become imperative when problems are getting worse, when systems are not working or when institutions reflect past rather than present problems.

However, this kind of solidarity should now be developed by a society, which has to support and, ultimately, integrate, people that seem to be superfluous to the economy. When people are no longer considered necessary for economic development, society can and must find other alternative ways. Social solidarity, however, does not mean charity and philanthropy. Philanthropy operates exclusively as a relief. Securing a decent living, social participation, solidarity and collective development, but also conservation and development of social capital requires an activating social reaction, which will support the building of a social state. This would require a more equal distribution of social goods and opportunities. In light of this, there have been demands that the sterile vision of the state as the sole catalyst of social ventures and political actions on the basis of solidarity must be replaced with a broader vision of the role of the state. Under these crisis conditions, the aim is to enable citizens to take initiatives. These initiatives must be established on the basis of a constructive reflection that allows the emergence and subsequent rejection of all those system distortions that generate inequality, discrimination and collective weaknesses.

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Meeting the Housing Needs of Vulnerable Homeless People in Northern Ireland

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› **Abstract** *This policy review focuses on the use of the private rented sector in Northern Ireland to house vulnerable (chronically) homeless people. As the supply of social housing comes under intense pressure in Northern Ireland, the possibilities for using the private rented sector as an alternative source of accommodation for homeless people are now being explored. Use of the private rented sector to house chronically homeless people with high support needs, is controversial, as there are some concerns about housing management quality, affordability, security of tenure and the suitability for homeless people with high support needs. This policy review explores the results of recent policy research that examined the strengths and weaknesses of using the private rented sector to house this group of homeless people.*

› **Key Words** *Northern Ireland, Housing First, Housing Led, Welfare Reform, independent living, private rented sector*

Introduction

Northern Ireland has homelessness legislation that broadly mirrors the separate homelessness laws found in England, Wales and Scotland (Fitzpatrick *et al*, 2009). In Northern Ireland, someone is homeless if they have no 'reasonable' accommodation they can occupy in the UK or elsewhere. The 'reasonable' clause in the legislation, which relates to people in severely overcrowded housing, or housing which is in such poor repair that it is unfit for habitation, or housing which exacerbates the effects of an existing disability or limiting illness, makes the Northern Ireland definition of 'homelessness' potentially very wide. However, there are additional criteria

governing acceptance for re-housing. Someone must also show that, through action or inaction, they have not 'intentionally' made themselves homeless. In addition they must have a local connection with Northern Ireland (i.e. be an established resident) and also be within a 'priority need' group (NIHE, 2012a).

An individual or household is in priority need if they have dependent children or if they are 'vulnerable'. To be deemed 'vulnerable' is to have a support or health care need that limits the ability of someone to find their own way out of homelessness, i.e. they need significant assistance to find and secure suitable housing. Someone can be deemed vulnerable if they are a young person at risk of financial or sexual exploitation; someone who is at risk of violence (including gender based/domestic violence or threats of violence from neighbouring households); a disabled working-age adult; a frail older person; if they have mental health problems or a severe mental illness; and for other reasons, such as a history of problematic drug and alcohol use. Vulnerable individuals include those who are chronically homeless, i.e. people who have high support needs and who have experienced sustained or recurrent homelessness. The presence of a support or health care need does not automatically mean someone will be re-housed under the legislation. It has to be determined by the Northern Ireland Housing Executive (NIHE) that a support need makes someone effectively unable to suitably house themselves without assistance (NIHE, 2012a).

Homelessness legislation in Northern Ireland was originally designed to provide housing to homeless people in the social rented sector. However, the supply of social housing has contracted relative to demand, and there is now severe pressure on the available social rented housing in many parts of Northern Ireland. The private rented sector (PRS) is increasingly seen as an appropriate solution for those who might previously have sought social housing, including homeless people. The emphasis on the PRS within housing policy is driven by a number of factors. Most importantly, the current stock of social housing is seen by policy makers as a response to housing need that is difficult to sustain; is attributed with some negative as well as positive outcomes; and is not considered suitable for all cohorts of homeless people. At the same time, demand for social housing, in the face of increased barriers to home ownership, stressed economic conditions, changing demographics and – at least in some areas – rising private sector rents, is likely to increase. Against this background, housing planners increasingly look to the PRS to fill the gap and to meet housing need (DSD, 2010; Donald *et al*, 2011; NIHE, 2012b).

This policy review focuses on recent developments relating to homelessness policy in Northern Ireland. It reports the findings of a research project commissioned by Housing Rights Service, which centred on the potential to make greater use of the

PRs to meet the needs of vulnerable homeless people (Ellison *et al*, 2012). The review is intended to stimulate discussion and inform policy debate about how best to meet the housing needs of vulnerable homeless people in the PRs.

Policy Context

The NIHE is the regional strategic housing authority for Northern Ireland and has statutory responsibility for dealing with homelessness. The Department for Social Development (DSD) is the government department with responsibility for housing policy and works closely with NIHE in the implementation of housing policy in Northern Ireland. The homelessness strategy is located in the context of wider social inclusion goals. In 2004 DSD established the Promoting Social Inclusion (PSI) Partnership, an inter-departmental, cross-sectorial working group, in order to promote the social inclusion of homeless people. In July 2007 the PSI working group published a strategy to promote the social inclusion of homeless people, and those at risk of becoming homeless in Northern Ireland. The PSI partnership is still operating and Housing Rights Service is a member alongside a range of statutory and NGO partners.

The immediate policy context for the research reported here was a strategic review of housing policy in Northern Ireland and the development of a new housing strategy and action plan that is designed to meet future housing needs and ensure that housing has a key role to play in meeting wider social and economic goals. Key components of the framework are the *Homelessness Strategy for Northern Ireland 2012-2017* published in April 2012 (NIHE, 2012a) and a new Housing Related Support Strategy (NIHE, 2012b). Both strategies place emphasis on the prevention of homelessness and an increased focus on need while enhancing and joining up services for homeless individuals. There is also a new drive to utilise the PRs as part of both a preventative effort to relieve housing stress and as a major part of the long-term solution to homelessness. There are four key strategic objectives of the Northern Ireland Homelessness Strategy:

- Homelessness prevention at the forefront of service delivery
- Reducing the length of time households experience homelessness by improving access to affordable housing
- Removing the need to sleep rough
- Improving services to vulnerable households and individuals (NIHE, 2012a, p.7).

Homelessness continues to represent a significant challenge for Northern Irish policy makers and providers. Approximately 20 000 households present as homeless to NIHE each year, with around 50 percent of those being accepted as meeting the statutory definition of homeless. More than half (53 percent) of all households who presented in 2010/11 were single people, of whom 23 percent were single men aged 26-59, many of whom were found to be 'vulnerable' i.e. chronically or potentially chronically homeless. Families with children accounted for around one third (34 percent) of those presenting. In recent years, a number of factors have contributed to changes in the nature of homelessness in Northern Ireland. These have been identified by NIHE (2012a) as follows:

- Changing demographics, particularly an increasing number of older people applying and being accepted as homeless due to current accommodation being 'unreasonable' for their needs;
- Economic factors and welfare reform, e.g. increasing numbers of people becoming homeless because they can no longer afford their accommodation costs;
- Increasing number of people who are homeless following release from institutions, including prisons;
- Increasing number of young people requiring supported accommodation. This is attributable to closer partnership working with Health and Social Services regarding the needs of young people leaving care and an increase in the number of 16 and 17 year olds presenting, and being accepted, as homeless.

The dominant factor in homelessness causation, as cited by those presenting as homeless, is a family dispute (23 percent in 2010/11). The other key factors are marital/relationship breakdown (12 percent), accommodation not deemed reasonable (15 percent) and the loss of rented accommodation (13 percent). There has been a sharp increase (22 percent in 2010/11) in the number of presenters who cited the loss of rented accommodation as the cause of their homelessness, which is thought to reflect the decreasing affordability of PRS rents (NIHE, 2011).

Pressure to use the Private Rented Sector for Chronically Homeless People

If no permanent accommodation is available when the NIHE determines that a vulnerable, i.e. chronically, or potentially chronically homeless, person is eligible to be re-housed, then the individual is entitled to temporary accommodation until suitable permanent accommodation becomes available. Traditionally, most homeless people moved on from temporary accommodation to accommodation in the social rented sector. The social rented sector has usually been preferred

because it is perceived as more affordable, and offering greater security of tenure than the PRS. Use of temporary accommodation has been increasing as demand for social housing in Northern Ireland now exceeds supply.

There are already problems with 'silting-up' within some homeless accommodation services with many chronically homeless people unable to move-on into permanent accommodation, spending long periods of time in accommodation that was designed for emergencies or as temporary. Reasons for 'silting up' may include:

- A lack of adequate and affordable housing to enable move-on;
- A lack of support from other agencies for vulnerable homeless people with complex needs. Being able to achieve successful move-on and sustained independence also depends on the support of other agencies (e.g. health services);
- The support available in temporary accommodation is sometimes inappropriate to the needs of the individual.

Although the PRS looks unlikely to have enough available accommodation to provide a 'total' solution to homelessness, nevertheless the sector does contain a stock of decent and affordable housing that can potentially play a crucial role in tackling homelessness in Northern Ireland, and the NIHE has stated that they believe that even a marginal improvement in access to the PRS could make a significant difference in preventing and tackling homelessness (NIHE, 2012a). However, it can be argued that, if housing needs are to be met using the PRS, access and sustainability are key issues that need to be addressed. Access to the PRS hinges critically on rental affordability and the ability to offer deposits for tenancies. Sustainability rests on accommodation that is appropriate to needs and which is combined with effective support and some degree of stability and security of tenure. It is quite clear from the evidence and the life histories of vulnerable homeless people, that housing based solutions without adequate support will quickly break down, whatever the tenure concerned.

Housing Chronically Homeless People using the Private Rented Sector

The research project commissioned by Housing Rights Service, funded by the Oak Foundation and carried out by Policis and the University of York during 2012 had a particular focus on using the PRS to house chronically and potentially chronically homeless people with complex needs, people whose voices are not often heard in public debate (Ellison *et al*, 2012). The research report sought to place the issues for chronically homeless people in the wider context of the potential role of the PRS in addressing homelessness. It also brought together existing evidence, original

research with homeless service users, perspectives from Government and other stakeholders, research with private sector landlords, and consultations with domain experts in Northern Ireland and elsewhere.

Evidence from the US and Europe shows that the PRS can be an effective solution for addressing the needs of homeless people. However, the research in Northern Ireland reported in this policy review highlights that the major barrier to the use of the PRS to house those on welfare benefits, who have little chance of being housed within the social housing sector, is affordability (Ellison *et al*, 2012). Rents in the PRS are significantly more expensive than in the social housing sector, while the requirement for a security deposit and rent in advance can pose an insuperable barrier for many low income prospective private tenants therefore limiting move-on options for many vulnerable people.

In particular, the reduction in funding for self-contained accommodation for people aged under 35, who are now often only eligible for sufficient support with rent for their own room in a shared house, is a major barrier to accessing and sustaining housing for those at greatest risk of homelessness. Chronically homeless people who may have difficulties with social interaction are likely to struggle in shared PRS housing.

In addition, for chronically homeless people and those at greatest risk of homelessness such as people leaving care or prison, the affordability barriers are compounded by unmet support needs. If support is not provided with mental health, drug and alcohol addiction, financial and social exclusion, or a lack of life-skills, re-housing in the private rented sector is unlikely to be successful (Ellison *et al*, 2012). From the perspective of PRS landlords, individuals who have high support needs can often be regarded as undesirable tenants. Private sector landlords often do not want to house people they regard as unlikely to pay the rent, who might present with nuisance behaviours and cause damage to property.

Existing policy approaches resulting in serial placement in temporary hostel accommodation have, however, not served homeless people well, setting up a pattern of instability and insecurity and leaving vulnerable individuals exposed to peer pressure and influences conducive to the perpetuation of a chaotic lifestyle. Similarly, providing individuals with housing solutions without an appropriate degree and mix of support can result in low rates of housing retention. It is clear from existing evidence that support is required if the chronically and potentially chronically homeless people are to sustain tenancies. There is also evidence that some older homeless people, who include some of the most high risk and vulnerable individuals, are highly resistant to the idea of living in other than a hostel environment, and reluctant to move away from familiar staff on whom they were often highly dependent for safety and support (Ellison *et al*, 2012).

Using the Private Rented Sector for Chronically Homeless People

The evidence base indicates that support strategies need to be holistic and focused on outcomes for different segments within the chronically homeless population involving:

- The disruption of cycle of instability and crisis, acquisition of life-skills, enhanced opportunity for those with light support needs;
- Addressing specialist needs around mental health, drug and alcohol use for those with medium support needs as a basis for a wider effort on longer term behaviour change, new connections and new life-chances;
- The provision of intensive support and harm reduction programmes within stable and secure environments with respect, control and choice, for the relatively few who need intensive permanent support (Ellison *et al*, 2012, p.106).

While barriers exist around landlord attitudes and the affordability of the PRS, private landlords are nevertheless open to propositions which guarantee rent, length of tenure and assurances that the property will be returned in good condition; providing that these guarantees are combined with support services that minimise potential disturbance to neighbours and provide for exit management in the event of a tenancy going badly wrong (Ellison *et al*, 2012).

The research concluded that the Housing First model, which takes housing as a basic human right and provides a permanent housing solution, should be implemented in Northern Ireland as a first step in addressing chronic homelessness, using the PRS, with housing entitlement separate from service development and delivery (Ellison *et al*, 2012). It needs to be recognised that those presenting with different support needs and more or less entrenched homelessness will require differing degrees of support. Putting a permanent housing solution in place as the first step in tackling homelessness needs to be the common thread in the approach to homelessness in Northern Ireland, regardless of the complexity of need.

People with complex needs and a history of entrenched chronic homelessness are likely to need a Housing First approach, combining a housing solution with long term, intensive, wraparound support. Those experiencing recurrent homelessness, but with less complex needs, may need multi-agency support but on a less intensive and, if appropriate, on a time-limited basis, using a Housing Led model. For others with few if any support needs, the Social Lettings Agency approach (which involves a small staff team which essentially checks and then facilitates access to suitable PRS housing), combined with transitional support and any required skill building, will be sufficient to effect sustainable change, secure tenancies and enhanced

life-chances. Combining new ways to manage access to the PRS and innovative support such as that offered by Housing First could be a way forward to successfully using the PRS to end homelessness for chronically homeless groups.

While a number of initiatives have been undertaken in Northern Ireland to prevent homelessness (e.g. rent deposit guarantee schemes), the role of tenancy sustainment in preventing tenancies from coming to a premature end requires greater recognition and support. This entails providing housing support services, including Housing First, from the outset of a tenancy to assist with developing skills for independent living. Currently, floating support can provide such services, but provision is not strongly developed outside Belfast.

This may be particularly important for older people who are increasingly presenting as homeless. There is now a greater appreciation of how housing support can help older people maintain independent living in their own homes through assistance, for example, with peripatetic support, and assistance with repairs or adaptations. In recent years, a substantial portfolio of 'single lets' has also been developed – self-contained rented accommodation in the PRS – which is used to discharge NIHE's statutory duty to make available temporary accommodation for a homeless household whilst a permanent accommodation solution is sought. The level of housing related support provided within temporary homeless accommodation varies from service to service and some single lets often have no support attached.

A number of key recommendations have been set out in the research report including:

- A move away from temporary accommodation and towards the use of Housing First and Housing Led models is required, putting the housing solution first and then building multi-agency services and support around it;
- The Housing First model will need to be deployed in combination with an expanded Social Lettings Agency approach to address the barriers to vulnerable individuals entering the PRS in order to overcome landlord resistance to housing vulnerable tenants and to build the life skills, which will make tenancies sustainable. It needs to be recognised however that, as a stand-alone service, the Social Lettings Agency model is only appropriate for those with low support needs;
- For those with more complex needs, and recovering from chronic and serial homelessness, a more intensive multi-agency support service will need to be developed within a Housing First framework offering: intensive wrap-around 24/7 support on a permanent basis for the relatively few very high risk individuals who need this approach; and less intensive, potentially time limited, support for those with less complex problems who may need extensive support in the transition period but may be able to live independently, with less support, on an on-going basis;

- Vulnerable homeless people aspire above all to self-determination, a space of their own, and an opportunity to re-set their lives. Where there is research on service user aspirations, they express a desire to live independently, in ordinary housing and in their local communities (Ellison *et al*, 2012).

The UK Government's welfare reform agenda will have a major impact on homeless households in Northern Ireland. This agenda is likely to impact significantly on the affordable housing options for homeless people moving on from temporary accommodation into the PRS. Although some exceptions exist for long-term chronically homeless people, a lack of affordable private rented accommodation may lead to delays in moving on from temporary accommodation with some people (particularly those in the single, under 35 age group) finding that they can no longer afford their accommodation and becoming homeless as a result of the benefit changes. Consideration needs to be given to the risk of homelessness and the implications of adopting a Housing First approach when framing the implementation of welfare reform in Northern Ireland. It will be critical that 'Exceptions and Support' policies and protocols around the transition to the new welfare regime are structured so chronically homeless and potentially chronically homeless individuals are exempted from the requirements on shared accommodation and the associated caps on entitlement.

Conclusion

This policy review argues that the Housing First and Housing Led models that have been effective elsewhere in Northern Europe and the US can provide a template for adaptation in a Northern Ireland context. Policy makers in Northern Ireland should develop a holistic, people centred, response to the needs of chronically homeless people in order to arrest the cycle of failure which leads to repeated episodes of homelessness and, in the most acute cases, even more tragic consequences for these individuals and their families. It is of note that NIHE and DSD are committed to considering the applicability of a Housing First model in Northern Ireland and to develop 'wraparound' support solutions tailored to individual need. However the continuing recession, welfare reform and the lack of affordable social housing may ultimately undermine efforts to access permanent accommodation for many vulnerable people.

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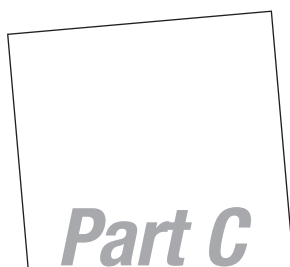
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Think Pieces



Part C



Focusing on Conceptual Validity: A Response

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Introduction

In 2011, a paper I wrote with my colleagues Michael Baker and Philippa Howden-Chapman was published in this journal – entitled *The ETHOS Definition and Classification of Homelessness: An Analysis* (hereafter referred to as ‘the 2011 paper’). Three authors responded – Bill Edgar (2012), Ingrid Sahlin (2012), and Nan Roman (2012); I am grateful for their thoughtful critiques. The aim of this article is to comment on the three responses, with the aim of moving the discussion further forward.

References to definition and measurement issues are ubiquitous in the homelessness literature, but relatively few authors have sought to conceptually define the phenomenon. In the early 1990s, Cordray and Pion explained, “it is impossible to make meaningful decisions about whom to count as homeless and how to derive that estimate without a firm grasp of the concept that one intends to measure” (1991, p.591). Yet, these authors avoided the task of developing a robust concept of homelessness, instead simply recommending clear articulation of whatever is measured as homelessness.

This type of shortcut has persisted, with a number of definitions in the literature reflecting popular perceptions, or defaulting to what is already measured (e.g. Rossi and Wright, 1987; Peressini *et al*, 1996; Springer, 2000; Tipple and Speak, 2006). Many definitions comprise lists or ‘continuums’ of living situations with no explanation of the defining characteristics these situations have in common (e.g. Springer, 2000; United Nations Department of Economic and Social Affairs, 2008). Debates about definitions of homelessness have tended to focus on specific living situations (often framed as ‘broad’ versus ‘narrow’ definitions), without reference to clear

theoretical rationale. Detailed conceptual models¹ are rare, and classifications of homelessness demonstrably derived from systematic, exhaustive application of such conceptual models are rarer still, even among recently-published approaches; e.g. Australian Bureau of Statistics, 2012; Canadian Homelessness Research Network, 2012. In-depth, critical analyses of existing approaches are limited. In sum, the field has seen a proliferation of definitions and classifications of homelessness, but a relative lack of engagement with ideas of conceptual validity or international standardisation.

The ETHOS approach to defining and classifying homelessness is unique for being prominent, explicitly conceptual, and developed for application across international borders (within the European Union). This made it an ideal candidate for examination against the standard criteria for conceptual validity, as outlined in the 2011 paper. In this present paper, the responses to the 2011 paper are considered within the following structure. First, Edgar's, Sahlin's and Roman's criticisms of the 2011 paper are discussed in six sections: scope and appropriateness; arbitrary threshold; no circumstances criterion; weak construct validity; non-exhaustiveness; and reference period inconsistency. Next, Sahlin's concept of 'problematic housing situations' is examined, a concept proposed in response to the 2011 paper. Finally, refinements to the 2011 paper's concept of homelessness are summarised, and conclusions drawn.

Responses Relating to the Scope and Appropriateness of the 2011 Paper's Analysis

Roman and Sahlin criticised the 2011 paper for failing to examine two topics that were expressly outside its scope: operational definitions of homelessness; and housing exclusion. Roman argued that: "A definition must contain data elements that can be collected in the real world" (2012, p.237). This is true for operational definitions, but the 2011 paper focused on conceptualisation: "[W]e focus only on conceptualisation, but stress that a valid concept of homelessness is the basis of a meaningful case definition and should guide the development of data collection" (Amore *et al*, 2011, pp.23-24). Regarding housing exclusion, both Roman and Sahlin pointed out that this conceptual category was missing from the classification of homelessness proposed in the 2011 paper. However, the 2011 paper focused solely on the definition and classification of homelessness. Housing exclusion is a concept related to, but distinct from, homelessness.

¹ 'Conceptual model' and 'conceptual definition' are synonymous, as are 'typology' and 'classification' – these terms are used interchangeably in both the 2011 paper and this one.

Edgar questioned the appropriateness of the 2011 paper's critique. He framed the analysis as "the *sensu strictu* interpretation of statisticians" (2012, p.224, original emphasis), suggesting that a 'strict' (or rigorous) definition of homelessness does not meet "the needs of professionals involved in policy development, evaluation and implementation" (2012, p.224). As a matter of note, none of the authors of the 2011 paper are statisticians. More importantly, a conceptual definition of homelessness (or any phenomenon) must be strict, because that is the definition of 'definition': "Stating exactly what a thing is, or what a word means" (Oxford English Dictionary, 2013). If we are not strict when we define homelessness, then we are being sloppy, and: "[I]f a sloppy inquiry is as acceptable as a careful one... then there is no need to inquire – we might as well accept, without further fuss, any old view that tickles our fancy" (Philips, 1990, p.43). There exists an intellectual responsibility for rigorous and sound conceptualisation. This is important for valid measurement of a population, but also for policy development, service delivery, evaluation of interventions, and other research.

As discussed in the 2011 paper, the ETHOS typology of homelessness is promoted and perceived as being derived from a robust conceptual definition. Culhane and Byrne (2010) for example, commented that the classification is "thoroughly well conceptualized" (p.9). ETHOS is recommended as the "common framework definition of homelessness at EU level" (European Consensus Conference on Homelessness, 2010, p.10), and it is being "used already in a number of countries to adjust or refine national definitions of homelessness" (Busch-Geertsema, 2010, p.34). The intention of ETHOS, according the Edgar, is to "provid[e] a robust conceptual model" (2012, p.224). For all of these reasons, there is no doubt that carefully scrutinising the conceptual rigour of ETHOS was appropriate and necessary.

Edgar implied that the established standards for conceptual definitions and classifications (as described in the 2011 paper) do not apply to ETHOS because "ETHOS was developed in the context of the complexity and diversity of the European Union" (2012, p.224). However, a theory should be expected to meet the usual standards, wherever it is developed.

Edgar also confused the conceptualisation of homelessness proposed in the 2011 paper with another approach developed in New Zealand, published by Statistics New Zealand (2009). This confusion is understandable, but the approaches are quite different, and Statistics New Zealand's concept is irrelevant to the 2011 paper. However, it is worth noting that Edgar considered Statistics New Zealand's definition of homelessness, and concluded, "our intention of providing a robust conceptual model that would allow adaptation to local circumstance has been vindicated by the NZ experience" (2012, p.224). There are two problems with this argument. Firstly though the Statistics New Zealand's approach is ostensibly "based upon...

ETHOS" (2009, p.4), the definition and classification do not actually correspond with the ETHOS conceptual model (see discussion in Amore *et al*, 2013). Secondly a model being cited or even applied by a statistical office or any other agency is not, in itself, evidence that the model is conceptually robust.

Roman framed the ETHOS typology as a menu of categories, rather than a conceptual guide: "... nations can choose what category or categories of homelessness [from the ETHOS typology] they wish to define and measure, and have this measurement be understandable, comparable, and reliable internationally" (2012, p.236). Nations choosing whatever categories they wish to recognise as homelessness is at odds with the notion of a conceptual definition and classification. A conceptual approach is designed to produce standardised measures, with different nations applying the same conceptual criteria to their respective populations. The populations identified as homeless will vary, but the reasons they qualify as homeless will be consistent. If the ETHOS typology is perceived and used as a menu, and nations simply choose a variety of categories to measure as homelessness, their respective measures will not be comparable. Roman also argued that: "A definition must be consistent over time so that change can be measured" (2012, p.237). This is true to a certain extent – a definition should be applied consistently over time, but it should also be conceptually valid, and conceptual validity takes precedence. If temporal consistency took precedence over conceptual validity, then we should still be defining a homeless person as being a vagrant, hobo, or tramp.

Responses Relating to the 2011 Paper's 'Arbitrary Threshold' Criticism of ETHOS

The first criticism of ETHOS in the 2011 paper was that the threshold between homelessness and housing exclusion in the conceptual model seems to be arbitrary. The 2011 paper questioned why people excluded from both the physical and social domains are not regarded as homeless in the ETHOS conceptual model, but people excluded from the legal and social domains are. Underlying this critique was the observation that the categories classified as 'homelessness' represent exclusion from two or more 'domains of home'. We therefore assumed that the principle for defining homelessness was (or should be) 'exclusion from multiple domains'. This understanding also underpinned the model of homelessness proposed in the 2011 paper, but this should have been made explicit, as Roman rightly pointed out. A reader should not have to guess the rationale underlying a conceptual model – it should be clearly stated. Both the 2011 paper and ETHOS fail this basic test.

My position is that homelessness pertains to severe housing deprivation, which reflects popular understanding of the issue and that of many practitioners and scholars. Springer, for example, framed homelessness as “the bottom end of the spectrum of housing situations” (2000, p.476) and Rossi *et al* (1987) asserted: “In a fundamental sense, a definition of homelessness is, ipso facto, a statement as to what should constitute the *floor* of housing adequacy below which no member of society should be permitted to fall” (p.1336, emphasis added).

I argue that homelessness pertains to living situations that fail to meet a minimum adequacy standard for housing – that is, severely inadequate housing. An ‘intersection’ or ‘exclusion from multiple domains’ approach fits with such a construction, and is consistent with other measures of deprivation, such as Eurostat’s ‘severe material deprivation’ measure; Eurostat, 2012.

Assuming an ‘exclusion from multiple domains’ rule applies to the ETHOS model, the 2011 paper questioned why people are only regarded as homeless if the two domains they are excluded from are legal and social. This means people living in other situations of ‘exclusion from multiple domains’ are excluded from the homeless population – such as a person living in a legally tenured house that lacks sanitary facilities, due to a lack of access to more-adequate housing. The 2011 paper argued that living in such housing, due to a lack of better options, represents exclusion from ETHOS’ physical and social domains. The physical inadequacy of such housing relates to the lack of sanitary facilities, and the social domain relates to being able to maintain privacy, which is seriously compromised if sanitary facilities are lacking.

In reference to the above example, Edgar argued that people living in housing that is severely physically inadequate should not qualify as homeless, because “in some countries a high percentage of dwellings are officially unfit for habitation” (2012, p.222). I would argue that the predicted prevalence of a housing problem is irrelevant to deciding whether or not it qualifies, conceptually, as a category of homelessness. According to Edgar’s argument, a high percentage of a population living rough would be cause to exclude people living rough from the homeless population.

Responses Relating to the 2011 Paper’s ‘No Circumstances Criterion’ Criticism of ETHOS

The second criticism of the ETHOS in the 2011 paper was that the conceptual model lacks a clear ‘circumstances’ criterion. Admittedly, this argument was not as clear as it should have been. ‘Circumstances’ is a poor descriptor of the criterion in question – ‘a lack of access to minimally adequate housing’ would be more precise.

The 2011 paper also argued that homelessness relates to living in severely inadequate housing *and* lacking access to minimally adequate housing. The connector 'and' was erroneous. Rather, homelessness should be understood as relating to living in severely inadequate housing *due to* a lack of access to minimally adequate housing. To illustrate: a person in prison is living in severely inadequate housing – they are excluded from ETHOS' social and legal domains *and* they lack access to other, more-adequate housing. Indeed, prohibiting access to more-adequate housing is a core function of prison. However, a person in prison is not living in severely inadequate housing *due to* a lack of access to minimally adequate housing; rather, they are living in such housing because they are incarcerated. Therefore, they should not be considered homeless. In the same way, a person living in a tent should only qualify as homeless if they are living in the tent *due to* a lack of access to minimally adequate housing. This kind of 'enforced lack' (Mack and Lansley, 1985) criterion is standard in concepts of poverty and deprivation, and homelessness is generally considered to be a form of deprivation.

Edgar refuted the 2011 paper's 'no circumstances criterion' criticism, arguing that: "Lack of access to housing underpins the whole development of the [ETHOS] model" (2012, p.221). However, if something is a defining criterion, it should be clearly stated in the conceptual definition, not implied. As mentioned in the 2011 paper, this clarity is important to ensure due attention is paid to each criterion when developing operational definitions. Operationalisation of 'lack of access' is given little attention in the literature, compared with discussion of which housing types should be included in classifications of homelessness. However, the issue of operationalising 'lack of access to minimally adequate housing' has not been ignored entirely. The Australian Bureau of Statistics (2011), for example, explained why using 'no place of usual residence' as the sole proxy for 'lack of access to minimally adequate housing' is inappropriate. This occurs in a number of operational definition, such as ETHOS Light (Edgar et al, 2007) and Chamberlain and MacKenzie (2008). Further work is needed in this area.

Responses Relating to the 2011 Paper's 'Weak Construct Validity' Criticism of ETHOS

The third criticism of ETHOS in the 2011 paper was that the typology has weak construct validity because it does not reflect the conceptual model it is ostensibly derived from. One of the examples used in the 2011 paper was institutions targeted at homeless people or immigrants. The paper pointed out that while residents of these institutions are classified as homeless in ETHOS, residents of other types of institutions are excluded from the homeless population, even though they meet the criteria for homelessness set out in the ETHOS definition. Edgar seems to have

misinterpreted the critique, stating that the 2011 paper “refer[s] specifically to category 5 (accommodation for immigrants)... and claim[s] th[is] population is not part of the homeless population” (p.222). Rather, the argument made in the 2011 paper was that the ETHOS conceptual model does not adequately explain why some categories are ruled in, and other categories are ruled out, of the classification of homelessness.

Responses Relating to the 2011 Paper’s ‘Non-Exhaustive’ Criticism of ETHOS

The fourth criticism of ETHOS in the 2011 paper was that the typology of homelessness is not exhaustive. A typology must be exhaustive, by definition (Hoffman and Chamie, 1999). Edgar and Sahlin both seem to have misinterpreted this argument. Edgar argued, “even if it had been possible to develop an exhaustive typology in the diversity that is Europe, it would not have been a sensible approach” (2012, p.223); and Sahlin, while agreeing that the ETHOS typology is not exhaustive, argued, “... but operational categories can hardly cover all relevant housing situations in all countries all of the time” (2012, p.229). The ‘non-exhaustive’ criticism of the ETHOS classification was not a call for finer differentiation of the housing types covered, but a criticism that there are no conceptual categories for some people who qualify as homeless according to the ETHOS conceptual model.

Responses Relating to the 2011 Paper’s ‘Reference Period Inconsistency’ Criticism of ETHOS

The fifth criticism of ETHOS in the 2011 paper was that inconsistent reference periods are applied in the typology. Specifically, this criticism referred to ETHOS labelling people at risk of homelessness and people who are formerly homeless as ‘homeless’: “While we agree that these populations (at risk of homelessness and formerly homeless people) are relevant to homelessness policy and should be monitored, we think it is necessary to distinguish them clearly, rather than conflate them with the homeless population” (Amore *et al*, 2011, p.30).

Regarding ETHOS misclassifying people ‘due to be released from institutions with no home to go to’ as homeless, the 2011 paper argued: “If no housing has been organised for a person in an institution to be discharged to, then it is appropriate for them to remain in the institution until it is” (Amore *et al*, 2011, p.30). As rightly pointed out by Edgar, this was a weak argument. In the case of prisons, for example, it is clearly inappropriate for people to be held past their date of release due to a lack of housing to be released to.

However, the broader argument stands – ‘at risk’ and ‘formerly homeless’ populations are not homeless, and should be clearly distinguished. The logic is plain. The 2011 paper stressed that this argument does not imply these populations are not relevant to homelessness policy, nor that they should not be monitored. Edgar argued: “Since homeless[ness] policy should be concerned with prevention as well as alleviation, there is a requirement to monitor those who are at risk of homelessness and those who have been re-housed due to homelessness” (2012, p.222). I agree – but a group does not have to be called ‘homeless’ to be monitored or to be included in homelessness policy. It is possible (and valid) to define people at risk of homelessness as ‘at risk of homelessness’ and people formerly homeless as ‘formerly homeless’ and still make clear that they are important populations for policy and measurement. Moreover, clearly distinguishing these populations is useful for policymakers, because they require different types of policy interventions.

In response to the 2011 paper’s criticism of ETHOS misclassifying people ‘due to be released from institutions with no home to go to’ as homeless, Sahlin argued: “A hospital or a prison is certainly not a place where a person may enjoy any dimension of a home, whether physical, legal or social” (2012, p.228). I agree that hospitals and prisons do not satisfy the legal and social domains – that is, their residents lack security of tenure (legal domain) and they lack privacy, as compared with a conventional dwelling (social domain). However, following Edgar’s (2012) confirmation of ETHOS’ implied ‘enforced lack’ criterion, a person should only be regarded as homeless if they are living in such housing *due to* a lack of access to minimally adequate housing. On this view, a person living in an institution (of any kind) should only be classified as homeless if the living conditions in the institution exclude them from the legal and social domains *and* if they are living there due to a lack of access to minimally adequate housing. The example of prison was discussed earlier. To give another example, if a person is in hospital because they require hospital-level care, they are not homeless. However, if a person has to remain in hospital due to lack of access to minimally adequate housing, rather than a need for continuing hospital-level treatment or other social reasons, they are homeless. These stipulations may seem overly detailed, but that is the purpose of a conceptual definition – to explain exactly what is ruled in and what is ruled out, and why.

Sahlin’s Concept of ‘Problematic Housing Situations’

In her response to the 2011 paper, Sahlin made a valuable contribution to the field by introducing a new conceptualisation of ‘problematic housing situations’. This new concept was intended to overcome the perceived conceptual shortfalls of both ETHOS and the approach proposed in the 2011 paper. I will not provide a thorough analysis here, but make two brief observations. Firstly Sahlin’s classifi-

ation aims to be exhaustive – “tak[ing] all logical combinations of missed or available ETHOS domains into account” (2012, p.231). However, it is missing one combination: social domain missing, physical and legal domains available (for example, inadequate privacy in physically and legally adequate housing). Secondly Sahlin argued that space (or ‘room’) is a criterion of both the physical and social domains. This may explain the missing combination in Sahlin’s classification: if housing fails to provide enough space, it will always fail to satisfy both the physical and social domains. However, spatial adequacy is primarily a social phenomenon, not a physical feature of housing. A dwelling without sanitary facilities, for example, can be said to be physically inadequate, regardless of who lives there. However, whether a dwelling provides adequate space is dependent upon how the dwelling is used – that is, how many people are living in it, the composition of the household, and how the rooms are used. For example, a house that provides more than enough space for one person may not provide adequate space for 20 people, but physically, the house is unchanged.

The only exception to this rule would be a very small dwelling – one with all basic amenities, but too small for one person to lie down in. In this case, the dwelling would qualify as physically inadequate due to spatial inadequacy. Here, spatial inadequacy is a physical characteristic of the house – it does not matter who is living in it, the amount of space will always be inadequate. Sahlin does not mention this scenario, nor does it appear in ETHOS – likely because it is so implausible.

Putting this exception aside, spatial inadequacy is primarily a social phenomenon. In crowded housing, residents do not have enough space because of the number of other people in the dwelling. My position is that the physical domain should be understood as pertaining to structural aspects of housing, such as sanitary facilities, or the existence of a roof. This echoes the approach taken by the authors of ETHOS (Edgar *et al*, 2004), as well as Statistics New Zealand (2009) and the Australian Bureau of Statistics (2012). On this view, the combination missing from Sahlin’s classification – social domain missing, physical and legal domains available – is theoretically possible, and this is where household crowding should fit. Residents of crowded houses have inadequate space by definition, and thus their living situation fails to satisfy the “room for social interaction” (2012, p.231) criterion of Sahlin’s social domain. Of course, crowded housing may also be physically inadequate (e.g. lacking a functioning toilet), and residents may lack security of tenure, but these are not features of crowded housing per se.

This argument also explains why crowded houses did not appear in the classification of homelessness proposed in the 2011 paper. The rule for inclusion in that classification was that a living situation must be lacking in at least two of the three domains. Crowded housing is only lacking in the social domain, thus residents of crowded houses do not qualify as homeless.

Refining the Definition and Classification of Homelessness

The definition and classification of homelessness proposed in the 2011 paper contained errors, which were usefully highlighted by Edgar, Sahlin, and Roman. After carefully considering these faults, my revised position is that homelessness should be defined as:

1. Living in severely inadequate housing (that is, housing that does not meet the minimum adequacy standard, with the minimum adequacy standard defined as satisfying two or more of the three core domains of housing adequacy); *due to*
2. A lack of access to minimally adequate housing.

The concept can also be described more succinctly as either 'severe housing deprivation' or 'lack of access to minimally adequate housing'. There are no exceptions to either of the two stated criteria. This means I no longer subscribe to Chamberlain and MacKenzie's (1992) notion of 'culturally recognised exceptions', which also features in the Australian Bureau of Statistics' (2012) definition of homelessness. A comprehensive discussion of this refined approach is outside the scope of this paper, but is covered in a forthcoming doctoral thesis (Amore, forthcoming).

Conclusion

The 2011 paper examined ETHOS, arguably the most prominent definition and classification of homelessness in recent years. The 2011 paper outlined a number of conceptual criticisms, and Edgar's, Sahlin's, and Roman's responses each contributed to a valuable discussion about conceptualising homelessness. Some instances of misinterpretation were evident in the responses, so this present paper has attempted to clarify the arguments. Some of the responses speak to an idea that ETHOS should not be held to the standards for conceptual definitions and classifications, but no convincing argument for such an exemption has been made.

As for the concept of homelessness proposed in the 2011 paper, the three responses highlighted two faulty arguments, which are remedied in this present paper: the two broad conceptual criteria of homelessness should be joined by the conjunction 'due to' rather than 'and'; and these criteria should be applied consist-

ently to all living situations, with no ‘culturally recognised exceptions’. The amendments have been outlined here, but a comprehensive exposition of my approach to defining and classifying homelessness will be published elsewhere (Amore, forthcoming). This approach has been applied to produce national severe housing deprivation statistics for New Zealand (Amore *et al*, 2013).

In her response, Sahlin proposed a new classification of ‘problematic housing situations’, which was framed as a return of the basic ideas, or logos, of the ETHOS concept. This classification deserves further consideration. It is important to note that Sahlin’s approach dissolves the theoretical threshold between severe housing deprivation (homelessness) and other types of housing deprivation, which raises the question of whether there is any value in such a threshold. Conceptualised as severe housing deprivation, I would argue that homelessness is worth defining and measuring as a distinct concept, just like other concepts of severe material deprivation. Sahlin’s framework also gives rise to more fundamental questions about ETHOS, such as: Why are there only three ‘domains of home’? And why are these three domains social, legal, and physical? Why is cost, for example, not considered a domain of home, when highly unaffordable housing is widely regarded as inadequate?

Defining and measuring homelessness are fundamental issues in our field. New and existing approaches should be appraised against established standards for conceptual validity, and their various strengths and weaknesses compared and discussed. If an internationally standardised measure of homelessness is to become a reality (which is a worthy aim), we need to continue to work toward identifying and applying the most valid concept of homelessness.

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How is Homelessness?

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“What do we do now?”

Vladimir: While waiting. *Estragon*: While waiting. [Silence] *V*: We could do our exercises. *E*: Our movements. *V*: Our elevations. *E*: Our relaxations. *V*: Our elongations. *E*: Our relaxations. *V*: To warm us up. *E*: To calm us down. *V*: Off we go”

(Samuel Beckett, *Waiting for Godot: A Tragicomedy in Two Acts*, Act 2)

Framing Homelessness

In the last forty years there has been a proliferation of data and studies on what can be called, in a Foucauldian way, the “economy of homelessness” – resulting in the “knowledge of all the processes related to population in its larger sense” (Foucault, 2000, pp.216-217). Research has been undertaken on the most disparate topics, ranging from the causes of homelessness, and gender differences amongst homeless people, to very specific accounts on the housing stock, or, for instance, the health and mental conditions of homeless and vagrant individuals. However, despite the variety of topics and contributions, it is possible to recognise a commonality in the approaches adopted in studying homelessness: Namely that homeless people are often “framed” *a-priori*, hence prior to the investigation of this or that aspect of their life. This framing takes place on at least two levels.

First, homeless people are framed by canonical definitions of who they are; “*the poor*”; “*the drunk*”; “*the addict*”; “*the dispossessed*”; and so on. Second, they are framed by means of rigid theoretical frameworks that, although supposedly developed to enhance our understanding of the homeless phenomenon, often lead to classifications, compartmentalisation, and reification – to analytical abstractions. Studying a social phenomenon (like homelessness and vagrancy) on the basis of these framings is problematic for at least three reasons. First, because it does not allow one to take into consideration the nuances of the people framed in the definition. If, for instance, I take-for-granted that homeless people are “the poor”, and

hence I also take-for-granted the bare notion of *poverty*, my study (and my ideas) will be shaped by that basic pre-conception. If I start from a strict economical understanding of poverty (like many institutions have done for decades) I won't be looking at the emotional dimensions of "the poor", or at their wishes and desires. Despite all my efforts and my ability to mix methodological approaches, I will never be able to see the nuanced details that exceed and escape the definition of poverty that I have relied upon. To frame and to define are, hence, interconnected – and not neutral. They are an exercise of power, if you want: I decide *what*, I define *who*, and I set apart all the things/events/materials that do not belong to that definition. This is mostly unavoidable – what I can manage is the degree by which I choose to define/frame something or someone.

Second, framings are not only problematic because they may obscure important details, but because they stick in the social imaginary and they are hard to remove. *Vagrancy* is connoted in negative terms because of the accumulation of discourses, practices, and symbolic values that have strengthened a particular (stigmatising) definition of this practice. Let's open The Oxford Dictionary of English:

Vagrancy |'veɪr(ə)nsl|; noun [mass noun]; the state of living as a vagrant;

Homelessness: *a descent into vagrancy and drug abuse.*

Terms like "descent" and "drug abuse" are not neutral. They codify what vagrancy is under a particularly negative light: You *descent* there (ascent: to heaven; descent: to hell), and the given consequence is that you become a drug abuser. Social "realities", like homelessness and vagrancy, are always defined by means of symbolic values, discourses and practices. But definitions, as a form of discourse, are in turn reinforcing the perception of that social reality. It is like a never-ending, relational, circle where everything you do (and everything you say) has a consequence. To put it simply, definitions and framings are not neutral and the way we talk about something is, in the end, going to affect both the phenomenon and our understanding of it.

Third, these framings are relevant for reasons that encompass academic or social debate; that's because they are translated into the politics enacted to face/ combat/arrest/confront the phenomena in question. Urban policies on homelessness and vagrancy are indeed written and enacted on the basis of academic researches and the social imaginary. The consequence is that policies often reflect the limit stated above: Being constructed around frames that reduce, rather than unfold, complexity, they are not usually able to deal with the specificity of each case. And this is the most positive instance – we all know the uncountable occurrences in which policies have been implemented not to face the causes, and the effects, of homelessness, but to eradicate homeless subjects themselves (usually wiping them out of the inner city).

Homeless People and the City

To sum up, traditionally homelessness and vagrancy have been studied and understood starting from problematic framings and definitions, which have consequences for the way policies are conceived and enacted. But how may it be possible to move forward? If discourses, practices and symbolic values are the agents that make up social research and imaginary, they should most obviously become our starting point. However, changing them is not easy. Take for instance the fact that nowadays, if we want to be politically correct, we use the terminology “waste collector”, instead of the more prosaic “rubbish man”, to identify someone employed to collect and remove refuse from the street. The change follows an increased attention paid to avoiding detrimental terminologies when it comes to the identifications of particular jobs, or groups of people, in order to reduce the social stigmatisation surrounding them. Having said this, waste collection is still largely seen as low-skilled labour, often regarded as the less appealing job that the market can offer. This is because “waste collector” is not only a term, but it is first and foremost a set of poorly paid practices that involve dealing with rubbish, getting dirty, inhaling terrible smells, and so on, which all have a negative connotations to the vast majority of us. The overall symbolic values attached to waste collection are therefore mostly negative, like with homelessness and vagrancy. It seems, in the end, that we are back to square one. Can we find a way to better understand these phenomena, in order to re-imagine them and the policies attached to them?

A starting point may be stopping to question “what” homelessness, vagrancy, and waste collection are – in a sense, stopping to look for a definition, for an explanation, for a new terminology – and moving toward a different kind of question. Not *what*, but *how*. Instead of re-naming, or better defining, what rubbish men (and women) are, we should look at how they are: How they do what they do; how they speak about what they do; how they think what they think; etc. Looking within their practices, and the relations that they have with their own work, will throw a new light also on what they are. That’s because we will be able to see things previously unseen; to let people speak for themselves; and to acknowledge the role of factors like emotions, or the rise of unexpected events, in the daily life of each individual. The same is true with homeless and vagrant people. The thing that strikes me most about canonical approaches to homelessness is their inability to really grasp, and understand, the relationships that take place between homeless people and *the city*. Urban homelessness, as well as vagrancy, is co-constituted with the urban fabric; sidewalks; shelters; soup kitchens; public parks; markets; benches; trains; buses; cafes; pubs; public policies; weather; schedules; dust; rust; syringes; lights; fires; shit; empty boxes; trees; etc. This is so obvious it has almost been forgotten. We are so focused on talking about what homelessness is, and how to “solve” it, that we are missing an understanding of *how* homelessness is. There are, of course,

excellent exceptions and the overall story is much more complex than the one just sketched (see for example, Liebow, 1993; Snow and Anderson, 1993; Veness, 1993; Ruddick, 1996; Desjarlais, 1997; Duneier, 1999; Bonadonna, 2005; Robinson, 2011). However, lots can be said and done in this direction – in the direction of avoiding the framings to get back to the raw core of the matter.

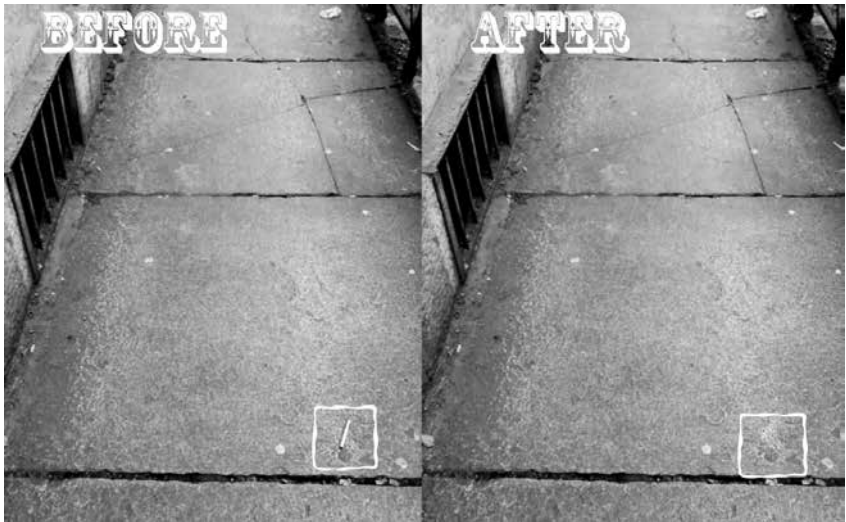
In what follows I want to give three examples taken from ethnographic research I conducted in Turin, Italy (Lancione, 2011). The examples show the importance of *objects*, *codes* and *poetry* in making up *how* homeless people are. Objects make up everyone's lives. They have agencies, in the sense that they have the ability of changing the condition of something; they allow, interrupt, channel, mix, etc. A traffic light allows you to cross, and makes you stop. A coat protects you from the cold. A bench provides you with a place to sit, sleep, and make love. Objects have been mostly forgotten – but they are central (Latour, 2005). The way they are disposed, in a shelter, or a soup kitchen, and their own material quality, contribute towards making a place what it is. Codes are diagrams that govern what you do – not in a strict way, you can escape them and you do create codes too. A law is a basic code. The way you feel that you have to behave, while queuing to access a drop in centre, is a code. The discourse embedded in a service of care (for instance, the religious discourse around “the poor”) is another powerful code (Lancione, 2014). They are dispersed in everyday practices, and they are relational (in the sense that they relate with *you*, and *you* relate with them). Poetry is the fluid of life, a fluid of emotions, of unexpected situations, of encounters with the other (*l'autre*), of power and affects.

More than being a specific *thing*, poetry is a way to looking at reality, of being ready to accept what exceeds the ordinary and the established meaning (and course) of things (in other words, it is all about non-representation)(Anderson and Harrison, 2010). In order to understand how homeless and vagrant people are, it is essential to adopt *poiesis* – a free state of mind, ready to grasp the most extravagant capabilities they may express. Objects, codes, and poetry are not separated: They come and go together, assembling and de-assembling with the human subject (Guattari, 1995). The colloquial vignettes reported below, which introduce these non-static concepts (Deleuze, 1994 [1968]), are short and they do not intend to be exhaustive (more can be said, see Lancione, 2013). They provide, however, an initial ground to grasp the political relevance of approaching homelessness from a relational perspective, taking into account human and non-human; diagrams and codes; poetry, capabilities, and the unexpected – as well as possibly many other things that I'm not able (and I don't want) to enumerate/classify/define.

Objects

Turin, a cold rainy afternoon in November 2009

I am walking on a sidewalk with one of the first homeless people that I've met on the streets. The sidewalk is tiny. I'm walking in front of him, without any particular direction to follow. At one point, still walking, nobody around us, I feel him stopping behind me. I stop too, turn in his direction and ask: "So, what's going on?" "Look", he replies. Between us there is just an empty space, a small portion of sidewalk. "What should I see? There is nothing here", I say looking at him and pointing with my hand at the ground. "You are crazy", he answers. Then he bends down, puts something in his pocket, and tells me: "Let's go now". I look again at the ground, seeing the same empty space as before. We keep on walking without a precise destination.



Source: Post-edited author's photo taken in Turin

The city is full of things. They lie in the street, they beep, they go around driven or not driven – who knows. You collect them and you fill your pockets. You drink from them, and sometimes you shit under them. You select in a trashcan those which are good and which are not. You assemble, de-assemble, mostly unconsciously. It just happens. Some of them open doors – the shelter, the train, the soup kitchen's breakfast. Some others close doors; you are still the owner of a car that you don't possess anymore and *boom*, the social worker tells you that you are not allowed to have your monthly subsidy. Things have the power of buying other things; to make you not freeze; to make you sad, happy, stressed, angry. You barter: A pack of

cigarettes for some money, a jacket for a mobile phone, and so on. You always barter. Look at how you are dressed! Things make you. Your worn out jacket, your all-holes skirt. Like as if you are carrying a cross, they stigmatize you.

Codes

Turin, someday, April 2010

I'm a volunteer. I do good stuff for poor people and I mean it, the idea in itself is good. The free distribution of food. I give butter, someone is approaching.

Homeless person: "Don't you have any other butter?"

Me: "No, I'm sorry"

Homeless person: "That one is expired"

Me: "..."

Homeless person: [Looking at the butter] "..."

Me: "Do you still want one?"

Homeless person: [Still looking at the butter] "Yes"



Source: Author's photo taken at the distribution of alimentary packages at the Sant'Antonio da Padova Church in Turin.

(Note that every single package is market with the label “Prodotto CE” – European Community Product – and that the expiry date was removed from each container – the scratches on the packages indicate the points where the indication was stripped away. The butter was expired but distributed anyway, implying a certain charitable discourse very common in approaching the “poor”: The poor as dispossessed, and hence willing to accept anything given to him/her (Lancione, 2014)).

The city is full of codes. They are in things, they carry them. They shape space and one’s self; they create the foundation for what you think you are and for what people think of you. “Universal social welfarism”, the-same-kind-of-help for everybody, it’s one kind of code. “Agape”, “Caritas”, and all the discourses surrounding the way help is given are other kinds of code. They are discourses on you, about you: A code is a device. After a while you learn how to play the game. But the game plays you too. It makes you move from one Church to another. It makes you accept out of date food. It tells you when you have to wake up, where you are supposed to sleep, how and what you are supposed to eat. You would like people to be more careful about what is important to you, but you don’t fit, and the discourse doesn’t change. What do you do? We need to challenge the codes. When codes are broken, a line of flight opens and you find another way of doing things. Space moulds, time unfolds, and new things happen. But that’s not easy. Codes rarely break alone; they need some kind of help. First, we need to reveal them, and then we need to re-imagine them, re-align. You, homeless fellow, taught me this: We need to be somehow poetic.

Poetry

It could be anywhere, anyhow, now

He brings me to the train station. We are in front of a traffic light now. He smells; I do too. “It’s green” I say, “let’s cross”.

“Nope”, he replies. “Red is better”.

The cars stop, and he starts to beg.



Source: Author's photo representing Turin's main train station.

The city is filled by poetry. Sometimes it's good, most of the time it's cold, harsh, and vicious. But you already know what I'm talking about. Because you live on the street. You merge with it. Poetry is what you don't expect. It is the unknown that emerges, on a daily basis. It's the thing that lets you down when you are almost there. It's the thing that boosts you up when you are fucking done. It's speed and it's asleep. It's a joke, it's light, it's the manhole where the white rabbit is fighting with rats (and you, among the latter). And the amazing thing is that you learn how to deal with it. That you, maybe unconsciously, know all about poetry. You know how to turn it to your advantage – not always, but most of time, yes-you-do. How to smile in order to get alms: That's a poetry-code-expressed through a smile, a coin, a label stating, "I am hungry". How to remember the entire bus schedules you need to remember in order to get to the shelter in time. How to play, how to speak, how to know when it's time to shut up and run away. You know how to get cheap alcohol, you organise for it. You receive a coat and you sell it on the black market. You move and hide, and then come up with the brilliant idea that makes you passing the night. Poetry is there, in the objects and the codes, and in being so entangled with them you learn how to deal with it. Poetry is bad, poetry is death. It is not the posh, bright, naive thing people think about. But it's also hope, it's how you cope with things and how you reveal capabilities, in doing so, that nobody has noticed.

Openings

The reader may say to me: “Objects, codes, poetry – it’s a lot of babble! But how am I supposed to *use* this?” Well... you are not – or not strictly. Talking about objects, codes, and poetry, is not a way of creating another *theory* of homelessness, but a way of better tracing the numerous components that make up how homelessness is. The aim is not to explain – to present one explanation, one model, one logical path to follow – but to trace bits and pieces, and then eventually (and provisionally) try to sew them together (Mol and Law, 1994). The outcome is not and cannot be, once again, *the* solution, or *the* perfect policy. Rather, the outcome is a set of propositions that can inspire both different ways of understanding homelessness and vagrancy and less normative policies to deal with them. As a way of concluding, and opening them up to your reflections, I’ll highlight three of them.

First, we need to re-write the discourse surrounding homeless and vagrant people. The exercise, for the reasons stated above, cannot be only terminological. In order words “it is crucial to construct habits of seeing and being that restore an oppositional value system affirming that one can live a life of dignity and integrity in the midst of poverty” (Hooks, 1994: 170). Talking and listening with a very open mind to homeless and vagrant people could be the first thing worth doing. Much can be learned if we will let them talk about their life, through grassroots initiatives or public debate initiated/hosted by local communities and councils.

Second, we need a politics of re-framing the service, germinating from and extending the previous point. To begin with, we need to state the obvious: The quality of the contexts in which homeless people have their relational encounters matter. This quality, however, should be measured not from pre-assumed discursive frameworks but from what we could call the *politics-of-experience*. And the politics-of-experiencing homelessness derives from homeless people encounters with the things and the codes at play in shelters, soup kitchens, drop-in centres and so on. The agency of objects needs to be taken fully into consideration; from the kind of food that gets distributed (which may make people feel abnormal and dissociated); to the way counselling services are provided (are they redundant and, therefore, stressful?); to the settings where services take place (are they respectful of difference, in terms of culture, religion, and personal views?); and so on. The micro-politics of the encounters between homeless people and the services is the arena of challenge (Amin, 2012). Services providers should be open to new, eclectic, ideas. A contamination is necessary: They need to open their doors to external parties, which may help in re-envisioning services from the standpoints enumerated in this text and beyond.

Third, the main challenge that homelessness theory and practice will have to face in the future is how to liberate the capacities and resources that homeless and vagrant people *do* possess. If one observes their life at the street level these capacities become clear; they organise themselves (cognitive abilities); produce artefacts and play (artistic abilities); make jokes and keep on living with very few means, and through deep suffering (coping abilities). They, most of all, are able to turn the street into different sets of opportunities that, although mostly in the informal economy, need to be fully acknowledged. Liberation starts from those things, from the design of low-level and bottom-up policies able to grasp the specificities of each individual. I don't know if homelessness can be ended. What I know is that it could be turned around: Understanding it better will illuminate policies that we still need to imagine, pathways that we could learn to walk differently.

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Active Inclusion – an Effective Strategy to Tackle Youth Homelessness?

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Introduction: Active Inclusion: a Framework for Policy – and Services?

The Active Inclusion paradigm emerged on the European policy agenda in 2005 during the UK's EU presidency, and has since then steadily established itself as a point of reference for strategies against poverty and exclusion. The core idea is simple: to be effective for those who are excluded from the labour market, such strategies need to combine adequate income support with access to quality services and inclusive labour markets (cf Council of the European Union, 2008; European Commission, 2008; European Parliament, 2009; European Commission, 2013). This is clearly a step forward from narrow approaches to activation that overlook the wider context of social problems and are prone to fail because of their simplistic assumptions. It accepts that policy interventions can come in various forms, which need to be properly aligned. Conceptually, the approach resembles the sociological debate about distinct logics of social policy and intervention that can be categorized into rights and regulation, income, ecological measures, and education (Loewenberg, 1977; Kaufmann, 2012). As obvious as the need to see these in perspective and in their mutual interaction may seem, the holistic approach of the active inclusion concept, however, is ambitious and challenging when it comes to implementation. As policy delivery has typically been fragmented with monothematic programmes running alongside each other in well fenced strongholds of competence and authority, boundaries between organizations need to be overcome, partnerships and networks developed. Furthermore, organizations and their staff have to change internally so that they can cooperate rather than compete. These challenges to collaboration have been discussed over past decades in governance and public management literature (see, for example, Geddes, 2005, pp.8-14; Loffler, 2009, p.215). Whilst many pilot programmes and experimental policy schemes have addressed these issues in recent years, they have not yet triggered substantial progress in practice. The European Commission recently stated:

“Member States have reported little progress in providing an integrated comprehensive strategy for active inclusion. Almost all are planning partial implementation, but have difficulties or challenges with integrated provision of active inclusion. These difficulties are often due to a lack of administrative capacity, or to the vertical and horizontal coordination of the three pillars” (2013, p.8).

A severe manifestation of social exclusion – and a tricky challenge for social policy that by its nature escapes single pillar approaches – is youth homelessness (Quilgars *et al*, 2008). It is often a result of numerous social problems and challenges accumulating to create a crisis where a comprehensive response can require elements as diverse as counselling and advice, housing, financial support, assistance with health issues, and access to education or employment. Others could be added, but these examples demonstrate the potentially large number of organizations that may need to be involved. Hence, to address youth homelessness the three strands of the active inclusion strategy need to be joined up, but access to quality, co-ordinated services is likely to be particularly important.

In an action research project, we examined local strategies to support young people with experience of homelessness or at risk of becoming homeless in four cities; Bologna, Hamburg, Malmö and Newcastle. In the course of the project, titled “Local Strategies for the Active Inclusion of Young People facing multiple disadvantages” (known as Com.In) and funded by the European Commission’s PROGRESS programme, social experiments were conducted that built on, and strengthened further, governance arrangements that were already considered to be effective. Instead of introducing completely new initiatives, the aim was to improve existing practices by more sensitively “bending” these practices through small but significant changes. A research objective was to find out if and how these changes could lead to enhanced or new forms of collaboration between relevant agencies.

From a broader range of findings, we concentrate here on two challenges to integrated agency responses that were particularly evident in the Newcastle and Hamburg experiments. Firstly, with regard to clients, those with the greatest needs – who face the greatest burden in managing their everyday lives – may get lost in complex support structures. Secondly, with regard to service providers, there is a need to set limits and boundaries to manage expectations and resources. These challenges do not negate the potential gains of a holistic approach, but they draw attention to the need for good design and governance of networks to avoid implementation failure and unintended paradoxical effects. What is described by policy-makers rather simplistically as a “one-stop-shop” (European Commission, 2013, p.9) will have to be sensitive to specificities of individual cases and circumstances.

Setting the Scene: Strategies to Combat Youth Homelessness in Newcastle and Hamburg

This is not the place to describe the specific welfare arrangements in the United Kingdom and in Germany; it should be sufficient to refer to the respective liberal and conservative-corporatist traditions to indicate the differences. In addition, similarities can be inferred from the Third Way philosophy of former heads of state Tony Blair and Gerhard Schroeder, who introduced workfare oriented welfare reforms in the late 1990s and early 2000s, based on an expressed wish to strike a balance between rights and responsibilities (Lewis, 2003). These reforms impacted on strategies against homelessness; those who do not comply with conditions linked to benefit take-up face sanctions, which may cause additional stress for those who already have difficulties coping with labour market requirements. Furthermore, young homeless people are at risk of falling into gaps between services for children and adults. Services for young people are often provided in an ambiguous space between the two distinct systems of youth and adult welfare that have their own rules, institutions and resources and have developed distinct networks of practice. Whilst young adults have begun to receive attention from policy makers as a distinct group, legal age is still a key gatekeeper to rights, services and resources. There is a group of young people who fail to make the transition from childhood to adulthood and are at risk of experiencing exclusion.

Welfare arrangements to address homelessness and youth homelessness in Hamburg

In Germany, a key point of reference for services for homeless people are articles 67-69 of the Social Security Code Ch.XII. The German constitution states that municipalities are responsible for providing services of general interest and most cities have established a system for homelessness prevention. There are usually central offices for coordinating the services, which are provided by non-governmental organizations (NGOs) in the majority of cases. Key elements of the system are the prevention of eviction and the provision of public housing, advice and medical treatment.

The city of Hamburg coordinates the various elements of prevention and provision through coordinating offices for housing need (“Bezirkliche Fachstelle für Wohnungsnotfälle”) (BFW) in each of its seven districts.¹ As ‘one stop shops’, these offices act as an interface between the relevant departments (social services, housing, public order); they also pool the available support in the case of emergency

¹ Hamburg is, as Berlin and Bremen, a ‘city-state’, combining municipal and state level (Bundesland) competences. Some municipal competences and tasks are delegated to the seven districts (Bezirke) that have their own public administration (Bezirksverwaltung).

housing and social assistance according to Art. 67 Social Security Code, Ch. XII. The services are, however, not provided by the BFW itself but commissioned from a range of welfare organizations.

A second element of Hamburg's approach to preventing homelessness is a cooperation agreement between the city administration and twelve housing associations. The aim of this agreement is to save on expensive special shelters and to provide an entry point to the mainstream housing market. The budget that could be saved is given to these housing associations, so that a win-win situation is achieved. The agreement is reviewed and renewed every second year.

The responsibility for the implementation of this agreement lies with the coordinating offices for housing need. Their job is not only to help homeless people or households find an apartment, but also to work pro-actively to prevent evictions. To receive support, a certificate of urgency is needed, which is given to homeless people living on the street or in a shelter by the BFW. On the basis of this certificate, three levels of housing need are differentiated. There are a wide range of criteria used to determine whether a homeless household is classified as without further difficulties and able to solve upcoming problems independently (Level 1); with social problems and debts, able to solve upcoming problems on their own but needing financial safeguards for the tenancy (Level 2); or with social problems and debts, unable to solve upcoming problems independently and needing extra support from an NGO in addition to a financial safeguard for the tenancy (Level 3).

To tackle the specific challenges of youth homelessness, the German youth welfare system was extended in 1990 and provides housing support services to young people up to the age of 21 (Art. 41 Social Security Code, Ch. VIII; in extreme cases, services are provided up to the age of 27), working in parallel with adult services. In the city of Hamburg, a specific housing project for young male adults was established in 2009 (19 bedspaces) and a second one (20 bedspaces) is planned. There are also projects to help former residents of supported youth accommodation find an apartment and to provide assistance in their first move into independent living. In addition, young adults can also access accommodation offered under the framework contract mentioned above.

Welfare arrangements to address homelessness and youth homelessness in Newcastle

In the United Kingdom, since the passing of the 1977 Housing (Homeless Persons) Act, local authorities have had responsibility for assessing people who approach them as homeless and, in some circumstances, securing housing for them. A further key policy development was the 2002 Homelessness Act which requires local authorities to work strategically and in partnership with other agencies to

prevent and tackle homelessness. In 2003, the introduction of the *Supporting People* programme transferred money to local authorities to meet the housing related support costs of homeless people and other groups. This money had previously been paid by central government directly to NGOs. The change enabled authorities to commission housing and support services from NGOs and others in line with their strategic aims.

Newcastle City Council has commissioned services from Supporting People funds in order to meet the housing and related support needs of vulnerable people. For example, it has created a homelessness prevention fund, which can assist with a wide variety of needs such as providing furniture and paying transport costs to re-connect people to their area of origin. It also funds several hundred bedspaces of supported accommodation through the Supporting People programme. There has been recognition in the United Kingdom that young adults can fall through a gap in the provision of services, particularly in the area of homelessness. The 1977 Housing (Homeless Persons) Act identified certain groups of homeless people as being 'in priority need' for housing and the Homelessness (Priority Need for Accommodation) (England) Order 2002 added all 16- and 17-year-olds to this list: an acknowledgement that provision for them had previously been inadequate. For those young people who are 'looked after' by the local authority in place of their own family (usually referred to as being 'in care'), it has been recognised for some time that there can be major difficulties at the point where they cease to be regarded as a child and move towards independent living (at which point they begin to be referred to as a care leaver). The Children (Leaving Care) Act 2000 introduced a number of measures to strengthen the support provided to young people in this period of transition. To ensure that there was no financial incentive for local authorities to discharge them from care at an early age, 16- and 17-year-old care leavers lost entitlement to almost all forms of state financial benefits – instead local authorities were made responsible for meeting their financial needs from ring-fenced funds. In addition, further responsibilities were created for local authorities towards young people in their care up until they were 18: to provide them with (or maintain them in) suitable accommodation, and to give other prescribed forms of support. These new responsibilities meant that the subsequent change to the homelessness legislation, placing 16- and 17-year-olds into the priority need category, did not affect young people in care (although homeless care leavers aged 18-21 benefited from being placed into the priority need category under the 2002 Amendment).

Service Coordination in Practice: Acting Across Organizational and Professional Boundaries

In addition to the risk (noted above) of falling between children's and adults' services, the large number of agencies that young homeless people are often required to keep in touch with can create additional problems. Coordinating services can prevent such difficulties. At policy level, frameworks can be aligned to avoid gaps or contradictions. Commissioning bodies can promote coordination between implementing organizations through respective contractual provisions. Service providers can develop work flows that ensure transparency and adequate information management. And finally, at street level, officers can proactively promote informal cooperation with colleagues and the service user. Clearly, these levels intertwine: It will be easier for a street worker to find adequate support if housing and other services have the capacity to cooperate and if he/she can refer to supportive legislation rather than being dependent on organizational goodwill.

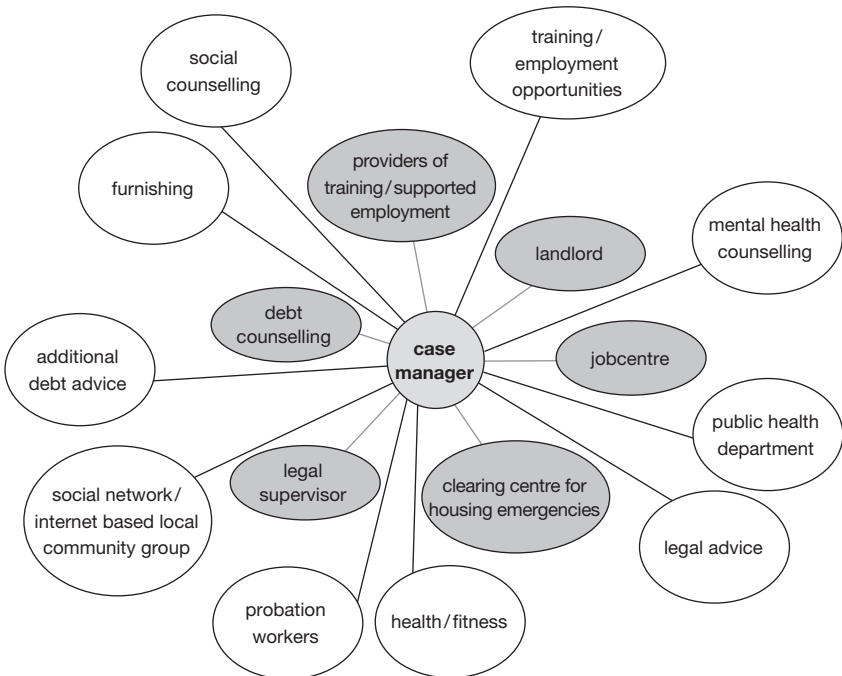
There are numerous approaches to fostering collaboration at all these levels and between them, whether formal (such as committees, boards, contracts and protocols) or informal, systematic and spontaneous. In our research project, we focused on two common models operating at implementation level: network management and case management. Network management is about facilitating communication between organizations, which often means "promoting the mutual adjustment of the behaviour of actors with diverse objectives and ambitions with regard to tackling problems within a given framework of interorganizational relations" (Kickert and Koppenjan, 1999, p.44). It can include activating and arranging interaction, but also conflict mediation and, if it is done in a strategic way, "tinkering" with relations (*ibid*, p.46). Case management was originally developed as a response to deinstitutionalization, community-orientation and personalization of care services. Relevant services and resources are identified and coordinated around a person who is handled as a "case"; central to this is a case worker, working together with the person to develop an adequate and effective support network. As a range of contacts and organizations will be involved, this includes brokering and coordination between them.

Irrespective of the specific form of collaboration, a number of challenges have to be tackled. These include the multiple management styles, work processes and cultures of the organizations involved, blurred/unclear roles and relationships (personal and professional) between actors, unclear responsibilities and "dilemmas of multiple accountabilities", and varied perceptions of what constitutes a problem and what needs to be done (Williams 2012, p.70). The case management model is applied by some of the NGOs in Hamburg that work with households who are classified as level 3 (see above). The case manager coordinates services (and the

respective providers) around the person (“case”) he/she works with to avoid double-consulting and inappropriate services. Case management has been introduced only recently in this area of work, where previous approaches tended to produce rather fragmented and disorganized services. In the specific context we reviewed, it is used when renting property from a housing provider and then subletting it to a household through a temporary rent contract for one year. In addition to the sublet, the case worker and the tenant develop together a support plan, which includes all the targets that the tenant needs to achieve for a successful tenancy. The conversion to a regular tenancy contract after 12 months depends on the person fulfilling all the conditions of cooperation with the NGO, which are (for example) making rental payments and coping with the tenancy conditions.

The case management focuses primarily on the participant’s ability to cope with living independently, care for the apartment and have a stable financial situation to pay the rent regularly. This focus is mirrored in the case management network, as illustrated in Figure 1. It concentrates on the areas of employment, debt and housing. Areas that are not (yet) involved include informal contacts, family or friends, culture, and other activities that are only indirectly linked to managing the flat and finances.

Figure 1: Case Management Network²



² This diagram was kindly provided by Ines Moers, Hamburg.

In Newcastle, a range of innovative tools for coordinating services to tackle housing need among young adults have been developed by the local authority (Harding, 2004). There are examples of both case management and network management. One example of case management is The Gateway; a common allocations system to temporary, supported housing. Referrals to The Gateway can be made by a range of agencies that may work with single homeless people such as probation, mental health services and addiction services. On making a referral, the agency will be asked to supply information about their client; this information is used by the local authority to prioritise applicants. Supported housing providers are expected to offer vacancies to those with the highest level of priority. Both case management and network management are evident in the creation and implementation of a 'Prevention from Evictions' Protocol in the city. This protocol was created by housing providers and other agencies who together decided the appropriate point at which it was acceptable to make an eviction, and what support could be put in place for a tenant whose actions placed her/him at risk of eviction. There is now regular liaison between housing providers and the local authority's homeless section to discuss the cases of people who are at risk of eviction.

These examples of case and network management, together with specific forms of support for young people, which are provided through a Young People's Service, have ensured that there are positive outcomes for young homeless people in Newcastle in comparison to similar UK cities. However, a recent study in the North East region (Harding *et al*, 2011) confirmed previous findings that care leavers are over-represented in studies of homeless people and reflected concerns of policy makers and professionals that this group often face difficulties in making the transition from children's to adults' services. In addition, a 2010 EUROCIITIES review expressed concern that Newcastle City Council's largely effective homeless services were not addressing the needs of some of the homeless people who faced the most severe deprivation and exclusion. The action research project discussed below focused on care leavers with the most problematic circumstances.

Testing the Limits: Challenges to Participation and Cooperation at Personal and Organizational Levels

The experimentation that was undertaken in Hamburg and Newcastle, the nature of which is discussed further below, faced difficulties linked both to the characteristics of individuals and those of organizations. Considering first the individuals, any social programme will inevitably find greater ease in meeting the needs of some clients than others. For example, in the United Kingdom, the Labour governments of 1997-2010 achieved early success in reducing the numbers sleeping rough before adopting some punitive measures towards those more intransigent rough

sleepers who did not respond to the initial attempts to encourage them to take places in temporary accommodation (Cloke *et al*, 2010). The term multiple exclusion homelessness (MEH) has come into use for those homeless people who seem to face particularly entrenched difficulties (Dwyer and Somerville, 2011) and are most difficult to engage with services.

The same pattern emerged in Hamburg and Newcastle, where the action research project tried to expand and develop the service network. We found that improvements were achieved for some participants, but not for all. Those who benefitted more were the cases that were described by professionals as comparatively unproblematic, with less complex needs and a more promising outlook from the beginning. In Hamburg, the experimentation focused on the incorporation of informal contacts and resources that go beyond basic needs (such as services providing leisure activities) into the case management network. It found, however, that young people with more serious problems derived little benefit from an extended service network and new opportunities. In fact, one group of clients already had enough resources and possibilities to find and maintain meaningful activities on their own, and could find and approach agencies themselves, so had no need for the extra services. However, of much greater concern were those for whom the sheer struggle of securing the tenancy as well as their daily subsistence left no room for any additional engagement related to culture, sports, or other activities. They had barely any resources to manage their daily life due to problems such as debt and mental health difficulties and the case manager had to concentrate on finding and providing support to meet these basic needs. The difficulties were aggravated when potentially helpful services refused to get involved because of the person's problematic track record or previous experience with the service.

Two cases can illustrate this division: Person A had been co-operating positively with services, keeping the conditions of her tenancy (appointments with the team, house rules, rental payments, etc.) and accepting the help offered. She had begun a job-training scheme, started to take care of her payments right away and contacted the team about the changes. She developed a good and stable network of counselling, family and friends and did not need the offers from additional services. Person B, in contrast, had just moved into his apartment when the project started and was neither able to keep to appointments with the case manager nor the conditions of his rental contract in general. Even after several reminders he did not pay his rent and electricity bills. This was due to financial sanctions from the Jobcentre, which were announced after he missed several appointments there. In addition, the rental company continuously received noise complaints from his neighbours. Even though the case manager approached the Jobcentre, and asked family and friends for help to prevent the sanctions, B declined almost all offers of support. These difficulties were aggravated because the youth advice centre that was asked to help declined to work with him

because he had had so many different options and supporting institutions in the past, which had not proved effective. The problems with noise and his unwillingness to take the help offered led to the cancellation of his rental contract. It was clear that he was unable to cope with the requirements of daily life, meaning that managing a tenancy was too big a challenge for him. Hence, the case manager needed to concentrate on the housing situation, whilst additional daytime activities came second in the experiment and were of less importance.

In Newcastle, the project encountered similar limitations. It looked for new ways to bridge the work of housing and social services staff in respect of young people in local authority care who were approaching the transition to independent housing. It found that joint working across children's and adults' services proved highly effective for some young people but not for the most chaotic, particularly those who had had contact with the criminal justice system. This is also best reflected by two cases.

Person C was a young man who had been in the care system for many years and had a history of failure in different housing situations, in part due to his behavioural issues, emotional immaturity, and vulnerability. When his social worker began to work with a member of staff of the homelessness section, there was an immediate difference: the homelessness officer was able to negotiate more effectively with housing providers and, on one occasion, ensured there was an investigation into (false) allegations made about C's behaviour. The social worker spoke about the homelessness officer 'fighting C's corner' and the 'extra clout' she brought to the case. Her constant presence at case management meetings was invaluable. Eventually the combined efforts of the social worker and the homelessness officer led to C being diagnosed with autism (many had assumed that he had bipolar disorder) and being found accommodation that was suitable for somebody with this condition. At the time of the evaluation, C was receiving appropriate support in this accommodation and his social worker felt more optimistic for his future, while acknowledging that he would always need some kind of support to live independently and had yet to develop many of the skills needed to do so.

There was a contrasting outcome in the case of Person D. He had been in care since he was seven years old and his behaviour had been considered dangerous from an early age: he had been in a detention centre for young offenders on a number of occasions and had great difficulty functioning in the community. His social worker began to work with a homelessness officer at the point where D (now a young adult) was about to be released from a Young Offender's Institution. The social worker was concerned about the impact on D if he was to be placed in accommodation with older adults, while the homelessness officer was concerned about his impact on others if he was found a place in accommodation with other young people. So the housing department paid for an emergency bed with Tyneside Foyer, a local

supported housing provider with experience of accommodating young people who are difficult to engage. Unfortunately, D visited the accommodation but never moved in and was subsequently recalled to custody.

So the second type of problem that arose in both Hamburg and Newcastle was difficulties with network and case management that arose from an organization's key purpose and modus operandi and its relationship to partners in the service network. Collaboration in a network can cause confusion and mistrust if it is not properly designed. Collaboration can also fail when a partner for whatever reason is not sufficiently flexible to adjust to a more cooperative mode of working. Such problems were experienced in Hamburg when the case manager working for an NGO tested whether she could take on a more central role for five cases by expanding the service network, as discussed above. In seeking to develop this role, she sought to formalize some informal contacts. This attempt created a role conflict – other organizations, as well as the clients, began to attribute a central role to the NGO that it could not fulfil in the long run. In addition, it was seen by some as an effort by the NGO to improve its position on the service market rather than as an attempt to strengthen the network around a case. Furthermore, it contradicted the well-elaborated concept of clearly defined monothematic experts in the case management network. The conclusion reached in Hamburg was not that closer coordination was unnecessary, but that other forms of coordination (committees, protocols etc.) may be more appropriate because they avoid the differential positioning of one organization over others.

In Newcastle, a peer review team from Hamburg recommended the creation of a panel system to support and monitor the transition of the most problematic young people from care to independent housing. The panels were to take a competency rather than age-based approach to managing the transition to independent living for a small number of care leavers with complex needs. However, the panels proved impossible to organise because housing and social services staff felt that attending them would be too great a time commitment alongside their other statutory duties. Instead of panels, a less time consuming method of cooperation was eventually found. This involved adapting the care plan – a document that is legally required to be created and updated from around the time of the young person's sixteenth birthday – to include a greater housing element. An assessment, made by the young person and their social worker, was introduced to determine whether they should be regarded as green, amber or red, with green representing the highest level of readiness for independent living and red the lowest level. Funding has now been re-allocated by Newcastle City Council and one of its partner organizations, and additional resources obtained from a charitable source, in order to fund two workers whose task will be exclusively to support those young people who are assessed as 'red' and need most help to make the transition from care to independent living. So

a means has been found of supporting the most difficult young people through the interface between adult and children's services, and between housing and social services, without increasing the heavy burden placed on staff by statutory requirements. The project finished before this approach could be evaluated, but professionals and young people alike spoke positively about its likely impact.

Discussion: Going Beyond Simplistic Ideas of Coordination

A starting point of the "active inclusion" concept is that one-dimensional approaches will not suffice when people are experiencing multiple disadvantages. It is widely accepted that to effectively tackle social exclusion, organizations that specialise in one area – be it social services, housing or other – need to align their activities and work together, not only at a strategic level, but also in the day to day relationships of 'street level' workers. At a time when austerity measures mean that two elements of the active inclusion paradigm – inclusive labour markets and adequate income support – are under threat, there is a particularly acute need for the third element, i.e. the provision of services, to be effective. The complex nature of youth homelessness, and the danger that young people will fall through gaps between services for children and those for adults, mean that this is an area where it is particularly important for agencies to understand the nature and importance of effective collaborative working.

However, creating a "one-stop-shop" as proposed by the European Commission is more complex than it may seem. A project or a system to support a young person on his or her pathway to independent living – which may need to combine elements as complex as strengthening self-awareness, building social competencies, and eventually creating employability – is always embedded in the complex and broad landscape of welfare provision, including social security and other services. In addition, family, friends and other social contacts are important resources to be acknowledged in a personalised approach to inclusion. While the complexity of the task means that working across organizational boundaries is essential, this is not yet common practice and is often difficult to achieve.

The examples from Hamburg and Newcastle demonstrate the difficulties of providing effective, co-ordinated services when the circumstances of clients are difficult and their problems complex. They also show that a lack of a clear mandate or legitimization, and shortage of resources to meet other fundamental responsibilities, can be barriers to creating effective networks. However, the projects also highlighted the ability of small and large organizations to adapt in order to work more collaboratively and effectively. In Hamburg, despite difficulties with the process of creating a formally expanded case management network, informal

contacts and exchange still offered the opportunity to provide greater support to clients to access other services. In Newcastle, the barriers created by the responsibilities of individual parts of the local authority were being overcome by positive relationships and an innovative method of 'bending' routines to create more effective co-operation.

In both cases, personal commitment and creativity by individual officers who went beyond the core remits of their job descriptions to explore new ways of working drove the search for better services. Their enthusiasm and impetus were matched by flexibility on the part of framework setters so that change could be triggered and active inclusion promoted. So these experiments suggest that commitment of staff, and responsiveness to change on the part of organizations, are two key factors that are required to produce effective, co-ordinated services that can prevent and tackle social exclusion. Hence, to avoid implementation failure, any active inclusion strategy and framework must include designing services and developing networks in a manner that promotes and supports such creative and flexible methods of working.

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Profiling Homelessness:
Serbia and Croatia



Part D

Homelessness and Housing Exclusion in Serbia

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› **Abstract_** *This paper aims to illustrate dynamic interaction between individual characteristics/actions and structural/ institutional change that frame routes into and exits from homelessness in Serbia, with particular focus on main domains of housing exclusion according to the ETHOS typology. The paper is informed by recently completed research consisting of questionnaires and focus groups with people accommodated in shelters for homeless people in the three biggest cities in Serbia. The main research findings show that respondents are poorly covered by social services although exposed to the risk of financial poverty due to high unemployment. Poverty exposes them to the risk of housing exclusion because of unaffordable rents in the completely unregulated private rental sector, and because access to social housing has been dramatically reduced as a result of housing privatization. While the new social housing sector (as safety net) has been slowly evolving it is inadequate to meet the real housing needs. This situation, combined with poor information about social housing options, discourages people at risk of housing exclusion to claim their right to housing. Further, due to a rather high institutional tolerance towards illegal construction the roofless situation is a less significant factor of housing exclusion than expected.*

› **Key words_** *housing exclusion, shelter use, homelessness in Serbia*

Introduction

This paper conceptualises homelessness as a multidimensional phenomenon characterized by: The absence of adequate and or secure housing, following the ETHOS definition (Busch-Geertsema *et al*, 2010); exclusion from the labour market; and difficulties in accessing, and/or stigmatization, in relation to accessing social services, and exclusion from the community or reciprocal relationships, including family and other social networks (Hutchinson, 2002, p.172; Mandić, 2004). Both individual and structural factors, and their dynamic interaction are relevant to understanding the causes of homelessness (Avramov, 1997 p.80; Marpsat, 2005). Depending on individual variations, or variations during a person's life cycle, and on structural risks, homelessness is thus understood as a differentiated process in terms of the routes into homelessness and the exit patterns in different population groups (especially by age, sex, ethnicity, etc.), and the duration of homelessness (temporary, cyclical – recurring, and chronic) (Culhane and Metraux, 2008).

This paper aims to illustrate the basic features of homeless people in Serbia, the different routes into, and possible exit routes out of homelessness, with particular attention paid to the role of housing. The analysis is primarily informed by research conducted in the shelters for adult and elderly people in the three biggest cities in Serbia (Belgrade, Novi Sad and Nis) in late 2011 and early 2012. Therefore, the research data are restricted to homeless people in temporary accommodation. The three key analytical questions are: Firstly, what is the relevance of housing exclusion to the routes of entry into the shelter; second, what are the other most common reasons for their entry; and third, to what extent is social housing perceived as a route out of the shelter, alone or in combination with other services. In order to clarify relevant structural characteristics of the Serbian society, a brief contextual analysis is presented next. This is followed by details of the research methodology employed and empirical data analysis. In the concluding part, empirical findings are summarized and discussed.

Social and Housing Context of Homelessness in Serbia

Serbia only entered the first phase of institutional transition towards a market society after 2000, and this transition has been slowed down by the global economic crisis. Huge social costs, related not only to economic restructuring but also to economic stagnation, have significantly increased the risk of homelessness, particularly in the context of the almost complete withdrawal of the state from housing provision. High unemployment rates, job insecurity and decreasing income, have left considerable sections of the population facing severe housing affordability problems. In the following sections, the key structural aspects

important for understanding homelessness as an outcome of social and housing exclusion in Serbia are briefly outlined. This section also provides information about how the legal framework regulates access to housing, as well as how the system of social protection operates.

Housing and social exclusion

In recent history, the concept of social housing for those with low income and socially vulnerable was largely disregarded in Serbia. During the socialist period, the issues of poverty, poor housing, and homelessness were largely ignored and the housing system did not manage to provide public housing for all households who required it due to limited economic resources and low efficiency. Consequently, the lower income groups were left to find individual solutions and relied on either building or renting self-built, often illegal dwellings. Therefore, illegal construction emerged as an unofficial social housing policy, tolerated as inevitable side effect of the failure of the official housing system (Petrović, 2001; 2004). After 2000, housing policy has been slowly emerging at political agenda, but legislation governing the sphere of social support in housing or social housing development is lagging behind. As a result of housing privatization, Serbia has become a country of homeowners. According to the census data for 2002, 83 percent of households were homeowners, only 2 percent rent publicly owned flats (down from 23 percent in 1991), some 4 percent rent privately owned flats, with nearly 6 percent of households sharing flats with their relatives. There is no regulation of rents in the private rental sector, resulting in an affordability problem in rental housing, particularly as almost 50 percent of not privatized public rental housing are occupied by tenants who enjoy a permanent right to use the flats without any eligibility testing or other beneficiary criteria, which means that these flats are almost inaccessible to new households.

Some estimates state that almost 20 percent of the housing stock (500 000 flats) were built illegally, nearly half of which were constructed after 1990 (Petrović, 2004; ECE 2006). It might be argued that widespread illegal housing and high institutional tolerance towards it has lessened the amount of homelessness in both living rough and inadequate (and even insecure) housing, except in cases of extremely marginalized groups. The risk of housing and social exclusion is highest in cases of illegal construction that does not meet legal requirements because the houses were built with inadequate materials and/or on public land not envisaged for housing. Furthermore, of the 593 registered Roma settlements in Serbia (with roughly 250 000 inhabitants) 34.6 percent are partly and 35.5 percent are completely illegal, while 43 percent are slums (Jakšić and Bašić, 2005, p.32). Due to social exclusion, Roma in Serbia often live in segregated neighbourhoods – settlements, mainly on the outskirts of cities – with inadequate infrastructure and substandard living conditions in general.

In addition to the Roma, refugees are a further vulnerable group in need of social support in housing. Since the wars in the 1990s, the Republic of Serbia is a country with the largest population of refugees and internally displaced persons in Europe, and one of the countries that hosts persons with the lengthiest refugee status in the world. In 2012 there were 66 408 persons with refugee status and 210 148 displaced persons from Kosovo (Commissariat for Refugees, 2012). They have a particularly high unemployment rate and housing difficulties (Group 484, 2009). In addition, it is estimated that more than two-thirds of the refugees who have acquired citizenship are without secure housing, and a proportion of them, despite the decisions to close the collective centres, still live in 42 unofficial centres (Cvejić and Babović, 2008).¹ The refugee population in Serbia face particular housing difficulties as 61 percent live in the unregulated private sector or with friends/relatives; while 70 percent of those who own the houses/flats live in semi-constructed housing (the construction process has not been finished). Also, the majority of refugees are still having trouble accessing their housing property/rights in their countries of origin (either because their housing was destroyed in war, or because they are denied access or the right to buy/privatise their flats, under the same conditions as the majority of the population in their countries of origin).

With enduring economic hardships, housing affordability became an increasing problem for the general population, particularly of newly formed, middle or low-income households. Since the 1990s, the average housing price to income ratio has been constantly high, exceeding 15 for newly built flats, and 11 in the second hand housing market, while rent (median for private rental sector) to income² ratio exceeds 0.5 in big cities. Due to the rise in utility costs and housing mortgages, 6.6 percent households face housing expenditures that exceed 50 percent of their income, which is the case for one in every three households in the two lowest income deciles (RSO, 2010). According to the Household Budget Survey in 2007, 17 percent of households were in arrears in paying housing costs (RSO, 2007).

This widespread household poverty is independent of tenure status. Although the majority of poor people are homeowners, the size and quality of their flats is lower than average, and they lack the funds for housing maintenance. In 2007, in comparison to households above the poverty line, poor households lived more often in spaces not suitable for housing, and in housing built before 1970 with poor sanitation facilities (RSO, 2007).

¹ According to the Commissariat for Refugees, there is an urgent need to provide housing for 11 500 most vulnerable refugee families in collective centers and private accommodation.

² Income is taken as average for the population in general. The calculation is based on the assumption that the 'grey' economy increases the average household income for 30 percent.

The poor housing conditions coincide with other dimensions of material deprivation as 80 percent of households with income insufficient for basic food and/or elementary clothing lived in very poor housing conditions, in comparison to 10 percent of all households (Government of The Republic of Serbia (GRS), 2009). The actual situation is even worse bearing in mind that Household Consumption Survey data does not include Roma and others living in illegal settlements, homeless people and those residing in collective centres. Renting is rare option for poor people, as both sectors (public and private), are inaccessible to them. Due to high segmentation of private rental market, there is a higher than average share of renters within the middle and highest deciles and the smallest share among deciles with lowest income (GRS, 2009). Since 2010, there is a downward trend in the share of private rentals among lower income households, which reflects their higher risk of homelessness, either in manifest or latent (living with relatives in overcrowding conditions) form.

Because of housing affordability problems, a widespread strategy for young and/or divorced lower income people is to live with their extended families. Thus, according to census data (2002), 20.5 percent of households are composed of extended families, while 30 percent of one-parent families live in extended families (Petrović, 2009). Such strategies generally reduce the risks of homelessness, but contribute to the overcrowding in flats that are generally modest in size in cities. Consequently, over 15 per cent of the housing stock (380 000 flats) is overcrowded i.e. there is less than 10 sq. m space per person, which also might be considered as a hidden form of homelessness, particularly when it is combined with inadequate infrastructure.

Finally, Serbian society is among the oldest in the Europe, which usually means an increased demand for social housing or social support, as aged persons have fewer resources and increasing need for social care within the context of shrinking households' size linked to 'patchwork' families of modern societies. Although slower family transformation hides these problems in Serbia, one in every three non-family households consist of aged persons living alone.

Residual regulation and social protection for people at risk of homelessness

Serbia's candidate status for accession to the EU obliged it to align its strategic goals with the Europe 2020 Strategy. Currently, there is no reliable data on the number of homeless people in Serbia. As illustrated in the previous section, this is largely due to the existing methodology of collecting data on households and other statistical records. In 2011, for the first time, the Census included shelters within the category of collective housing unit, thus enabling coverage of the shelter users as well, although no separate data about them are available. The criteria of minimum "adequate standards" in housing are not clearly defined, which considerably narrows the definition of homelessness by excluding many groups that live in inad-

equates and insecure housing. The terms “primary” homeless (those living rough) and “secondary homeless” (those who live in spaces inhabited out of necessity, such as sheds, basements, cars, etc.) are often used, and attests to the narrow understanding of homelessness. Those living rough are often arrested for “vagrancy” related offences, primarily in relation to the disruption of public order and begging.³ The problem of homelessness has not been sufficiently present in political discourses or covered by media, except during the winter when daily newspapers report on people who are freezing on the street.

The existing legal framework in Serbia depicts inconsistent and ambivalent interpretation of homelessness and lacks an understanding of the context, dynamics, as well as structural causes of homelessness. Although the Constitution of Serbia guarantees human and minority rights recognized by international law, the right to housing is not explicitly specified (GRS, 2006). Under the existing Law on Housing (1992) the State should create a social safety net in housing for vulnerable groups, while the direct provision responsibility is transferred to the local level. Various programs of social housing at the local level, mainly in large cities, are insufficient to meet needs.⁴

Following the key event that placed homelessness on the policy agenda in Europe – the formulation of a joint strategy for the eradication of social exclusion, initiated at the Lisbon summit and developed further through national action plans (Mandić, 2004, p.4)- the Serbian government created a National Strategy for Poverty Reduction in 2003. For the first time, one strategic document explicitly defined homelessness as the most extreme form of social exclusion and called for a new housing policy in order to make housing more accessible, and to define minimum housing standards. However, a Law on Social Housing, adopted in 2009, failed to explicitly mention homelessness as an issue, and left out homeless people when defining a list of especially vulnerable groups who should be considered a priority in all social housing programs (GRS, 2009).

In early 2012, progress was made with the adoption of a National Strategy of Social Housing which: Places an obligation on the government to reduce and eradicate homelessness, suggests embracing an extensive definition, such as the one contained in ETHOS classification, and carrying out a set of measures to

³ Only in the capital city in year 2011, 2237 persons were arrested and faced charges, out of which 908 persons were convicted of this offence and police register shows similar numbers for the whole last decade.

⁴ Since 2003 the city government of Belgrade has funded the program of building 1 100 non-profit flats annually but effective construction is much smaller, and only 15 percent of these flats are intended for rent under favourable conditions to the vulnerable categories. Additional problem lies in the inconsistency of distribution criteria that favour education and employment over social deprivation (Petrović, 2013).

enhance the capacities of institutions to combat homelessness and to increase the accommodation available for homeless people (GRS, 2012). Following the Strategy, an Action Plan was adopted, but instead of developing measures further, the document offered an even less detailed understanding of homelessness, and completely left out an increase of accommodation capacities, one of the two measures stated in the Strategy.

In 2011, the amendments to Law on Residence allowed persons without a permanent place of residence to acquire ID cards. This was previously impossible, and placed enormous difficulties on homeless people in accessing their entitlements (health and social care, etc.) as citizens of Serbia. However, the amendments provide that in such cases the residence is registered as the address of the local centre for social care; necessary by-laws are still pending – local centres, for now, decline to apply the Law.

The Law on Social Care defines the social care system in Serbia (GRS, 2011). Faced with rapidly increasing needs, produced by the post-command economy socio-economic transformation process, the social care system does not provide a satisfactory response. The effective amount of social assistance is not sufficient to cover the costs of housing and other basic necessities; obtaining the assistance takes a very long time, is administratively complex; and many of those in need of social assistance are not adequately informed of their rights.

The Law on Social Care does not recognize homeless people as an explicit vulnerable group. The only service specifically targeting homeless people is a shelter service, reduced almost exclusively to the provision of emergency accommodation in extreme cases of homelessness. The Law, however, delegates jurisdiction to local government, thus derogating the weight of the responsibility and failing to assign financial responsibility for ending-homelessness-policies to the state. To-date, the shelter service has been provided only by social welfare institutions at the local level. The plurality of state funded service providers foreseen by the Law does not yet exist; therefore, the role that the third sector could possibly have in provision of services for the homeless is completely neglected.

The length of stay in the shelters varies from 30 days in most cities and municipalities, to up to 6 months in the capital. Currently in Serbia (with a population of a little over 7.2m people) there are shelters in 12 cities / municipalities. The capacity of these shelters ranges from 4 persons to 105 in the capital city, which is insufficient, especially in winter when all shelters are forced to operate beyond their capacity, further lowering the standard of service provision. Apart from shelters in Belgrade and Novi Sad, the others were established primarily after 2004,

through projects funded by donations. Following the termination of the projects, shelters often do not get an extension of funding through local self-government budgets and get closed down.

The fact that little effort is being directed to empowerment of shelter users and ensuring successful exits from the homelessness, together with insufficient prevention efforts, cause a great number of returns of homelessness.⁵ Activities in supporting shelter users are primarily directed to facilitating their admission to homes for Retired/Elderly/Persons with disabilities, or simple return of the shelter user to their family without any professional floating support. Furthermore, there is no uniform system of records even for the existing services, let alone the number of beneficiaries and provided services, which further complicates both monitoring and evaluation of service quality.

Empirical Research Data

Methodological notes

In a context where conceptual frameworks and the methodological experience of researching homelessness is limited (Šikić-Mićanović, 2010, p.48), this first attempt to study people in shelters for adults and older people in Serbia is primarily explorative and descriptive. The questionnaire research was conducted in winter 2011/2012 (from December to February) in shelters in the three biggest cities in Serbia. The total number of people who were interviewed was 136 (in Belgrade 110, Novi Sad 23, Nis 3), while data about the others who were in the shelter at time of the research (173 in total) were collected through the records available in the shelters.⁶ For a deeper insight into the role of housing as a cause of entering into shelter, as well as an expected route for exiting out if it, two focus groups with people accommodated in Belgrade's shelter were organized.

⁵ In Belgrade almost 30 percent of recorded receptions per year are people who have used shelter service in previous years.

⁶ Basic demographic data were collected from the records to shorten the time required for the interviews, while some data were requested from both sources to explore possible deviations. The most significant difference concerns the perception of the type of health problems: While professional workers in the shelters registered 68.6 percent of the beneficiaries who suffer from mental health problems only 35.6 percent of the beneficiaries confirm that, most probably due to strong stigmatization of people with mental illness existing in Serbia.

Average beneficiary profile

The average shelter user is a male aged between 51 and 65, with a low level of education, who has no income, has never been married and whose social network is weak and exhausted. Nevertheless, some of the findings contradict the existing stereotype on homeless people – this average respondent has worked his whole life, but lost his job in processes of economic restructuring; he is not young enough to be competitive in the market, but not old enough to retire; so he is now unemployed for more than 5 years and has abandoned every hope of finding a job and being able to support himself. Apart from the average profile, it is important to stress that homelessness affects all social groups in Serbia – a third of all shelter users are women and one in every nine persons in shelter is younger than 35. The study also registered very low coverage with social services among shelter users – as many as two-thirds never used social care services (soup kitchen, social assistance, etc.) prior to arriving to shelter, which illustrates the failure of social care system to act in prevention of homelessness. Further, almost 90 percent of shelter beneficiaries suffered from health problems, most of them mental health problems.

Main causes and ways of entry into shelter

Among structural reasons for having to use the shelters, housing problems were most often mentioned (29 percent). The respondents also often listed poverty (15 percent) that might be related to housing affordability problem. Poor health (21 percent) and the lack of a care-giver related to poor health problems (12 percent) appeared also as the most common causes, which can be considered both individual and structural causes as they indicate the failure of the social and medical care institutions. These facts are also reflected in the following findings: Although, according to the law, the centres for social work should provide placement in shelters if necessary, only 40 percent of the respondents come through the centres, while as many as 32 percent of the users were transferred to the shelters directly from the hospital, although a lot of them continued to require continuous health care. All other common causes of homelessness, such as substance abuse, divorce, and domestic violence are mentioned less often. The answers were not significantly associated with either age or sex.

Table 1: Reasons for coming to the shelter

What was the reason for seeking accommodation in the shelter	No. of Respondents	Percent of Respondents
Poverty	21	15
Flat	40	29
Nobody to take care of me	16	12
Domestic violence	2	1
Health problems	28	21
Substance abuse	8	6
Divorce	5	4
Other	8	6
No response	8	6
Total	136	100

Housing as a cause of entering into shelter

This section aims to promote an understanding of the housing history of shelter users in order to gain further insight into their housing exclusion. The data presentation follows the (legal and physical) domains of home according to the ETHOS typology applied to the respondents' housing situation a year before their admission to the shelter and at the moment of interview. Besides that, the expected place of residence after leaving the shelter is taken into consideration.

A year before coming to the shelter most users (91 or 67 percent) lived in a flat/house, one in three had no (adequate) flat, this includes 23 shelter users (17 percent) who were on the street (table 2). The physical domain of respondents' homes a year before coming to shelter falls within the average for the housing stock in Serbia, although more than 30 percent of respondents did not provide the answer. Namely, only one in ten used to live in a state of acute overcrowding (under 8m² per person). Also, data do not indicate a significant presence of substandard housing, as more than 80 percent of respondents lived in houses made of solid material, and equipped with basic infrastructure. All who lived in substandard housing named shortage of money or poor health as the main reasons for coming to the shelter.

Table 2: Housing situation a year before coming to the shelter

Where they lived during the year prior to coming to shelter	No. of Respondents	Percent of Respondents
Flat/House	91	67
Room	9	6
Inadequate housing	5	4
Institution	5	4
Rough sleeper	23	17
No response	3	2
Total	136	100

The exclusion of the respondents from homeownership is confirmed as only one in five of them had the status of a co-owner, although the respondents were mainly middle aged or older males, thus people with precisely the key characteristics of homeowners in the general population (Petrović, 2004). On the other hand, the experience of renting an apartment in the private sector is above the average (22 percent vs. 4 percent)(table 3), while the proportion renting a flat in the public sector approximates to the share in the general population (6 percent vs. 2 percent), which confirms that the population at risk of social exclusion is insufficiently covered by public housing. The housing affordability seems to be the key in determining housing factors for coming to the shelter, as among the residents who named them there is the smallest share of homeowners or those who used to live in a flat owned by the family, while the share of those who rented flat in the private sector is above the average for the whole sample.

Table 3: Who owned the flat

Who owned the flat they were living in prior to coming to shelter	No. of Respondents	Percent of Respondents
(Co)Owned by respondent	29	21
Owned by family member	32	24
Rented in private sector	30	22
Rented in public sector	8	6
Owned by relative/friend	2	1
No answer	35	26
Total	136	100

More than half of all respondents said that they had a place to stay at the time of the interview –while 17.6 percent stated that they were on the street. It is reasonable to assume that the remaining respondents (23.6 percent) who did not answer did not have secure accommodation either. Most of those who were on the street a year before they came to the shelter were at the time of interview also on the street (up 96 percent), while all the persons who were in institutions a year before gave no answer about their present housing situation (table 4). Both findings confirm that the familial / individual support systems do not provide a way out of homelessness, but only temporary accommodation. In such circumstances, repeated admissions to shelters are a way of survival, and were recorded for 20 percent of respondents (among 35 percent of those who were on the street and 25 percent of those who were in an institution a year before coming to shelter).

Table 4: Housing situation a year before entering the shelter and at the time of interview

Where they lived a year before coming to the shelter	Present situation			Total
	Have a place to go	Street	Does not know, no answer	
Flat-house	70	0	20	90
Room-home for singles	8	0	1	9
Subtenant	2	0	3	5
Institution	0	0	5	5
Street	0	23	0	23
No answer	0	1	3	4
Total	80	24	32	136

The largest number of respondents expected to be placed in a nursing home after the shelter (29 percent), followed by those who would return to their own flat / family (23 percent) (table 5). A significant number of respondents gave no answer (24 percent), while almost one in five (18 percent) respondents expected to rent a flat, a rather unlikely option due to their poor economic resources. It is also important to note that 17 out of 25 respondents who expect to rent housing had accommodation / flat a year before coming to the shelter, which means that in the meantime they lost family support, or are no longer able to rent.

Table 5: Expected accommodation after the shelter and combined data of housing situation a year before and at the time of interview

Expected housing after the shelter	Housing status before/At present ⁷					Total	
	Flat/room has a place to go	Street-street	Inst. – No answer	Other	Total		
Nursing Home	20	10	1	8	39	28.7 percent	
Their flat with family	26	1	1	4	32	23.5 percent	
Rented flat	17	3	1	4	25	18.4 percent	
With friends	0	1	0	1	2	1.5 percent	
Street	0	3	1	0	4	2.9 percent	
Hospital	1	0	0	0	1	.7 percent	
No answer	14	5	1	13	33	24.3 percent	
Total	78	23	5	30	136	100.0 percent	

⁷ For a synthetic insight into the residential status of the beneficiaries before or outside the shelter, a variable has been derived that classifies the beneficiaries according to whether in both moments they had housing, were on the street or at first were in an institution, and now do not give an answer, as well as other combinations.

Housing situation and needed assistance

Taking into account all respondents, financial support, support in finding job or getting retirement, as well as placement in a nursing home were the most commonly mentioned forms of assistance. Many respondents gave no answer, and social housing attracted little attention. If combined with respondents' housing situation (past and present), it appeared that those who were constantly on the street (a year before and at the moment of interview) opted above average for financial assistance and social housing, while they completely neglected support regarding (re)integration into the labour market. In general, the data reflects not only the relatively high average age of respondents, but also the lack of support for empowering their labour market and social housing strategies.

Table 6. Housing situation (past and present) and assistance needed

	Housing status year before/ at present					
	Flat/room has a place to go	Street – street	Inst. – no answer	Other	Total	
Financial	23	9	1	6	40	29.4 percent
Employment and pension	14	1	1	5	21	15.4 percent
Social housing	1	4	1	2	9	6.6 percent
Nursery home	10	3	0	2	16	11.8 percent
Other	14	1	1	1	17	12.5 percent
Nothing	2	0	1	4	7	5.1 percent
Don't know, no answer	14	5	0	10	26	19.2 percent
Total	78	23	5	30	136	100.0 percent

The respondents who said that they came to the shelter due to housing problems stated that the most needed assistance is financial (33 percent), employment or pension (20 percent), suggesting that affordable housing costs are the main problem they face. A quarter of respondents had no idea what help they would need, while social housing was rarely mentioned, being perceived as unrealistic and difficult to access.

Housing and social exclusions: illustrations from the focus group interviews

Data presented in this section illustrate interconnections between social and housing exclusion that respondents face, their experience in living rough and shelter accommodation, their views regarding nursing homes, social housing, and finding employment as desirable solutions for exiting the shelter, as well as the problems perceived in the realization of these options. Six shelter users took part in the focus group on housing as a cause of entry and expected exit route. Eight

respondents took part in the focus group on unemployment and poverty, as exclusion from labour market and financial poverty are basic domains of social exclusion that are closely connected to the risk of housing exclusion.

Exclusion from homeownership is illustrated by the story of a respondent who became redundant, having worked in a public transport company. Before becoming homeless and living on the street for 7 years, he used to live in his parents' flat (in public property), but his brother exercised his right to buy the flat, and gave him a three-month deadline to move out: "He bought it off. We could have done it together, but I told him to take it, as I am alone and he has a family. He bought the flat and I moved out... and that's the end of the story."

Another respondent, who used to work in a construction company, spent 20 years living in a single room, where the legality of his tenancy was uncertain. He tried to improve his living conditions by building a bathroom through an illegal construction. In the end, he was evicted from these premises and lived on the street for more than a year.

The problems of renting flats in the private sector were often mentioned. Thus, one respondent, a pensioner who was in the shelter with his wife, with whom he had two children, talked about his long (over 25 years) experience in renting flats: "If you live in private accommodation, and if you do not pay between the first and the fifth of the month, they will not keep you. He has a right to evict you in winter. Earlier on he could not throw you out, but now... now he can, even with a child". Respondents complained about the lack of safety in the private rental sector: "No matter if you're a cleaning lady, or a director, or anyone, they are still your masters. You must listen to everybody. If you can't, get out and keep quiet. They don't give a damn. Believe me I have lost the ability to talk, I don't talk about anything anymore. I'm so afraid, I don't know what to do, that's it..."

For those who experienced sleeping rough, protection from cold and immediate physical danger were the biggest problems, as well as a lack of hygiene: "You stay dirty, filthy, you cannot enter a bus if you didn't have a bath and slept on the street. You stink". Respondents believed that people show certain solidarity regarding the food provision: "... I went into a tavern and told the waiter – please, dip that bread roll into something and give it to me, I am starving. The man looked at me, told me to sit at the table, brought me some cheese, four bread rolls, I looked at the red peppers with garlic and he brought them to me too. One cannot die of hunger; everybody will give you something to eat."

However, the respondents also talked about the stigmatization and discrimination that homeless people face on the street: "People chase us away, which is a real shame, as if we were the worst of all people,... even here (in the shelter) they tell you

that if you don't like it here you can get out". Contrary to that, respondents referred to the moral values of homeless people: "These people here cannot be thieves or something, or those on the street who have nothing. Such men won't attack, or rob a woman on the street with a bag of food. No. That is exactly why he is here or in the park; he does not know how to cope. The one who steals, he lives well..."

Discrimination against homeless people in the labour market was also discussed, and respondents claimed that employers often did not pay them on time, and that they had access only to "risky jobs". The participants that were registered with the National Employment Agency did not have high expectations: "They are of no use, believe me. The only reason I do that is to certify my health insurance and to exercise the right to one-time assistance, pocket money". The lack of a permanent address while job searching was particularly emphasized as a problem: I do not know why I can't get the address if I live here (in the shelter), give me the address for one year". All participants that searched for a job declared that finding a job would solve a lot of their problems and that it would be a more desirable solution than any social benefit: "... Job is the beginning of everything. I think that the State should organize a kind of centre for us, or a kind of training for self-employment or how to look for a job better... and not just give us money through one-time assistance..."

Nevertheless, younger respondents who expect support in finding jobs were dissatisfied: "This institution, in my opinion, should focus more on employment. There are so many staff members here, so that at least one of them could concentrate on the employment of those who can work."; "They mainly say it's not their job"; "... and I told them, people it's not rational for either of us if I go back to the street just to be brought back here again in few months.."

Respondents also complained about the lack of support they got at the shelter or from the centre for social work, regarding the rights they have and procedures for applying for social housing or a nursing home: "Last time they (Centre for Social Work) deceived me, they told me that the deadline (to apply for social housing) was in May and it was in March... So I did not apply..." "They (at the Shelter) just tell you about the announcement of a call, and you're on your own..." Those who applied for social housing complained about the lack of information regarding the eligibility criteria for accessing social housing and worried how would they pay the bills and even get a flat because regular income brings a lot of points on the waiting list. For that reason, older participants viewed a nursing home as better solution: "At the age of 65 I think it is better for me to go to a nursing home than to get a flat that I will not be able to pay and in which I will have to cook my own meals and so on...". However, the respondents agreed that resolving younger people's housing problems should be primarily related to increasing their chances for work: "First of all a job, and once you find them a job, then give them some accommodation that they can pay."

Thus in relation to both housing and working options the respondents felt that living at the shelter gave them just a minimum protection, without any efficient program that would empower them to exit homelessness: "We only have food and a place to sleep, for all the rest we have to fight on our own". Staying at the shelter, however means a lot to them: "What can you do when you have no place to go, it is better than staying on the street." "It is better to be here, whatever it is like, with the fleas and lice, than to be on the street."

Conclusion

The profile of shelter users in the biggest cities in Serbia reflects the poor state of the social and health protection systems in Serbia: A significant number of shelter users meet the requirements for placement in nursing homes, but are waiting for a vacancy to arise; a high percentage have serious chronic or acute health and mental health problems, who could be provided with adequate support only in hospitals etc. Since persons leaving total residential institutions (mental hospitals, orphanages, juvenile correctional facilities, or prisons) are not recognized by the social welfare system, they are also among shelter users. The low incidence of respondents who named family violence as the direct cause of sheltering should be connected with the opening of specific shelters aimed at victims of domestic violence, but also to the social reality in which family, even a dysfunctional one, still provides basic existential security, which increase the victims' threshold of tolerance. The same applies to the low incidence of divorce as a cause of sheltering. The small number of refugees or internally displaced persons among the sheltered persons should also be connected to the emergence of adequate specialized support programs.

The personal life stories presented in this article illustrate that homelessness is a multidimensional phenomenon of social exclusion. Therefore, it is no surprise that only three out of every ten respondents name housing as the key reason for coming to the shelter. Although all of them face the lack of adequate housing, the research highlights the varied aspects of social disadvantage closely associated with it: Unemployment, lack of income or money (to pay the costs of housing), lack of health or ability to live independently (any longer), etc. When considering the expected routes out of the shelter, the respondents tended to combine different options. As housing problems are closely related to unavailable financial resources, the respondents, particularly younger respondents with working ability, expressed the need to strengthen their individual capacities, which confirms the necessity for adequate programs of support and the development of sustainable solutions in

housing, including social housing. Because of an undeveloped social housing policy the expectations of state support in housing are low and there is no encouragement in claiming a right to the housing.

The analysis showed that the problem of homelessness in Serbia is not more complex than in other societies, but is further complicated by an underdeveloped system of necessary institutions and support measures for preventing or decreasing the risk of homelessness. It might be concluded that respondents' high risk to housing exclusion comes from several interconnected structural factors: 1. Widespread risk of financial poverty and high unemployment, particularly among vulnerable groups; 2. Poor coverage with social services for those in risk of poverty and social exclusion; 3. Undeveloped social safety net in housing, with poor access to social housing, completely unregulated private rental sector, no housing allowance, poor coordination between the system of social care and social housing policy etc.

Some positive steps have emerged in the last decades through housing programs for refugees and internally displaced persons, primarily funded by international donors. Provision of at-home-assistance for adults and the elderly, or young disabled people, and supported housing for people with disabilities has enabled many individuals to maintain a good quality of life in their own homes despite the difficulties related to health problems, and facilitated the de-institutionalization process. Much progress has also been made with regard to the development of support services for young people leaving homes for children without parental care and foster families⁸. Within the NGO sector shelters have been developed for street children – day care centres that offer a variety of activities of so-called harm reduction. In the past two years several Belgrade non-governmental organizations have been working on advocacy on housing rights in cases of forced eviction of residents of informal settlements (i.e. Roma settlements) in order to prevent such evictions, or at least to ensure that they are done in accordance with international standards. Women who become homeless due to domestic violence are provided with an urgent accommodation in the shelters for women and children, in 11 cities and municipalities in Serbia.⁹ The traditional charitable work in Serbia (carried out by church organizations, as well as newer organizations, individuals and associations in the diaspora, and some companies from the private sector) has undoubtedly provided valuable support to vulnerable people, but sometimes the approach of the charitable organizations is conservative and paternalistic, lacking a develop-

⁸ Supported housing service for young people who become independent was developed at small scale, which currently provides accommodation for the first months after leaving homes for around 50 young people in Serbia in 18 municipalities.

⁹ According to the Network of Women Against Violence, www.zeneprotivnasilja.net

mental component to encourage activation of beneficiaries' autonomous potentials, and sometimes the assistance is conditional on ethnic, national, or religious orientation, or moral or political views.

However, all of these projects share inherent problems such as lack of adequate provision capacity (they need additional education and professional practice), lack of coordination (at the national level), the absence of monitoring and evaluation of the results, and finally lack of sustainability as most of these projects have difficulty ensuring public funding once the piloting period funded by donors is over. Therefore, improving the position of homeless people in Serbia should start with the development of a strategic document(s) related to reducing homelessness, adopting a definition on homelessness in accordance with the ETHOS typology, establishing a comprehensive record system, the promotion of diversified policies aimed at prevention, care and empowerment of homelessness based on networking and synergy of different stakeholders, developing an effective social housing system to help people with extreme problems in exercising right to housing, etc. Last but not least, special emphasis should be placed on reducing the social exclusion of homeless people through raising awareness about the structural causes of homelessness, and about homelessness as a considerable social phenomenon, and not an individual choice.

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Homelessness in the Republic of Croatia: A Review of the Social Welfare System for Homeless People

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› **Abstract** *The situation of homeless people has only recently been recognised in the welfare system in Croatia. Recent research has also for the first time profiled the homeless population and some of their support needs and preferences. This paper reviews what is known about homelessness in Croatia and the extent to which current policy formation is able to meet the known support needs of homeless people. The paper begins by profiling the homeless population and present services for homeless people in Croatia. Some of the most important social rights, and the accessibility of services, are then considered including financial assistance and social housing. The paper concludes that the Croatian social welfare system needs to make substantial changes in order to address homelessness.*

› **Key words** *Croatia, demographics, welfare policy, social security, social housing*

Introduction

Homelessness has only relatively recently been acknowledged as a social issue by policy makers in Croatia. As described in this policy review, homeless people were only recently granted access to welfare rights and services in the social security system of Croatia. Whilst social reforms in European countries are gradually uniting countries towards a European social model, Croatia remains in the early stages of welfare reform. Moreover, specific programmes of social assistance for homeless

people and other marginalized social groups are also in their infancy in Croatia. This paper begins by examining the nature of homelessness in Croatia, drawing on three recent studies, the first covering Croatia in 2009, with two smaller studies in the City of Zagreb. The profile of homeless people, alongside their support needs and preferences are analysed. The specific services available for homeless people are also described. As yet, there are no national prevention and housing programmes for addressing homelessness in Croatia.

The research identified two main types of assistance needed by homeless people in order to address their situation; firstly, financial assistance, and secondly, access to affordable housing. The second part of the paper focuses on the social welfare system as prescribed in legislation for homeless people, both in terms of access and adequacy to meet needs. As will be seen, the Croatian social welfare system is marked by a slow progression. It is also found lacking when examined under the European Social Charter, which Croatia is obliged to implement under the Charter of the Republic of Croatia. The paper concludes that the granting of social rights for homeless people in legislation does not guarantee that those rights are taken up in practice.

Homelessness in Croatia

Definitions of homelessness

A range of new social risks have emerged in Croatia over the last twenty five years, as a result of the transition to a capitalist economy, and intensified by the War for Independence in Croatia (1991-1995), with the social system largely failing to cope with these increased risks (Družić Ljubotina, 2012). Homelessness in Western Europe is a recognised social problem, with most countries having a homelessness policy or programme of activities to alleviate it. However, in Croatia, homelessness is a neglected social issue. As shown below, people are often homeless for many years, yet legislation refers to it as a temporary condition (Družić Ljubotina, 2012). Homeless people have only recently become a category entitled to benefits in social welfare systems in the Social Welfare Act, 2012; many social rights and services were unavailable to them previously. The 2012 Act adopted the following definition of a homeless individual: A person without residence or means to address housing needs, temporarily living in a shelter or residing in public places unfit for habitation.

The nature of homelessness in Croatia

The first national research on homelessness in Croatia was conducted in 2009. The research was conducted in seven cities: Zagreb, Varaždin, Rijeka, Osijek, Karlovac, Split and Zadar. The research used an ethnographic approach and was conducted in homeless shelters and squats in the above cities. The first part of the study consisted of a questionnaire seeking demographic data, which was then followed by semi-structured interviews.¹ Most of the interviews were recorded and transcribed with the knowledge and permission of the participants. Participation in the study was optional and the interviewees could have withdrawn at any stage. The objective of the study was to allow homeless people to express their personal opinions on the problem of homelessness and to share their experiences. It also analysed media representations of homelessness. The research results suggest that the causes of homelessness are similar to those in other European countries; long term poverty and unemployment; drug misuse; low level of education; poor social networks; and criminal records (Družić Ljubotina, 2012). In addition, in Croatia there are specific structural causes of homelessness associated with the transition phase, including the absence of an explicit guarantee of housing in the Constitution of the Republic of Croatia, a low percentage of GDP reserved for vulnerable groups, the absence of user representation and housing programmes for marginalized groups in general (Šikić Mićanović, 2012).

The average age of homeless people in the sample was 50-52 years old. The majority were citizens of the Republic of Croatia and were adherents to the Catholic faith. Secondary and elementary education predominated. A relatively high proportion of people spoke another language (41 percent), but only a small proportion (9 percent) was computer literate.² The average duration of homelessness for women was 3.8 years, and for men 6.7 years. Health problems were common and only 60 percent of participants had health insurance. The majority of people were unemployed or dependent on social assistance or pensions, which they tried to supplement by working in the informal economy; however, almost all people were employed before they became homeless. All research participants identified a lack of financial means as the most aggravating circumstance to their situation. All research participants reported mistrusting institutions and the social service system.

¹ Twenty women and 65 men completed the questionnaire while 20 women and 43 men were interviewed.

² In the period between 1 November 2011- 31 October 2012 the Libraries of the City of Zagreb initiated the project "Knjigom do krova" for the IT education of homeless people. Partners of the project were: Rehabilitation Center for Stress and Trauma, Red Cross Shelter in Kosnica, Legal Clinic of Faculty of Law University of Zagreb, and Zagreb Volunteer Center.

There are no national prevention programmes to address homelessness in Croatia. Most of the shelters provide only basic assistance by offering a bed for a night and bathing facilities. Advisory services and rehabilitation programmes are not included (Šikić Mićanović, 2012). Some of the services are available to the users 24/7 while others provide only bed and breakfast (e.g. in Zagreb). It also seems that these services have lost their primary purpose – that is providing basic accommodation until permanent housing is secured, with many users staying in them for years (specifically, in Zagreb; Bakula-Anđelić and Šostar, 2006). Moreover, the quality of service standards and the competence of the staff are not regulated. The Regulations are concerned with the type of home for children and adults and their activities and conditions in terms of space, equipment, and professional and other staff at the social welfare homes (NN 101/99), but they do not specifically refer to shelters for homeless people. Such limited care of homeless people is insufficient in creating an opportunity for the exit out of the state of homelessness and inevitably leads to separation of that group. Social inclusion as a primary objective of the social welfare is therefore neglected (Šikić Mićanović, 2012).

Homelessness in Zagreb

Two research projects have been conducted in the City of Zagreb on homelessness. The first investigation in 2002 was carried out to determine the number of homeless people in the Zagreb City and their socio-demographic characteristics (Galić, 2012). The study included adults in long-term social care or health care facilities (including psychiatric hospitals), people living in buildings that cannot be considered a home, and prisoners; thus it utilised a broader definition of homelessness than the Social Welfare Act, 2012. Data were collected indirectly (via social welfare centres, prisons in Zagreb, medical facilities, etc.), and directly (through interviews and questionnaires).

The study enumerated 350 homeless people in the City of Zagreb. Nearly three quarters of homeless people were men and the average age was 57 years. Most of them had a permanent residence in the Zagreb area, although many had only temporary residence addresses.³ Over a third had a secondary education and only 9 percent of them had no education. Of those who participated in the war, most of them had not had their status as veterans officially registered (Galić, 2012).

More than half of the respondents had spent most of their time out of the workforce: 20 percent had about 14 years of service, 20 percent were disabled, and 13 percent had no capacity to exercise rights. Three fifths had alcohol problems and more than half of respondents had mental health problems. A fifth (20 percent) had a criminal record. Half (51 percent) had been accommodated in institutions, and 73 percent

³ Temporary residence addresses are where people have no intention to settle at a certain address.

were entitled to health care. Most people used some form of assistance within the social welfare system; almost all (92 percent) used food kitchens. More than 40 percent of respondents thought that social housing was the most desirable form of assistance (Galić, 2012).

The second study was conducted in Zagreb in 2008 and focused on the living conditions of homeless people in the homeless services. The study included 123 users of lodgings – 111 men and 12 women. Staff of these services also participated in the study (Galić, 2012). The vast majority (90 percent) of service users were men, and more than half of the study participants had a secondary education. There were also a small proportion of people with a higher-level education. Most of them did not have a partner, but more than half of them had children (55 percent). Nearly half (47 percent) were able to work (Galić, 2012).

Most of the participants were accommodated in the homeless accommodation services after 2001, only one-fifth of them between 1991 and 2000. Only two participants were using accommodation services before 1990. People had been using the services for on average 4.9 years, with the longest period being 19 years (although nobody had been staying in their current accommodation for more than six months). All of the respondents felt that they needed more assistance particularly from psychologists, doctors and social workers (Galić, 2012). Regarding health care services, homeless people are usually insured by the City Office of Social Welfare and Disabled persons. In 2008, 97 percent of all Croats had health insurance (Zrinščak, 2008). Nearly half said they would be willing to contribute to the costs of their accommodation if it meant a better quality of service. Following this research, which highlighted the poor living conditions in homeless services, the City of Zagreb funded the Programme of Social Policy “Projects for the Homeless” for 2009-2012 to increase and improve the accommodation and quality of services (Galić, 2012).

The limited evidence on homelessness in Croatia suggests that the risk of homelessness in the Republic of Croatia may be increasing (Šikić Mićanović, 2012). The use of accommodation services increased after 2001 and the limited accommodation capacity in some cities (e.g. Zagreb) resulted in the opening of shelters for homeless people (Zvonko and Kozar, 2012). New shelters were also planned in Pula, Vukovar, Slavonski Brod, Vinkovci, Dubrovnik, Sisak and Petrinja in 2009 (Šikić Mićanović, 2012).⁴ The fact that the majority of homeless people led ‘normal’ lives previously also suggests there is no single reason why a person becomes homeless. The pathways that lead to homelessness are various (unemployment, family breakdown, violence and trauma in childhood, loss of home, imprisonment). The most common pathway for men is a combination of unemployment and poor

⁴ According to assessments, there are between 50-100 homeless people in Osijek, around 30 in Split and Rijeka and 20-25 in Varaždin (Šikić Mićanović, 2012).

financial management. The significant factor for homelessness amongst women is domestic violence. Homelessness in Croatia is still not perceived as a social structural issue, but rather as an individual problem. The above research highlighted that most participants considered financial allowances and a right to housing as the most desirable type of assistance. In contrast, the most significant type of social services accessible to homeless people are shelter services and food kitchen programmes. Financial assistance and access to housing is considered in more detail below.

The Social Welfare System and Financial Assistance for Homeless People

Certain social rights have recently been granted to homeless people in the social welfare system. The social welfare system refers to that part of the social security system focused on addressing poverty and social exclusion, especially care of the most vulnerable social groups (Žganec, 2008). The Croatian social security system has undergone several phases of change over the last two decades. Progress has been relatively slow as social welfare is in the main regulated by recommendations or so called “soft law” (Žganec, 2008). Sources of law regarding social welfare are contained in the Constitution of the Republic of Croatia, and the Social Welfare Act. The Constitution prescribes the rights for disabled people, vulnerable people, and everyone without adequate material resources for social assistance to satisfy their basic needs. The Social Welfare Act was amended in 2011 and 2012. Following amendments in 2011, homeless people were deemed to be beneficiaries of social rights, but the definition was not adopted and implemented until further amendments took place in 2012.

The most significant financial allowances under the category of general social assistance are; permanent allowance, assistance for covering housing costs allowance, and a one- time allowance.⁵ The principle of subsidiarity underlies the Social Welfare Act whereby citizens are the primary agent responsible for their own welfare. A person will only qualify for assistance if their income is less than a threshold defined by the Government,⁶ and they are actively seeking work if they are capable of working. Nonetheless, the amount of social assistance is not usually adequate for recipients to meet their basic needs despite it usually being their only source of income (Šućur, 2008).

⁵ There are two categories in the social welfare system: general social assistance for those who are income poor, and social assistance in special circumstances or institutional care.

⁶ The base rate is determined as 22.5 percent of the monthly amount of risk-of-poverty threshold for a single person household and is published annually.

A permanent allowance is granted to a single person or a family who earn no income⁷ and are unable to earn income by selling, leasing or renting their property and the amount of this allowance per person varies between €52 and €79. This benefit is considered the most important welfare benefit in the fight against poverty. The local social welfare centre (the social welfare centre is a public institution established by the Republic of Croatia by the decision of the Ministry responsible for social welfare. It is established for the area of one or more cities or districts of the same county. It can have one or more affiliates. The Social Welfare Centre grants this allowance and it can be fully or partially granted as in-kind assistance if this is decided it is more beneficial. Available evidence suggests that there is poor take-up of these benefits by homeless people. This allowance is rarely granted to them and in some cases a smaller amount than the minimum prescribed is granted. In some cities homeless people cannot access this right while they are using the accommodation services of the shelters.

The housing costs allowance is intended to cover the rent and utilities (Bežovan, 2008). This allowance represents 50 percent of the permanent allowance prescribed in the Act, between 200-300 HRK per month (approximately €28). However, the housing costs are determined in lease contracts and this allowance is only available to tenants with market rent. This assistance has therefore not been particularly useful to homeless people who commonly do not have a formal address or residence. Along with the rights to assistance stated above there are certain services available to homeless people prescribed in the Act. The Act prescribes the competence of major cities for initiating and providing accommodation services and food kitchens within their area of jurisdiction. Where cities cannot provide these services, the Act prescribes regional authorities to participate in funding of those services according to their abilities. Shelters can also be established by civil society organizations or religious communities and accommodation in shelters is usually limited to a 6 months stay (Karačić, 2012).

Problems with enforcement of guaranteed rights

The amendments introduced by the Social Welfare Acts 2011 and 2012 have been very significant for homeless people as for the first time they have been included in legislation. However, there are a number of problems with the social welfare system which face all claimants; these include a lack of objective criteria for the realisation of the programmes; inadequate cooperation with civil society organizations; an inefficiency in the social inclusion of the poor; and the overall low amount of allowances (Šućur, 2008).

⁷ If a person earns an income, the permanent allowance is calculated as the difference between the amount prescribed by the Act and average monthly income in the three months prior to the claim.

There are also significant problems with differential levels of assistance across authorities. Central government almost entirely funds permanent allowance and one-time allowances. Local authorities can finance an amount that exceeds that guaranteed by the Act from their own resources. However, a large number of local authorities are unable to promote the welfare of the citizens in this way due to the lack of financial resources, making this entitlement available mostly to major Croatian cities. This can result in social inequalities in terms of creating local social welfare states (Šućur, 2004). Assistance with housing costs is funded entirely from the resources of local and regional authorities. Many of the rights within the system do not guarantee full realisation of rights, as a result of the large number of users and restricted financial funds.

Beneficiaries exercise their rights themselves or ex officio by authority, most commonly as an administrative case via the social welfare centre (Učur, 2011). The centre is required to develop an individual plan of assistance based on needs assessment and take measures necessary to enable an individual to care for themselves and their family. The centre is usually required to make a decision and payment within 15 days. Any appeal against the administrative decision of the social welfare centre is decided by the Ministry responsible for social welfare. Territorial jurisdiction is determined by the residence of beneficiaries, and if a person has no domicile, it is determined by the habitual residence. If a person has no registered domicile or habitual residence, the competent social welfare centre is the one in whose area the user is obtaining. Until recently, homeless people usually had no permanent or temporary residence and therefore their rights were usually denied (Karačić, 2012). However, in 2012, the Residence Act was amended so that shelters can be stated as a person's address for claiming.

Another problem is that homeless people do not have the personal documentation necessary for the realization of social welfare rights. To exercise a right they must have certain documents (e.g. medical documents in case of disability or the job application form for relevant employment services) that are impossible to obtain without stating their domicile or residence (including having a identity card) (Karačić, 2012). Therefore, to date, homeless people have usually only accessed one-time allowances and / or shelter services. It remains to be seen how far the legislative amendments will affect their ability to claim permanent and housing allowances. The documentation is also necessary to resolve their status. Many of them are persons with disabilities but they don't receive any medical treatment or have health insurance. This means they have no medical documentation and cannot become beneficiaries of rights designated for such persons. Without documentation they cannot acquire the status of insured person regarding health insurance or register with employment service as an unemployed person (Karačić 2012). In the research conducted in Zagreb in 2002 most of the participants exercised the right to health

care. They were insured either by the City Office of Social Welfare and Disabled persons, either by some other basis (e.g. veteran status, a spouse, a pension; Bakula-Andelić, Šoštar, 2006). Once they would have lost their insurance base it would be difficult to acquire a new one without domicile or habitual residence, which has to be stated in the relevant documentation.

In terms of utilising accommodation services, shelters only provide temporary accommodation for a period of 6 months to a maximum of one year. Many homeless people would qualify for a place in a social welfare home or foster family, but are often reluctant to access this type of accommodation. Shelters do not oblige people to follow a specified programme and people can also leave the shelter at any time (Karačić, 2012). However, shelters offer very limited services and there is no support that can help them prepare for an active role in the society. Homeless people in Croatia also often have a mistrust of institutions because of the constant obstacles in exercising their rights, and may also decline treatment (Karačić, 2012).

Access to Social Housing for Homeless People in Croatia

The concept of social housing designed as a means by which governments directly assist vulnerable social groups is commonplace in European Union. Lack of decent housing at an appropriate price was recognized many years ago at the EU level as a barrier to social inclusion, although housing is not strictly a priority (Javornik, 2007). However, the European Union has no jurisdiction in Member States regarding housing policy and housing problems are the responsibility of each member state. Unlike in most of the Member States, the Constitution of Croatia does not oblige the state to assist citizens in satisfying their housing needs (Bežovan, 2004a and b). The beginning of the transition period in Croatia was marked by the withdrawal of the state from the field of housing, including the privatization of commonly owned properties. After 1990, part of the profit realized from the sale of these properties was intended to be designed for social housing. Yet, only a small number of cities received funding for the construction of social housing. The sale of properties means that the housing structure in Croatia is similar to that in other Central and Eastern European transition countries which went through such a process of privatization, with an overall lack of housing supply (Bežovan, 2004a and b).

Under the present Apartment Lease Act socially vulnerable groups can exercise the right to preferential rents,⁸ however very few apartments exist like this in Croatia. Some larger cities invest a relatively small amount of funds in such apartments and allocate them to households with unresolved housing problems. For example, when

⁸ The amount of the preferential rents cannot be lower than the amount necessary to cover the costs of regular maintenance of the building.

the City of Zagreb adopted Regulations on Leasing Apartments in 1998 and in 2003, the priority list contained 2,000 names, with approximately 30 apartments available for allocation (Bežovan, 2004a and b). In 2001 the Subsidised Sale of Apartment Act was also adopted whereby citizens can purchase apartments at lower than market prices. Local self-government units can also purchase such apartments for the purpose of apartment leasing and for providing housing to tenants in private apartments at preferential rents. This project pointed to the possibility of more favourable housing construction; however the development of the programme has been slow and not easily accessible by homeless people. Ultimately, there is no specific legislation in Croatia that prescribes how authorities should house vulnerable households. There are also no national regulations for temporary accommodation for vulnerable social groups such as homeless people, with Non-Governmental Organisations (NGOs) providing these services.

Compliance with the European Social Charter

One of the most important instruments for the protection of social rights adopted by the European Council is the European Social Charter (1961) (Čujko, 2008). Croatia signed the Charter and its three Protocols in 1999. However, the Conclusions of the European Committee of Social Rights on the implementation of this document in Croatia highlighted a number of areas on non-conformity including the 13th Article that should ensure that everyone without sufficient income and unable to provide by their own efforts or insure them from another source, can get appropriate help. The amount of the base rate (then about 400 HRK) was insufficient even with an additional fee. The Conclusions of the Committee in 2009 found that the base rate had increased to 500 HRK (€ 69), but noted that the amount was still insufficient.

The Committee also requested additional information on the criteria for access to services from social welfare centres, the resources that are available and whether they are or are not free of charge services (Čujko, 2008). The Committee also required information on appeal procedures. In the 2009 Conclusions, the Committee also considered the measures taken to strengthen dialogue with civil society regarding social policy that affects social welfare services. Croatia is required to continue to provide information on the requirements for non-profit organizations and private providers that they must satisfy to become providers of social services.

The Committee also considered the problems of social and public housing under Article 16, which refers to the right of the family to social, economic and legal protection. The Committee requested information on which measures were taken to encourage construction appropriate for the family. The situation in Croatia in relation to this provision was assessed as not in conformity. In the 2011 Conclusions

the Committee requested additional information in order to assess compliance in this regard. It notes that there must be a legal protection for tenants facing eviction from their housing. It can be concluded that in terms of accessing and exercising social rights, the situation in Croatia remains unsatisfactory and that much needs to be done to comply with certain provisions of the Charter.

Conclusion

This paper has reviewed existing social welfare policy as it affects homeless people in Croatia. As noted, homeless people have only very recently been recognised in social welfare legislation. Nonetheless, despite this progress, homeless people in Croatia face considerable difficulties in exercising these new rights. In addition, even should these be granted the financial assistance available is unlikely to be sufficient to cover their needs. At present, specific assistance for homeless people is offered through basic shelter services and food kitchens. There is very little professional support available to people in the shelters to meet their extensive range of support needs. There are no formal resettlement policies in operation at present in Croatia. Homeless people themselves appear reluctant to accept assistance from the state and mistrust in the authorities is widespread. Homeless people are often passive in exercising their rights and some report being discouraged when they have attempted this in the past. The paper has demonstrated that as observed by the European Committee of Social Rights the level of allowances and the capacity of the social welfare system are inadequate. Social welfare centres along with other bodies are not sufficiently coordinated in their activities. In addition, there are insufficient NGOs working in Croatia to enable them to influence modern housing policy. Even with better incomes and resettlement support, access to affordable housing is likely to remain a significant problem. At present, there is insufficient stock of social housing and therefore little rehousing via the small social sector. It will not be easy to address homelessness without substantial progress in this area of social policy, alongside reform of the system of housing allowances.

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Responses to “Preparing
Homeless People
for Independent Living
and its Influence on
Resettlement Outcomes”

Part E

Preparing or Postponing?

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Introduction

FOR-HOME is a large, thorough longitudinal investigation of re-housing outcomes for 400 previously homeless, single people, who were interviewed face-to-face at three different occasions, each lasting 1–2 hours; just before they moved into their new homes, after six months, and then again after 15 or 18 months of independent living. As the attrition rate was very low, this adds up to about 1 700 hours of semi-structured interviews with re-housed individuals, in addition to information gathered from six service provider organisations operating the temporary accommodation from which the homeless interviewees moved to independent housing. The article under review only makes use of some quantifiable data gathered in the study. However, a comprehensive report on the FOR-HOME study was published in 2011 (Crane *et al*, 2011), and another article focusing on financial difficulties and advice needs was published in the *European Journal of Homelessness* in 2010 (Warnes *et al*, 2010).

The overall results of FOR-HOME are impressive at first glance, with 78 per cent of formerly homeless people retaining their housing at the time of the last interview, which is comparable to Pathways to Housing’s evaluations of their Housing First programmes (Tsemberis, 2010). However, Crane *et al* (2012) make the case for a Housing Ready approach to homelessness, claiming that a long stay in temporary accommodation is decisive for successful re-housing – a result that has not been reported or even suggested in their two other publications.

The Sample

The participants in the study were selected and contacted by staff in the participating service providers from clients/residents moving into regular housing, with the objective of making their sample representative in terms of age, sex and ethnicity, of single homeless people being re-housed by these organisations in the study sites during 2007–08. It is, accordingly, not representative of all homeless

people, nor for all those staying in temporary accommodation in these sites or in the country. As the authors note, 'only 20 percent of departures from London's hostels in 2008/2009 were into independent accommodation, while 39 percent were evictions or abandonments' (Crane *et al*, 2012, p.23). This is a well-known problem with the practice of preparing people for housing, which forms the basis of housing-ready or staircase approaches, and with evaluating its outcomes. That is, most users fail to achieve permanent housing; rather they are excluded or give up before they get the opportunity. If data are used for a comparison with Housing First projects, which is suggested in the article, then arguably only 78 per cent of 20 percent, or 15 per cent of those moving from staircase like accommodation actually lead to successful permanent housing. Accordingly, the good results say very little about the usefulness of temporary accommodation in general, as they only refer to the minority of the residents that are offered permanent housing. Put differently, the study group represents only those 20 per cent who have been selected by the service provider or local authority as definitely or probably ready for living independently (except for 5 per cent about whom the staff had doubts).

We do not learn very much about the problems of these re-housed persons. We are informed that 50 per cent had mental health problems, 13 per cent drank heavily and 30 per cent used illicit drugs (Crane *et al*, 2012, p.26). But we do not know if this means that 50 per cent had no such problems and 30 per cent had two or three of them, or that almost all had at least one of these problems and none had two or more of them. If the respondents had been grouped into different categories on the basis of their self-reported problems (and their new housing, see below) to form a typology, it might have been easier to understand and make sense of the results.

Results

Explaining success

The bivariate analysis indicates that many factors that are traditionally associated with a risk of housing exclusion are not negatively correlated with housing retention (Crane *et al*, 2012, Table 3, p.32). These include never having lived alone before, or having experienced difficulties while doing so, mental health problems and alcohol misuse, while specific experiences of homelessness (having slept rough, duration of last homelessness period and where it was spent), are claimed to have such an impact. Furthermore, the authors do not find that various treatment and training activities, except for, possibly, training on paying bills, have any significant impact. These results are intriguing, since they are at odds with a commonsensical approach that suggests that non-conforming lifestyles and behaviour, and acculturation into homelessness, can make re-housing difficult.

The authors make a point of the fact that 89 per cent of those 65 per cent (260) of users whom the staff found 'definitely ready' succeeded in their housing, while this held for only 9 (53 per cent) of the 17 people about whom the staff was 'doubtful' (*ibid.*, p.30, 33). But this still leaves more failures in absolute figures (29) among those declared 'definitely ready' than among the 'doubtful' cases (8). In fact most of the 'doubtful' cases did succeed, which highlights the difficulty of predicting housing retention on the basis of homeless people's behaviour in congregate settings such as hostels and shelters.

The authors' main conclusion is that a long stay – two or three years – in temporary accommodation before resettlement in independent living assists in securing successful re-housing. All individuals in the study with such a long 'preparation period' (n=52) had retained their flats at the time of the last interview, while this held for only two thirds of those with only up to three months in temporary accommodation (n=46) before moving into an own flat. In the stepwise multiple regression (with 'remained housed' as the dependent variable) presented in Table 5 (*ibid.*, p.34) 'in hostel/supported housing >6 months' and 'in semi-independent accommodation' are shown to have an independent positive impact, while 'slept rough during preceding 12 months' and 'using illegal drugs' have a negative influence on the outcome. In the regression including only those who had not lived successfully alone before, the same factors had a positive impact, as did 'training on paying bills', while no factor had a significant negative impact. It is claimed that all factors that were correlated with the re-housing outcome in the bivariate analyses were entered into the regression but 'current homeless episode >24 months', and 'engaged in education, work-training or employment at time for resettlement' were not retained in any of the regressions, while 'training on paying bills' was not retained in the total population analysis, and 'using illegal drugs at resettlement' was not in the regression concerning those who had no previous successful time of living alone.

We are further informed that these regression analyses predict a majority of the cases still in housing (96 and 95 per cent, respectively), but only a minority (23 and 44 per cent, respectively) of those without tenancy at 15/18 months. Thus, could it be that the regressions only characterise the sample in general? According to Tables 3 and 4 (*ibid.*, p. 32), most (60 per cent) of those who had slept rough in the last year and two thirds of those with only 3 months or less in temporary accommodation were actually still housed at 15/18 months, while 40 per cent of those who had lost their tenancy had been trained on paying bills. In the report training on bills paying was played down: 'There were no associations between receiving advice or training on budgeting and paying bills from key-workers or other staff before being rehoused and coping financially after moving' (Crane *et al*, 2011, p.55–56).

Furthermore, no analysis is presented in the article on possible different success rates for different training and resettlement programmes run by different organisations and/or in different cities.

Explaining failure

Obviously, all relevant causal variables have not been entered into the regression analyses in the article (Crane *et al*, 2012). Factors or considerations that might have caused housing exclusion or abandonment are excluded from *this* analysis e.g., whether or not the re-housed people were offered support in their permanent housing. If good preparation indeed predicts housing sustainability, what if this kind of support were instead provided on a voluntary basis immediately upon re-housing and when real bills, housework and neighbour difficulties appear and need to be solved? The importance of tenant support is not mentioned in the article, but was underlined in the report:

There was a relationship between contact with a TS [tenant support] worker and rent arrears. The respondents who still had a TS worker at 15/18 months were less likely to have had rent arrears during the previous 9/12 months ($p < 0.05$), less likely to have arrears when interviewed ($p < 0.05$), and less likely to have been taken to court for arrears. (Crane *et al*, 2011, p.84)

Somewhat unexpectedly, neither alcohol misuse nor mental health symptoms had an impact on the housing outcomes, which suggests that tenant behaviour is not the only reason for housing exclusion. Unfortunately, the reasons for failure are not detailed in the article, although much interesting information is probably found in the interviews, and is related in the report. The article simply states: 'Some had been evicted because of rent arrears or antisocial behaviour associated with alcohol or drug misuse, and several had abandoned the property because of harassment from local people or because they were depressed, lonely and unable to cope.' (Crane *et al*, 2012, p. 31). References to 'some', 'several', and housing loss because of this 'or' that are not very enlightening. Again, more detailed information is found in the report: 'Overall, 26 per cent of the respondents were threatened with eviction because of rent arrears, and 21 (6 per cent) were evicted or left their accommodation for this reason' (Crane *et al*, 2011, p.55).

Importantly, information on housing characteristics is completely left out of the article. Differences in the assigned flats, i.e., the site, standard, rent, tenure, and the properties of the neighbourhood etc. could possibly contribute to an explanation of why some people abandoned their flats, could not pay the rent, were harassed or attracted complaints by neighbours. In the full report, however, such factors are given much attention:

The presented results, along with many other analyses, lead to the overall assessment that three sets of factors had the strongest influence on the housing outcomes, namely tenure differences, the partly associated differences in housing market or structural conditions in London and in the provincial cities, and the age of the respondents (*ibid.*, p.50).

In the report the often poor physical quality of private rental flats and their high rents and insecure tenure are highlighted: 'The evictees represented 16 per cent of private-rented tenants but only two per cent of social housing tenants' (*ibid.* p.55). Crane *et al* (2012) go on to state:

The respondents who moved to private-rented accommodation were significantly more likely to have moved or left ($p < 0.001$). At 15/18 months, less than one-half (47 percent) of private renters compared to more than four-fifths of social housing tenants were still in the resettlement accommodation (Figure 7.1). Just over one-quarter (27 percent) of those resettled into private-rented accommodation were without a tenancy – and 12 per cent had returned to a hostel or slept rough (the equivalent figure for social housing tenants was 5 percent). (*ibid.*, p.45)

Poverty is another factor that is touched upon but not elaborated in the 2012 article, although financial problems are singled out as a great cause of housing failure. 'People who had rent arrears from their pre-resettlement accommodation were more likely to default on rent when re-housed, suggesting that more needs to be done by homelessness sector organisations to address persistent rent default patterns.' (Crane *et al* 2012, p.36). However, the persistent rent default pattern does not have to be attributable to *the individual*. An alternative explanation would be that paying off rent debts at the same time as paying current rent may put too much strain on the re-housed individual's finances, or that higher rents increase the risk for rent arrears if the income remains low, that is, poverty (cf Warnes *et al*, 2010).

Conclusion

The article ends with a plea for enhanced services over a considerable period to fully prepare homeless people for independent living. The authors conclude that 'the longer (up to three years) a homeless person spends in supported accommodation, the greater is his or her preparedness for independent living' (Crane *et al*, 2012, p.34). Of course this cannot refer to people in general, most of whom have never been in supported accommodation before moving into a new home but still manage to keep it, so an underlying assumption is that homeless people are different from 'normal' ones. We have also learned from the study that different kinds of training and treatment do not have any independent impact on the housing

outcomes. But then what remains in the black box of 'preparation' that causes successful re-housing? Is it only discipline, that is, having learnt to comply with hostel rules to avoid exclusion during the last six or twelve months? Or is it a humble attitude, implying remaining content with temporary accommodation as well as deficient re-housing offers and refraining from deserting them?

The authors have different suggestions: For example, that it takes time to solve problems related to housing sustainment; participation in training programmes (although this was not supported by the analysis); a selection effect in that homeless people with chaotic lifestyles tend to lose their housing (although alcohol and mental health problems had no independent impact on retained housing); or being involved in education or work training (but this had no impact in the regression analysis). Having resided in semi-independent housing is another explanation put forward by the authors, but this too could be a selection effect, since we do not know whether such accommodation is offered first to those that need it most, or on the contrary to those with only minor problems.

The very rich data collected in FOR-HOME can obviously be used in various combinations in different kinds of analysis. In their 2012 *European Journal of Homelessness* article, the authors have obviously directed their interest towards the usefulness of temporary and supported accommodation prior to re-housing and conclude that such accommodation is beneficial for homeless people. However, since most residents are probably not offered permanent housing, even after two-three years in temporary accommodation, and their destinies are not discussed, the implied picture of the system's functions is inadequate. In addition, possible alternative causes of failure to keep stable housing (except having slept rough or only a short stay in temporary accommodation) that were presented as evidenced in the authors' 2011 report, such as high rents, bad housing quality, and insecure tenure in the private rental sector, are left out in the analyses of the 2012 article. For these reasons, the article fails to convince this reader of its conclusions.



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Some Additional Thoughts on Housing and Services for Adults with Histories of Homelessness

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Introduction

Crane *et al* (2012) report an interesting study of the relationships of pre-resettlement services and length of time in transitional housing to participant outcomes. Their research did not yield a clear pattern of associations between pre-resettlement services and post-resettlement outcomes, but longer stays in transitional housing did predict tenancy retention. Based on these findings, the authors seem to favour the conclusion that longer stays in transitional housing cause longer independent tenancies (p.38). In this reflection piece, some additional aspects of their results are highlighted and some of their results are reinterpreted.

A Reflection on Client Outcomes

Perhaps the most striking finding is that, at the final time point, 78 percent of participants were still in their original accommodation post-resettlement, while another 7 percent were stably housed in another post-resettlement tenancy. Only 15 percent (55 people) had no tenancy (p.31). Although the authors understate this success, the finding that fully 85 percent of the sample remained stably housed at the final time point is an impressive result for the resettlement initiatives that were involved in this research. Second, these findings indicate that clients have a great deal of insight into their own ‘readiness’ for independent housing. Importantly, 84 percent of clients judged themselves ‘definitely’ ready to move, compared to only 65 percent assessed by staff as ready to move. The fact that clients’ readiness assessments more closely matched the retention outcome than did staff assessments certainly merits additional

attention. However, overall, staff were optimistic in their predictions: In addition to the 65 percent of clients staff judged as 'definitely' ready to move on, another 30 percent were judged as 'probably' ready to move on; staff were 'doubtful' about only 5 percent (p.30), suggesting that the authors' support for longer transitional housing stays of up to three years (p.34) is a conservative assessment of people's abilities, and seems to fall short of the providers' expectations for clients. Third, the finding that neither mental health nor alcohol problems predicted housing outcomes (p.33) should be highlighted. Participants were able to sustain their tenancies, even in the context of active mental health or alcohol problems.

Some Alternative Interpretations

Of the five participants who were resettled directly from the streets, three became homeless again. This could be expected, given that participants appeared to receive very few, if any, support services post-resettlement. Perhaps individuals with chronic homelessness experiences are likely to need service supports upon resettlement in order to sustain tenancies. However, since this conclusion is based on only 2 percent of the sample, care should be taken not to go too far beyond these data in interpretations and recommendations.

Participants who spent more time in transitional housing (either hostels or 'semi-independent living') were more likely to retain their tenancies than those with shorter stays or who intermittently slept rough. The authors concluded, "shorter stays in temporary accommodation will lead to poorer resettlement outcomes" (p.17). However, this result should be interpreted with caution. Although the authors' hypotheses include post-resettlement services as a predictor (p.21), no post-resettlement services, other than Education, Work Training and Employment (ETE), were reported in their measures or results. This is important because participants simultaneously resided in temporary accommodation *and* received a range of types and intensities of services *prior to* resettlement. Then, they simultaneously experienced a move to independent housing *and* an apparent withdrawal or reduction in services (what services, if any, were received post-resettlement are not described). It cannot be ruled out that it is the withdrawal of support, rather than shorter length of tenure, that caused tenancy outcomes. Other unmeasured variables may explain the relationship between transitional housing and tenancy retention, such as clients' own skills, which they brought with them to the transitional accommodation, or that they acquired *despite* the conditions of the transitional accommodation.

The sample is described as representative of single adults who depart from hostels and temporary supported housing into independent housing (p.23). The authors cite Broadway's (2012) finding that single adults who move from hostels to inde-

pendent living comprise only 20 percent of the hostel population. In contrast, 39 percent of those who left hostels and temporary supported housing either were evicted or abandoned their housing. These numbers indicate that more people are dissatisfied with, cannot, or will not comply with hostels' rules and regulations, than graduate into independent housing, and suggest that conditions of hostel life are not acceptable to nearly two-fifths of the single adult homeless population.

The authors conclude that “the current policy priority in England to shorten stays in temporary accommodation (at least for those requiring ‘low intensity’ support) is misguided and could increase the likelihood of resettlement failures” (pp.37-38). This is precisely the mechanism through which higher functioning individuals who can tolerate hostel dwelling have become stuck in more restrictive housing services. They appear to benefit from congregate housing because they have fewer needs, a potentially larger array of life skills, and less challenging behavioural issues. Consequently, they may have greater capacity to effectively cope with hostel life, rules, and regulations, and ironically be less likely to move to independent accommodation, as well as less likely to experience eviction from temporary accommodation.

Research has demonstrated that those who have more severe needs can succeed with direct placement in independent housing with supports (Greenwood *et al*, 2005; Stefancic and Tsemberis, 2007; Tsai *et al*, 2014; Tsai *et al*, 2010). For example, Tsai and colleagues (2010) found that there were no clinical advantages to residential treatment or transitional housing, but there were higher service costs. Taken together with our reinterpretation of Crane and colleagues' findings, it remains unclear why individuals with lower or fewer support needs should spend more time in transitional housing. If, as the authors seem to agree, housing configuration is less important than intensity of services (p.38; see also, Locke *et al*, 2007), choice of housing can be determined by tenant preference; in most cases, individuals choose immediate placement in permanent, independent housing (social, subsidized, or private), with lower intensity supports as their number one priority.

It appears that Crane and colleagues argue against providing housing without adequate supports, which accords with the Housing First model. However, it is unclear why they do not also argue that participants should be resettled into permanent scatter-site housing – social, subsidized, or private – and concurrently provided with support services. In the Pathways Housing First model providers arrange permanent scatter-site housing in the community and provide support services with the goal of flexibly tailoring support intensity to the participant's needs and goals, and continue support services until the person no longer needs them. The advantage of the Pathways approach is that services can withdraw while the person stays in their home; this allows individuals to settle into their community

and minimizes housing disruptions, while support intensity can vary with need – including “walking away” when no longer needed. Thus, a viable alternative to extending stays in temporary accommodation may be to provide enhanced community-based supports in permanent housing, such as the housing in which participants in Crane and colleagues’ study were resettled.

Extended time in transitional housing is not likely to resolve some of the issues people faced in independent tenancies. Length of stay in transitional housing was not related to drug use (drug use was one of the few factors associated with housing outcomes post-resettlement), and so longer periods of temporary housing would not be likely to solve the problems drug misuse caused in independent tenancies. Additionally, those who went into independent housing with debts were more likely to lose their tenancies than were those with little or no debt. It is not evident that extending stays in hostels or semi-independent arrangements would alleviate individuals’ debt problems, and thus improve tenancy retention. Employment problems are also unlikely to be solved while residing in a hostel, especially in a system that takes away crucial grant monies upon employment. Indeed, Crane and colleagues quote one hostel dweller who stated, “I’d have been better off if I’d not got a job until after I was re-housed” (p.29).

In hostels services are provided for residents, who become increasingly deskilled with length of stay. The authors acknowledge that hostels offer few opportunities to learn daily living skills and individuals are more likely to develop or regain skills for daily living in semi-independent accommodation. It is unsurprising that the only pre-resettlement services that predicted client outcomes were budgeting and ETE. ETE is the only service that would occur outside one’s residence, and it is the only service that the authors explicitly described as continuing after resettlement (p.29). In contrast, a Housing First approach provides a full array of time-unlimited supports that are not tied to housing and that fall away as the client no longer needs them.

Conclusion

Crane and colleagues’ research demonstrates that adults with histories of homelessness are settling very successfully into independent accommodation across England, and that they do so even in the context of active mental health or alcohol problems. The pattern of findings for pre-resettlement services is more mixed; only ETE predicted tenancy sustainment. Taken together, these findings suggest that formerly homeless adults are able to sustain their new accommodations, and that only a small percentage need continued post-resettlement supports, such as for problem-related drug misuse. But housing retention is not the only challenge faced by formerly homeless adults. As the authors note, many clients reported various



challenges and difficulties in housing-related domains, and the evidence base suggests they would benefit from time-unlimited supports. It is important that European homeless services continue to provide services to individuals to address these challenges, even once independently housed. Housing First models, which provide community-based, time-unlimited, tailored, and flexible support services that gradually “fall away” without requiring the disruption of resettlement, are viable alternatives that would effectively resolve homelessness and housing-related problems for all.

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A Comment

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Introduction

When, in 2007, my organisation, Thames Reach, a London-based charity helping homeless and vulnerable people to find decent homes, build supportive relationships and lead fulfilling lives, was invited to participate in the FOR-HOME longitudinal study into the resettlement outcomes of homeless people, there was enormous enthusiasm and eagerness to fully contribute. This was matched by the staff groups of the other selected charities: Framework, St Anne’s, St Mungo’s Centrepoint and Broadway. For homelessness organisations, longitudinal research of this type is extremely difficult to undertake alone and without additional funding because of the amount of resources needed to successfully track individuals through their often complicated resettlement journey. For cash-strapped charities the necessity of assisting increasing numbers of people entering our services and the requirement to provide output information for commissioners always takes priority. The researchers, Maureen Crane, Tony Warnes and Sarah Coward have an impressive track record of exploring, with academic robustness, key areas of interest in the area of homelessness and this enhanced our confidence that this could be ground-breaking research.

The FOR-HOME report, published in 2011 has had a significant impact on the work of the participating charities and other organisations working with homeless people. As a practitioner in the field, it is a source of frustration that research of this quality and richness does not translate readily into changes in delivery practice and service commissioning. The linked paper produced for the *European Journal of Homelessness* by Crane *et al* (2012) focuses primarily on the association between aspects of preparation for independent living experienced by the homeless cohort, and the consequent outcomes of their resettlement. The paper sets out a detailed background of the policies and approaches to rehabilitation and resettlement, stretching back to the 1970s. This response focuses on two particular areas that are considered in the article: (1) the proposition that the duration of stay in temporary accommodation is a major influence on resettlement outcomes, and (2) the role played by resettlement and tenancy support staff and the impact of other factors and interventions.

The Link between Stays in Temporary Accommodation and Resettlement Outcomes

The link between stays in temporary accommodation and strong resettlement outcomes appears to be one of the most unambiguous findings that emerged from the *For Homes* study. For provider organisations such as Thames Reach, influenced by the pathways approach developed by some of the more progressive local authorities, it was a surprising conclusion. The pathways approach encourages swift progress through different forms of temporary accommodation – assessment centre, hostel, second stage housing – with the aim of ensuring that, as quickly as is reasonable, the client is provided with long-term, settled accommodation. The pathways approach is not rigidly linear and allows, for example, a move into self-contained accommodation from a hostel if the client's assessment and support plan indicates that there is a good chance that they will be able to settle successfully.

The researchers concluded that there was a strong association between the use of temporary accommodation prior to resettlement with successfully sustaining independent accommodation and, additionally, noted that 'the likelihood of retaining a tenancy increased with the duration of stay in the pre-resettlement accommodation, from 67 percent among those who were resident for three months or less, to 100 percent so housed for 25-36 months'(Crane *et al*, 2012, p.31).

This conclusion is of particular interest because of the apparently contradictory statistics which suggest that hostels, (though less starkly, shared 'semi-independent' accommodation comprising smaller units) have relatively poor outcomes, notably around sustaining people in the accommodation for long enough to achieve changes in behaviour, reduction in substance misuse and stability. Instead the statistics create a picture of a demoralising 'churn' of people between hostels or shelters and the street, sometimes interlaced with short spells in prison or hospital.

In London, the information compiled by outreach teams working with rough sleepers is submitted onto a database called the Combined Homeless and Information Network (CHAIN) and reported on a bi-monthly and annual basis. The profile of the rough sleeping group closely aligns with the *For Home* cohort.

The latest annual figures released in June 2013, cover the year 2012-13. In this period there were a total of 1930 departures from the hostels for rough sleepers monitored via CHAIN. 29 per cent of departures were negative; that is the resident abandoned the hostel or was evicted. A further 25 per cent of departures were 'transfers' to other hostels, hospital, detoxification centre or bed and breakfast. Only around four in ten of residents moved on to something more long-term and settled, including returning to the family home. Given this reality of frequent abandonments and evictions, sideways moves and general turbulence, it is hardly

surprising that some resettlement workers and hostel staff are determined to make stays in hostels as short as possible and to focus on resettlement plans that achieve ‘move on’ within three to six months.

And yet the FOR-HOME research appears to endorse longer stays in hostels and implicitly counsel against rapid re-housing into longer term, more independent accommodation. What can account for this apparent contradiction? One possible explanation for the strength of the association between a lengthy stay in temporary accommodation and sustained resettlement outcomes could be that the residents who are able to sustain themselves in a hostel or other shared temporary accommodation have lower needs and greater resilience than those who are continuously being evicted or abandoning. In other words, the factors leading to success in sustaining independent accommodation are less to do with effective resettlement preparation and more strongly correlate to the personal stamina, resilience and relatively un-chaotic lifestyle of the resident.

However, in response to this possibility, the article emphasises that ‘there were no significant differences in duration of stay [in temporary accommodation preceding resettlement] by age, mental health or substance misuse’ (*ibid.*, p.25). Of course, these factors do not automatically translate into levels of need, but the implication is that there is no obvious sifting of the cohort based on lower support needs, which would account for the correlation between longevity in temporary accommodation and sustained resettlement.

At the risk of sounding too much like the archetypal researcher sensing an opportunity, this is an area that could benefit from further scrutiny and investigation. The FOR- HOME study evidences in the broadest sense what the key elements are in terms of successful preparation. It shows, for example, that there is a strong association between preparatory engagement in employment, training and education (ETE), and continued purposeful commitment to, and progress in, these areas and that this continuity positively influences resettlement sustainment. The study demonstrates too that providing more assistance in the management of personal finances is likely to be a crucial factor in improving tenancy sustainment rates.

But these are broad-brush conclusions and detailed investigation of what aspects of pre-resettlement preparation most contributes towards sustained resettlement would allow not only for more detailed analysis of, for example, precisely what type of employment-related support made the most difference, but also allow some exploration of the more speculative recommendations arising from the FOR- HOME research, such as the efficacy of peer support as a model that can improve sustainment outcomes. Clarification of what works best with some cost benefit analysis

accompanying the investigation would be particularly useful at a time when recessionary pressures are leading to the return of basic short-stay shelter provision in many parts of the country.

The Role Played by Resettlement and Tenancy Support Staff and the Impact of other Factors and Interventions

The FOR-HOME study is emphatic in its conclusion that resettlement workers and tenancy support staff contribute significantly to the achievement of positive resettlement outcomes. Typically the task of the resettlement or tenancy support workers commences prior to resettlement taking place, and in the most effective services, there will be a close working relationship between them and hostel staff.

The study found that the main assistance provided by tenancy support workers was in the practical areas of helping establish welfare benefit claims, sorting out rent and utility payments, tackling problems with the condition of the accommodation and, to a lesser degree, providing emotional support. Interestingly, and perhaps challengingly, given the prioritising of these areas of support, the article notes that there was no significant relationship between training received in the area of undertaking household tasks before resettlement and managing a home after moving, though training in paying bills was identified as being a key preparatory training area.

Yet there appear to be other areas of equal, or of more importance, in terms of ensuring successful outcomes including, as noted earlier, support in the area of ETE. And one area that, regrettably, was not covered in any detail in the article, but features significantly in the study itself, is the role of relatives and friends as a source of support and sustenance.

Whilst the study concluded that there was no association between seeing a relative regularly and tenancy sustainment, it notes that 81 per cent of respondents were in touch with at least one family member or relative at resettlement and that this increased to 84 percent over the next 15/18 months. The study also showed that many resettled people received both practical help and emotional support from family and friends. For those respondents who had ceased to be tenants at 15 to 18 months, those with no regular family contact were more likely to return to a hostel or the streets, while those who had contact were more likely to stay with relatives. It appears that, at the very least, contact with family and friends prevent a return to rough sleeping.

Taking into account the significance of ETE and areas of unstructured, non-professional support, there appears to be some evidence that the priorities of resettlement and tenancy support workers need to be re-ordered. This would entail a shift

away from the practical orthodoxies of focusing on managing the flat, welfare benefit calculations and rent payment, towards helping people increase their employability, strengthen their social networks and seek ways of sustaining themselves, without needing to remain reliant on professional support staff. Given the likelihood of further pressures on commissioners’ budgets and a reduction in funding for supported housing, there is also a pragmatic driver that should encourage reflection on creating a more sustainable support model based on enabling clients to develop organic structures that reduce reliance on sometimes precarious formal support services.

Conclusion

The article restricts itself to analysing the familiar, traditional areas selected by the researchers and collaborating organisations that are associated with preparation for independent living. Yet there are tantalising glimpses of wider societal influences that can impact on resettlement which are covered in the FOR-HOME report, notably in the chapter entitled ‘Settledness, Morale and Aspirations’ that tentatively explores the quality of resettlement measured through, for example, wellbeing that it would be useful to interrogate in more detail. It would be enormously beneficial to dig deeper into these areas as we continue to track the resettled cohort and collectively seek solutions that don’t simply prevent a reoccurrence of homelessness but help people live satisfying and enriched lives. It is highly likely, in my view, that to achieve this higher objective the core of the support will need to be provided by natural, mutually beneficial social networks rather than via funded support services for the homeless.

Swimming Can Better be Learned in the Water Than Anywhere Else

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Introduction

As Crane *et al* (2012) note in their contribution to the debate on ‘settling’ homeless people, there is no doubt that many homeless people with complex problems will need on-going support in order to sustain a regular tenancy, and to make further progress towards social inclusion. So the issue is not about support being useful for sustaining a tenancy. The basic philosophy of Housing First and Rapid Rehousing Programmes is to provide homeless people with housing as quickly as possible, and to offer the support needed to those who are re-housed while they are housed, instead of postponing their re-housing until they are deemed “housing ready”. One of the main reasons for promoting rapid rehousing instead of sophisticated “preparation” systems is mentioned in the article by Crane *et al* (and quoted by other respondents), but it is not really taken seriously by the authors of the article under review. It is the fact that otherwise most of those people who are homeless and have “problems” will just keep being excluded from mainstream housing and having to rely on temporary accommodation and informal solutions (sofa surfing, staying temporarily with relatives, etc.). The fact that “only 20 percent of departures of London’s hostels in 2008/2009 were into independent accommodation, while 39 percent were evictions or abandonments” (Crane *et al*, 2012, p.23) is mentioned in the article, but what does this mean for the main message of the authors, that “the longer (up to three years) a homeless person spends in supported accommodation, the greater is his or her preparedness for independent living” (*ibid*, p.34)?

However, in order to see where homeless people end up after spending years in the “secondary housing market” (Sahlin, 2005), the authors would have had to look at all users of temporary accommodation with support, and not just at those who have managed to reach the “final” stage of getting a regular flat. And very obviously

the results of such an analysis would have been depressing, showing the poor outcomes of such a system for a considerable part – if not the majority – of homeless people. Jeremy Swain, responding to the article in this issue, has added some more evidence on this for London and both Sahlin and Swain have pointed out in their responses that those making progress in the sector of hostels and shared accommodation are probably those with lower support needs and more resources.

Housing First and Housing Ready

It is important to emphasise some of the most relevant misunderstandings between a “housing ready” approach, which is apparently backed up by Maureen Crane and her colleagues, and the Housing First and Rapid Rehousing approaches which are increasingly promoted in many European countries (and indeed elsewhere), in order to reduce homelessness effectively – but are still far from being “mainstream” in most EU member states.

While Housing First and Rapid Rehousing approaches do not ignore at all the need for support of their clients, such approaches are based on the conviction that support (or “training” as Crane *et al* call it) to enable tenancy sustainment is more effectively provided if people are quickly provided with a tenancy, just as learning to swim is much easier when practising in water. The principle is also called “learning by doing”! It seems so obvious that managing a tenancy, getting on with neighbours, paying the bills and turning a house into a home is best practiced under “real” conditions in a self-contained permanent tenancy with the perspective of staying there, rather than in a communal or other institutional setting, where other requirements have to be met, or in “second stage projects” where one has to leave when one is considered “ready”, resulting in a complete cut off of relations to the community in and around the accommodation. When support needs diminish it should be the service providers who withdraw and focus on other users, and not the service user who has to leave the place where he or she has settled.

Intensity of support needs might differ greatly between formerly homeless individuals, and a significant number might not need any specialised support. It is important to acknowledge that support provided can only be effective if “co-production” takes place between providers and users of such support. Hence the particular emphasis in the Housing First approach on service user’s choice, and on taking client’s individual needs and preferences seriously when offering support to them. Such an individualised approach is much easier to realise in scattered housing than in any congregate “preparatory” setting. And ensuring “ontological

security” (Padgett, 2007) as the basis for further social integration can only be established in a situation where people have a place where they know that they can stay, develop their own perspective and get support as long as they need it.

The fact that Crane *et al* (2012), in their analysis for their article in the European Journal of Homelessness, do not distinguish in their sample from those who received support *after* being re-housed, and those who haven’t, suggests the downplay of the importance of providing floating support in housing (though in their full report, some influence of – often very low intensity – tenancy support on the probability of rent arrears and evictions is reported, see Crane *et al*, 2011, p.85). Their thinking is still largely dominated by the inappropriate alternative of either (1) providing specialised support outside the regular housing market in time limited special “preparation” settings, or (2) of living completely independently without any specialised floating support in regular housing. With Housing First and Rapid Rehousing approaches this traditional dichotomy is rejected, the time spent in temporary accommodation should be reduced to an absolute minimum and specialised support can nevertheless be provided if needed and as long as it is needed while formerly homeless people live in regular permanent housing.

Conclusion

The evidence that with the Housing First approach, even those homeless people with severe and complex support needs are able to sustain a permanent tenancy in the great majority of cases (and without spending years in any “preparatory” accommodation) is now overwhelming, not only in the US (see Tsemberis, 2010a and 2010b, for an overview), but also in Canada (see Goering *et al*, 2012; Gaetz *et al*, 2013), Europe (see Busch-Geertsema, 2013, summarizing positive results of four European “test sites”, and Pleace and Bretherton, 2013, with positive results of a Housing First project in London) and elsewhere. There is no reason (except for the vested interests of some service providers providing temporary shelter or hostel type accommodation, and the very relevant issue of barriers to permanent housing for marginalised groups), why other homeless people, with less severe support needs should have to endure “preparatory periods” of several years before they are re-housed, if the necessary support can just as easily and much more effectively be provided in regular permanent housing. Housing First does not make professional support redundant and there remains much to do for service providers in delivering the required levels of effective support in regular, self-contained and permanent housing.

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Responses to “The
Discourse of Consumer
Choice in the Pathways
Housing First Model”

Part F

Consumer Choice in Housing First

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Introduction

Hansen LÖfstrand's and Juhila's (HL & J) article in last year's open edition of this Journal (Hansen LÖfstrand and Juhila, 2012) is an important contribution to debates about Housing First. The progenitor of what is now a global Housing First movement is Pathways Housing First (PHF) in New York. HL & J employ Foucauldian discourse analysis of the PHF 'manual' (Tsemberis, 2010a). Their key argument is that PHF effectively employs attempted behavioural modification as a 'solution' to chronic homelessness in a way that mirrors the underlying philosophy of the 'staircase' or 'linear residential treatment' models that PHF was nominally designed to replace.

... having analysed the discourse of consumer choice in the PHF model, our conclusion is that the two models should not be seen as entirely different, as they both aim to support clients' independence, motivation and recovery; in other words, both aim to render people as self-responsible as possible. (Hansen LÖfstrand and Juhila, 2012, p.64)

Others have found what they regard as significant holes in the evidence in which Housing First surrounds itself, for example in how efficiently Housing First delivers improvements in drug and alcohol use or how cost effective it is (Johnson *et al*, 2012), and also suggested selective use of evidence when Housing First has been positively compared with staircase services (Kertesz and Weiner, 2009; Rosenheck, 2010; Stanhope and Dunn, 2011). However, HL & J are among the first to raise questions about the underlying *philosophy* of Housing First and perhaps the first to question how much of a distinction there really is between Housing First and staircase services. The critique to which HL & J subject PHF and, by extension, other Housing First services is potentially fundamental. In questioning the philosophy of Housing First, HL & J are criticising how the evidence about Housing First is being *interpreted* and questioning whether current understanding of how and why Housing First appears to be 'effective' is actually correct.

Questioning Conventional Views of Housing First

Robust evaluations of Housing First services indicate that they can end chronic homelessness for around 80 per cent of the people they work with, although the figure is often higher (Tsemberis, 2010b; Goering *et al*, 2012; Benjaminsen, 2013; Busch-Geertsema, 2013). Sustained exits from chronic homelessness are achieved at rates that often approach double the levels achieved by staircase services (Pleace, 2008). This ability to end chronic homelessness has been demonstrated across a range of Housing First service models, which share a common philosophy, but which differ in the detail of their operation, in the European Union, Canada and the USA (Pleace, 2012; Busch-Geertsema, 2013).

Staircase services are seen as reflecting a pre-modern and later a Neo-Liberal construct of what 'chronic homelessness' is. In this construct, say the critics of staircase services, chronically homeless people are simultaneously viewed as mentally ill and incapable, and yet as also capable of consciously making 'bad' choices that initially cause and then sustain their homelessness (Carlen, 1994; Lyon-Callo, 2000; O'Sullivan, 2008). Staircase services, say the critics, assume that the only route away from chronic homelessness is to have one's health problems treated and have one's 'bad' behaviour, particularly around drug and alcohol use, changed (Dordick, 2002).

Housing is a 'reward' for compliance with behavioural modification in staircase services. In the most extreme form of staircase service, this means adherence to strict rules, total intolerance of alcohol and drugs and complete compliance with medical treatment, i.e. showing and demonstrating a 'willingness to change' to reach the ultimate goal of rehousing. However, while the same logic is pervasive in staircase models, different degrees of flexibility and tolerance can exist (Pleace, 2008). There is widespread evidence of large scale attrition and stagnation in staircase services, i.e. a majority of chronically homeless people either disengage or get 'stuck' unable to ever complete enough 'steps' on the staircase to reach housing (Sahlin, 2005; Busch-Geertsema and Sahlin, 2007; Tsemberis, 2010a; 2010b). Crucially, these failures are widely interpreted as being as a direct result of the *philosophy* of staircase services (Pleace, 2008), with only a few voices suggesting other issues, such as insufficient resources, may be causing failures in the staircase model (Rosenheck, 2010).

By contrast, in the literature that supports it, Housing First is portrayed as recognising and respecting the human beings who are chronically homeless and, crucially, in recognising and respecting their *choices*. Choice is portrayed as the core of Housing First, it is also the reason given for success, because the humanity of chronically homeless people is recognised, their rights are respected and they can exercise choices over which services they use and, in the PHF model, some

choice over where they live. The separation of housing and support is fundamental to how Housing First works, setting relatively few conditions, when compared to a staircase service, on accessing and keeping housing (Tsemberis, 2010a; 2010b). In allowing choice, the choice to not stop drinking, using drugs, or whether or not to engage with treatment, and still providing housing, Housing First is widely seen as philosophically distinct from staircase services (Pleace, 2012). Crucially, it is this philosophical difference that is widely seen as explaining why Housing First is effective (Busch-Geertsema, 2013).

HL & J are not the first to question the underlying logic and philosophy of Housing First (Stanhope and Dunn, 2011). However, their argument that staircase services and Housing First ultimately seek the *same* thing, i.e. behavioural modification as the solution to chronic homelessness, and differ mainly in the techniques employed, is innovative. Metaphorically, HL & J are asserting that PHF nudges, whereas staircase services push, chronically homeless people towards the same goal. For HL & J, Housing First is another example of advanced liberalism in which subjects work on themselves to achieve 'responsible autonomy'.

The Case for Hansen Löffstrand and Juhila

There are those in the United States of America who argue that Housing First is much less effective than is claimed. However, several critics attack Housing First from what might be called a staircase standpoint, seeing failure in terms of Housing First not delivering enough behavioural modification. Housing First is criticised as creating a kind of dispersed containment system, in which chronically homeless people are kept off the street and out of emergency shelters, while the behavioural problems that 'cause' their chronic homelessness are not addressed (Kertesz and Weiner, 2009). However, there are gains in mental health, improvements in well-being and reductions in drug and alcohol use across a range of Housing First projects, and even if those positive effects are not uniformly present, they are still occurring (Johnson *et al*, 2012). Existing research undermines the argument that Housing First is 'only' providing housing and 'not' meeting any other support needs (Pleace, 2012; Busch-Geertsema, 2013)

HL & J have what might be termed the opposite concern about Housing First to that voiced by American critics, i.e. that Housing First is too focused on behavioural modification, that it is too *similar* to the demonstrably flawed staircase service model. If this concern is substantiated, it raises fundamental questions about how Housing First portrays itself and ultimately about how effective it may be in the long term.

PHF was developed in a society in which individuals are often seen as becoming chronically homeless in terms of a kind of individual 'narrative'. A considerable amount of American research on homelessness is by ethnographers, clinicians and psychologists, disciplines that focus on individual needs, characteristics and experiences, rather than on external variables (O'Sullivan, 2008; Lee *et al*, 2010). In Northern Europe, chronic homelessness is perhaps more likely to be seen as resulting from complex, nuanced interrelationships between society and an individual (Join-Lambert, 2009).

PHF does have specific goals centred on normalisation. These goals are centred on the idea that giving formerly chronically homeless people an ordinary home in an ordinary neighbourhood will generate ontological security. PHF seeks to deliver a settled home, which is part of a community, with the goal that by enabling them to live within and relate to society in the same way the rest of us do, formerly chronically homeless people can become a part of society (Padgett, 2007; Johnson *et al*, 2012; Tsemberis, 2010a; 2010b). Alongside this, there is the use of harm reduction with a recovery orientation. PHF seeks reductions in, and if possible cessation of, drug and alcohol use and also seeks treatment compliance. PHF seeks to support choices that will reduce harm and encourage ontological security and social integration.

There are also some controls: to use PHF, someone must agree to the weekly home visit from support workers and is required to sign a lease agreement, which includes paying 30 per cent of income towards the rent. Apartments are often sub-let, with PHF holding the actual tenancy, and while this means people using PHF can be quickly moved if the need arises, their housing rights are also less than if they had their own tenancy (Tsemberis, 2010a; Johnson *et al*, 2012).

Contrast the situation of a PHF service user, with a chronically homeless person housed under the terms of British homelessness legislation who is offered a mobile, tenancy sustainment support service once they have been housed (CHR, 2012; DCLG, 2013). That individual has a legal right to housing, which is separately administered from any support service. Their social or private rented tenancy is exactly the same as for any other citizen. If that person is approached by a tenancy sustainment worker offering low intensity housing related support and case management (Pleace and Quilgars, 2003a), they can simply refuse to engage with no consequence. The tenancy sustainment worker has no influence on their housing situation, and support and health services can only be forced on an individual who is sectioned under mental health legislation as a danger to themselves or others, a procedure that can be subject to judicial review. The evidence base for British services is admittedly less robust than that for Housing First (Pleace and Quilgars, 2003b), but there is nothing to suggest that giving formerly or potentially chronically

homeless people *full* control over access to services and *complete* housing rights, i.e. treating them the same as anyone else, is a recipe for failure (Pleace, 1997; Lomax and Netto, 2008). Recent research on the use of Housing First services in Europe has shown that some Housing First services give equal levels of choice, control and housing rights to service users (Busch-Geertsema, 2013) to those found in Britain.

Looking at Housing First from this perspective, it can be seen that it was developed in a society that is likely to see chronic homelessness in terms of individual pathology, that Housing First does pursue a normalisation/behavioural modification agenda and, as in the case of PHF, does exercise some control. Housing First might nudge and support where a staircase model pushes, but if, as is argued, Housing First is successful because it enables choice, then the model could be criticised for not having the full courage of its convictions, for holding back. In other words, PHF could be criticised for not fully embracing the paradigmatic shift it appears to advocate. Instead, Housing First holds on, at least a little, to the familiar, to the idea that chronically homeless people cannot be treated exactly the same as everyone else, that their route out of homelessness can only be through benignly intended, but nevertheless ultimately surveillant, services that seek to modify their behaviour.

The Case against Hansen Löffstrand and Juhila

However, HL & J are, arguably, at least partially incorrect in their interpretation of PHF and Housing First more generally. There are two main points here. First, it cannot be assumed that a shared 'normalisation' or behavioural modification agenda means that Housing First services interpret chronic homelessness in an *identical* way to staircase services. An eighteenth century doctor might seek to cure disease in ways that might horrify an early twenty-first century doctor, the goal of each physician would of course be the same, but their diagnosis, approach and probably their attitude towards their patient's opinions would all be very different. Shared goals do not automatically mean shared assumptions, attitudes or techniques. Second, it can be argued that the differences between Housing First and staircase services are much more fundamental than any similarities. While there is shared ground between Housing First and staircase services, centring on a 'normalisation' agenda, the extent and the limits of that shared ground must always be seen in a wider context. This relates particularly to the roles of choice and tolerance found in Housing First.

Proponents of PHF see chronically homeless people in broadly positive terms, as fellow human beings who can be capable, who are worthy of respect and who should not be simplistically 'blamed' for what has happened to them and, crucially,

as people who should be able to exercise choices that should be respected (Tsemberis, 2010a; 2010b). There are caveats to this, those caveats, as HL & J point out, are surveillant; PHF does exercise some controls and does have an agenda centred on changing behaviour. However, the balance between choice and control in Housing First is crucially important. A staircase service is weighted heavily towards control. Pathways Housing First is close to the opposite, indeed there is so much more emphasis on choice as to make Housing First near-antithetical to the staircase model. British and other European examples show it is possible to go further than PHF does in giving chronically homeless people choices, but Housing First still represents a transformation in service design, it is not the same as the staircase model (Pleace, 2012).

When considering this point, it is important to remember why some people really do not like Housing First. If one believes in the Neo-Liberal construct of chronic homelessness, one expects the problem to be solved largely through behavioural modification. Housing First services not only challenge, but actually fracture, the Neo-Liberal narrative of what chronic homelessness is. Housing First sustainably houses a majority of chronically homeless people, but those people are, certainly initially and quite possibly for several years, often *still* mentally ill and *still* using drugs and alcohol (Kertesz and Weiner, 2009; Fitzpatrick-Lewis *et al*, 2011). This fractures the Neo-Liberal narrative, because it flatly contradicts the supposed 'truth' that underpins that belief system, i.e. to solve what is conceptualised as 'their' problem, a chronically homeless individual has to be 'willing to change'.

There is another related point here and it centres on what might be termed the tolerance that Housing First exhibits. For HL & J, part of what makes PHF an example of advanced liberalism is that a point can be reached, after several attempts at housing have failed, where someone using PHF has to 'earn' another chance and may eventually be referred to another type of service (Hansen Löffstrand and Juhila, 2012, p.64). For HL & J, this illustrates that, ultimately, non-compliance with behavioural modification results in expulsion from PHF.

Yet if the detail of how Housing First services actually operate is considered, taking the specific example of PHF, the picture could also be interpreted as one of tolerant persistence. PHF works as an efficient machine to keep service users housed, as sub-leasing allows for rapid re-housing as needed, and can potentially be deployed repeatedly (Johnson *et al*, 2012). Support is equally persistent too, as well as tolerant and on-going, indeed PHF has supported formerly chronically homeless people for years *without* seeing changes in drug and alcohol use and mental health, alongside recording 'positive' changes for some service users (Padgett, 2007).

Housing First has been specifically criticised for not promoting behavioural change and for not having clearly enough defined goals, in areas like socioeconomic integration, once re-housing has occurred (Kertesz and Weiner, 2009; McNaughton-Nicholls and Atherton, 2011; Johnson *et al*, 2012). This raises a question about how far it is possible to really talk about Housing First 'nudging' while the staircase model 'pushes' for behavioural modification. Using PHF does mean seeing a support worker once a week, paying 30 per cent of income towards rent, and compliance with the terms of a lease. Harm reduction services are available if they are requested, yet, to take one example of the extent of choice that is available, a PHF service user does not *ever* have to stop drinking alcohol to continue to receive PHF support.

Housing First does use the language of behavioural modification, this is perhaps because this language is so far engrained into American policy responses to chronic homelessness that it is expected. The language of behavioural modification was also perhaps difficult to fully leave behind because of the sheer scale of the paradigmatic leap required to entirely stop talking and thinking in those terms.

Conclusion

When Britain adopted the homelessness legislation in the late 1970s, the policy was based on an assumption that homelessness was fundamentally due to economic inequality, housing market failure and unmet health and support needs. The original law used priority access to social housing, which was combined with support from the welfare system, to 'correct' that social problem. The law literally gave homeless people somewhere adequate to live and the welfare system paid their rent and other bills if they could not do so themselves. Yet when Britain introduced what was, and indeed still is, a progressive policy, it was simultaneously *unable* to let go of the idea of irresponsible and deviant individual behaviour as a core cause of homelessness (Philips, 2000). The result has been that, while some chronically homeless people are re-housed through the statutory system, access to that system has historically been very uneven, because the system uses a series of tests that are designed to exclude those whose homelessness is *assumed* to result from their own behaviour. An entire subgroup of 'single homeless people', including people with severe mental illness, problematic drug and alcohol use and histories of sustained and recurrent homelessness, were often unable to meet the eligibility criteria set by the homelessness law (Anderson and Morgan, 1997). Although the law has been liberalised since the 1970s, pressures of demand on social rented housing stock, social landlord reluctance to house chronically homeless people and staff attitudes that closely reflect the attitudes towards chronically homeless

people that staircase services are sometimes criticised for, can all lead to inequity of access to the statutory system (Hunter, 2007; Bretherton and Pleace, 2011; Reeve with Batty, 2011; Bretherton *et al.*, 2013).

The British example suggests that expecting paradigmatic shifts in homelessness policy to happen all at once, and perhaps, to expect such policy shifts to ever be entirely logically consistent, may be unrealistic. Pathways Housing First may not have abandoned all the old ideas about behavioural modification and the associated images of chronic homelessness as individual pathology that go along with it, but the distance between PHF and a staircase service is, nevertheless, very considerable. When considering the consistencies that do exist between the old way of doing things and the innovation that is represented by Housing First, it is important to consider just how much of the old approach Housing First has left behind. There are inconsistencies, but there is also a great deal of clear water between PHF and the staircase approach.

The work of Hansen HL & J adds significantly to the critical thinking that is starting to be done about Housing First. In particular, their work helps us begin to think specifically about what it means to use Housing First in the European Union and the need to think about how American ideology and culture influences American service design. Alongside the strengths of Housing First, which on current evidence does appear to provide a solution to chronic homelessness of unprecedented effectiveness, it is important not to lose sight of the need to constantly appraise the use of the Housing First approach in Europe.

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Choices, Consequences and Context: Housing First and its Critics

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Introduction

Hansen Löfstrand's and Juhila's (HL & J) thoughtful article (2012) offers an interesting perspective on a growing phenomenon in homeless services known as Housing First (HF). Their point of departure is the HF manual (Tsemberis, 2010), a guide for programs seeking to adopt this innovative approach to serving homeless adults with serious mental illness. The author of the manual, Dr. Sam Tsemberis, founded Pathways to Housing in New York City in 1992 as a real-world embodiment of the abstract notion of housing as a right for those suffering from mental illness and living on the streets. The Pathways version of HF (PHF) offers immediate access to independent housing and support services and does not require treatment or abstinence to remain housed.¹ As a tiny upstart, PHF managed—primarily through rigorous research showing positive outcomes—to capture high-level government endorsements in the U.S., Canada and other countries. Those research findings, coming from a randomized experiment comparing PHF with the dominant 'staircase approach', included higher rates of housing stability (Tsemberis *et al*, 2004), greater sense of choice (Greenwood *et al*, 2005), and reduced use of drugs and alcohol despite a more tolerant harm reduction approach (Padgett *et al*, 2011).

The rapid increase in popularity of PHF is evidenced by its widespread adoption and its powerful government proponents—the Veterans Administration in the United States, the national government in Canada, and the European Union. Not surprisingly, research on the model has expanded considerably beyond the original study

¹ The term 'Housing First' has come to be defined in different ways as the model has been disseminated widely. Thus, some programs self-identify as HF but do not conform to the tenets of the model (Tsemberis, 2010), e.g., they provide immediate access to housing but it is congregated and supervised.

by Tsemberis and colleagues to include tests of its applicability in different places and with different populations. Closer scrutiny of the basic tenets of PHF has been included as well as its varied forms of implementation.

Governing Homeless Subjects

In their article, HL & J apply Foucauldian discourse analysis to the PHF manual's portrayal of consumer choice, the latter a key element of the model's operating philosophy. Following Miller and Rose (2008), they connect PHF consumer choice to an "advanced liberal way of governing subjects" (p.49) in western societies characterized by a presumption of rational choice and individual agency. Their findings, presented as seven inter-related statements on how choice is configured for clients in PHF, offer a roadmap to understanding how a key aspect of the PHF philosophy is shaped by real-world impingements. The authors conclude that PHF -wittingly or unwittingly- reflects advanced liberalism's tenet that "subjects are governed to make them responsible choice makers" (p.47). As a consequence, wrong choices, e.g., violating tenant agreements, can lead to discharge from the program.

Absent the larger context in which the model operates, one can find little fault in calling out PHF for not fully practicing what it preaches – but that larger context beckons. Two points come to mind, both related to the massive homeless 'industry' that has dominated services within the United States for the past three decades, a complex system of services organized along a staircase approach to achieving 'housing worthiness' rather than offering immediate access to permanent independent housing (Sahlin, 2005). First, violating consumer choice via involuntary discharge (a key point made by HL & J) is quite rare since in the PHF model tenants are offered another apartment (or the same apartment) if evicted or institutionalized. Such an accommodating policy is virtually unknown outside of the PHF approach. This leads to a second point; close-up examinations of PHF are fine as far as they go, but a decontextualized critique offers a limited and somewhat misleading perspective.

PHF was established to counter a dominant approach predicated on behavioural restrictions deemed necessary for the personal reformation of mentally ill clients. Thus, access to housing and services is offered along an upward continuum of deservingness, in essence leveraged to ensure adherence to medication compliance, abstinence, curfews, and mandatory urine testing among other rules (Allen, 2003). In these programs, producing 'responsible choice makers' is *the* governing principle since moving up the staircase requires numerous and daily forms of behavioural adherence. Dropout rates as high as 54 percent have been observed compared to 11 percent for PHF clients (Padgett *et al*, 2011).

Consumer Choice and Harm Reduction

PHF’s rapid growth in popularity and high-level endorsements has lent it the appearance of a juggernaut, especially when viewed from the perspective of providers mandated to implement it despite any misgivings. Service providers working with homeless mentally ill clients, especially when those clients also abuse drugs and alcohol, express discomfort with the PHF tenet of choice (bad choices are considered responsible for the client’s predicament in the first place). A key element of the PHF model—harm reduction—heightens the opposition among those who believe that abstinence is necessary.

Practitioners’ doubts about consumer choice and harm reduction can be seen as natural resistance to a fundamental change in practice values that erodes their power and hard-won expertise. Such doubts have received support in a study of HF for adults with active cocaine abuse as their primary diagnosis (Kertesz *et al*, 2009). Interestingly, findings that PHF does not produce the same benefits for this population have been cited as refuting the effectiveness of the HF approach in general (Kertesz and Weiner, 2009). Meanwhile, applications of the model for clients with severe alcoholism in Seattle have yielded significant cost savings and housing stability favouring PHF (Larimer *et al*, 2009).

Other concerns have been raised about the applicability of the PHF approach to non-U.S. venues such as Western Europe (Pleace, 2011). A scarcity of apartments in tight housing markets, social norms of co-habiting rather than solo living, and resistance to harm reduction are a few of the objections that have been raised. The widespread existence of social housing outside of the U.S. (where subsidized housing is extremely limited by comparison) has been cited as a more desirable and culturally consonant alternative to HF, leading some to argue that they ‘are already doing it’ when asked why they have not adopted PHF (Johnsen and Teixeira, 2012).

Advanced Liberalism and Homelessness

HL & J critique comes from yet another place: The fertile plain of academic discourse where critiques of Western neo- (or advanced) liberalism are common. With its core values of individualism, free markets and limited government, neo- or advanced liberalism has been cited as the philosophical rationale for steep declines in social welfare spending. Others besides HL & J have registered similar concerns. Thus, noting a connection between PHF’s rational choice ethos and the political philosophy of its governmental early adopters, PHF is criticized for the powerful neo-liberal company it keeps (Klodawsky, 2009) and for its failure to achieve higher-order goals such as social integration (Hopper, 2012). Klodawsky points to a suspicious alignment of PHF’s cost-saving ‘street removal’ benefits with a conservative

political agenda, and warns that PHF's adoption undermines collective activism by and on behalf of the homeless. She cites the Toronto city government's 'aggressive' embrace of PHF as undermining homeless advocates' pursuit of their right to occupy public space (2009, p.591). PHF advocates also show a "worrisome disregard for the considerable benefits that some individuals reap from living in supportive, congregate, or group settings..." (2009, p.592). Similarly, Hopper faults supported housing programs (another term for HF) for failing to bring about social integration. Instead, they function as "abeyance mechanisms" (2012, p.461) that, along with jails and asylums, serve a repressive social agenda of isolating and marginalizing those deemed less worthy.

HL & J concede that there are empowering aspects of choice in PHF, from having immediate access to an apartment of one's own, to choosing whether to comply with medication prescriptions, to deciding whether to drink or use drugs. Their main argument, however, centers on limits to choice, violations of which can result in discharge from the program. Yet these are the same legal prohibitions confronting all renters such as dealing or using illicit drugs, damaging the premises, and acts of violence and as mentioned earlier, this typically results in moving to another PHF apartment rather than to the streets.

Other reasons for PHF's choice-limiting are less visible to critics unfamiliar with local funding strictures, i.e., strings attached to the state and local government contracts that keep PHF programs solvent. In order to obtain funding in New York State, for example, PHF staff are required to make regular apartment visits, the latter mandated as best practices and, in some circles, viewed as more respectful of the client than requiring office visits.

HL & J identify limits to choice in an avowed 'high choice' program and for that PHF can be held accountable, even if these limits are not the 'choice' of PHF but mandated by government contracts and socio-legal norms governing permissible behaviour for renters. However, expanding the context for scrutinizing PHF would be incomplete without mentioning two additional points: 1) the absence of research demonstrating effectiveness of non-PHF programs with far different philosophies (Parsell *et al*, 2013), and 2) the choices expressed by service users themselves. Here, there is little dispute. The continued dominance of non-PHF 'staircase' approaches to homeless services (at least in the United States) is predicated on a virtually non-existent research database. And, when considering the significance of choice as done by HL & J (2012), it is useful to note that the overwhelming majority of homeless adults prefer PHF over the alternative – clients in PHF also report having more choice in their daily lives (Greenwood *et al*, 2005).

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This does not mean that there are some who do *not* prefer PHF, either wanting to live with others rather than alone in a scatter-site apartment or feeling a need for more structure and rules governing daily life. It is crucial to note, however, that those who do not want to live alone rarely if ever want what the staircase approach offers—sharing living quarters with other program enrollees. The importance of privacy and autonomy, especially for those having had so little of either, should not be overlooked.

From the lofty realm of academic criticism, PHF might well appear to be doing the dirty work of the state, sweeping the homeless off the streets and seducing them with a faux sense of empowerment while in fact concealing and co-opting them. Invoking the trope of neo-liberal (or advanced liberal) policies, PHF produces responsible choice-makers even as it falls short of its promise to honour their choices. The PHF approach is not a panacea. There is without doubt a small but troubled minority of consumers whose addiction, cognitive impairment, or previous traumas are too damaging to live safely on their own. PHF tenants do get lonely and they ask ‘what’s next?’ existential questions made possible by having a safe, secure and non-surveilled place to live (Padgett, 2007). This secure base is needed to pursue other life accomplishments, but it does not guarantee success in doing so. But having choice in many areas of one’s life—and having a home—can bring substantial benefits that alternative approaches have yet to demonstrate with rigorous research.

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Responses to “Varieties
of Punitiveness in
Europe: Homelessness
and Urban Marginality”

Part G

On “Varieties of Punitiveness in Europe”: A View from the United States

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Introduction

In early November 2012, the residents of Berkeley, California, were asked to consider (not for the first time) a ballot initiative that would have created a new sit-lie law. The “Berkeley Civil Sidewalks” initiative – Measure S – like so many of its brethren around the country sought to outlaw sitting or lying on sidewalks in districts zoned commercial between the hours of 7 am and 10 pm, except in cases of medical emergency, or by someone in a wheelchair, on a permanent bench or bus stop, at a street event for which a permit had been received, or in an outdoor café. Violators would be subject to a \$75 fine (or the equivalent in community service) for a first offence; subsequent offences could be charged as misdemeanours. Before a citation could be issued, police would be required to issue a warning and the offender given a change to desist; warnings were to be effective for 30 days (City Attorney, 2012).

Supporters of the law, including the mayor and some city councilmembers, various merchants associations, and an organization called Livable Berkeley, argued that such laws had proved effective in more than 60 US cities, and that Berkeley was being asked to consider it now only because all previous efforts in what they called a “humanitarian city” had failed to dissuade the formation of “street encampments” nor to disperse those who “resist our help.” If passed, the measure would not come into effect until July 2013 to give time for outreach workers (who were really Business Improvement District-paid “ambassadors”) to educate street populations about the new law. For that reason, advocates argued, a primary purpose of Measure S was to “help people get social services”, as well as to “help merchants grow local jobs, and ensure civil and welcoming sidewalks for everyone” (Arguments in Favor, 2012).

Opponents, who included other city council members, some merchants, the American Civil Liberties Union, the University of California, Berkeley student government, and various interest groups, noted there were four homeless people

in Berkeley for every shelter bed, and that the shelter shortage was particularly acute for homeless youth who seemed most directly targeted by the initiative. They argued that “ambassadors” were not trained in mental health or homeless outreach. They noted that a San Francisco City Controller’s report had found that city’s law – upon which the Berkeley initiative was based – had “failed ‘to improve merchant corridors, serve as a useful tool for SFPD, connect services to those who violate the law, and positively contribute to public safety’” (Rebuttal to Arguments For, 2012). They questioned how criminalizing sidewalks would, as advocates asserted, “help people get the services they NEED to transform their lives” (Rebuttal to Arguments Against, 2012).

Though proponents outspent opponents by a factor of 10-1, Berkeley residents rejected the initiative, 52-48 percent. It was the first time since 1994 that voters in any city in the US rejected a ballot measure “criminalizing homelessness” (Messman-Rucker, 2012). This was, I think, a heartening result: A sound rejection of yet another attempt to punish poor people for their status and to divert attention from the structural factors that make homelessness a *condition of society* more than an *attribute of individuals*. But we should not read too much into it. After all, it was the *first* popular rejection of an anti-homeless law in almost twenty years – and that previous rejection was also in Berkeley. And even more, as O’Sullivan argues for Europe, “the historical record shows that a *core response to homelessness was always punitive*.... While the underlying motivations may have shifted over time from controlling landless labourers to gentrifying city centres, a punitive element has been ever present”(2012, p.88). O’Sullivan was making a particular point: He was arguing against assuming that punitive or “revanchist” approaches to managing homeless populations is *necessarily* an import from the US; it is too simple to hold a “good” (if perhaps susceptible) Europe up against a “bad” (though powerful) America.

Punitiveness in Europe and the US

A punitive element has ever been present on both sides of the Atlantic (after all the US colonies adopted British or Germanic poor laws and vagrancy statutes wholesale), and so has resistance to it, by homeless people themselves, by activists, and, every once in a while, by the broad populace itself (as with Washington DC voters’ adoption of a “right to shelter law” in the early 1980s, and Berkeley’s serial rejection of sit-lie laws). But neither should such occasional popular support for the rights of homeless people and against their further criminalization, any more than the occasional infusions of state-cash into jerry-rigged, volunteer shelter systems, occasional victories by advocates in the courts to annul anti-homeless laws, or policy innovations such as Housing First, be seen, as some now do (Clove *et al*,

2010), as somehow negating the thesis that we live in particularly revengeful times (Smith, 1996). This popular support does not negate either that we live in an era marked by a particular absence of social justice as an organizing force of city-space, and thus in control over homeless people’s lives (Mitchell 2001). Indeed, the Berkeley initiative lost as much on pragmatic grounds – opponents were very effective in convincing voters of the ineffectiveness of similar laws – as on a sense of what was just and right.

But more to the point, what the Berkeley vote indicates is that “varieties of punitiveness” result from struggles over specific innovations in policy, governance, and policing. Homeless policy is both an arena of struggle and an outcome of struggle, not something that just descends on places or even whole countries in the abstract. As O’Sullivan (2012, p.79) notes, drawing on Wacquant (2009), marginal populations are typically managed in three ways: Socializing them, medicalizing them, and penalizing them. As the incarceration rates O’Sullivan (2012) provides indicate, at least parts of Europe seem to be retreating from the first and relying more heavily on the third. Discourses and practices of medicalization are explicit, but all three strategies require understanding homelessness as an individual attribute. None of the three does anything about homelessness as a societal condition. Even housing, in relationship to homeless populations, is understood as an intervention into individuals’ lives not as an intervention into the housing question as such (which as we have known since at least Engels, the bourgeoisie has no answer to anyway).

Punitiveness and Housing First

This is especially the case with Housing First, which O’Sullivan (2012, p.81) indicates is gaining in popularity across the EU. It is vital to understand that Housing First’s originators *did not* develop it as a housing program but rather as a treatment program. They were very explicit about this, making it clear that Housing First was targeted at a particularly small slice of the homeless population – a “recalcitrant” or “hard core” 10 percent or so. The other 90 percent of the homeless population – children, families, working poor, in other words victims of homelessness as a *societal condition* (or, really, a political-economic one) – is not meant to be part of the enormously expensive Housing First experiment which is, now, the centrepiece of just about every federally-mandated city-level “Ten-Year Plan to End Homelessness” (cf. Mitchell, 2011). Housing First does not seek to end homelessness. It seeks instead to manage what is understood as a *pathology* of individuals, and to do so by first offering the soft-side of the punitive stick: If “hard-core” homeless people can stay in a subsidized apartment, subject as much to the discipline of the lease as to the peering gaze of the case worker (Hennigan, 2013), then perhaps they can stay out of (the even more enormously

expensive) jail. Housing First is certainly a mode of socialization; it also relies on a medical and individualizing explanation for homelessness. But it is *also* a punitive strategy; only here the punishment sits just over the horizon, rather than directly in the baton of a cop rapping the feet of a sleeping street person. This is the “dual strategy of punitive responses to non-service compliant homeless people, and the provision of housing placement and supportive services for those who engage with services” that O’Sullivan (2012, p.81) talks about, only it parcels the homeless populations out – in fact it flips on its head the dialectic of deserving/undeserving that structures intervention into homeless peoples’ lives – so only 10 percent of them need to be focused on.

This is the face of homeless policy in the US and in Europe that steadfastly refuses to understand homelessness for what it is; a function and condition of society; a structural fact of our political economy. O’Sullivan (2012, p.88) is therefore correct to highlight the inability of “neoliberalism” to explain the turn to punitiveness in Europe (“neoliberalism” can never explain anything; it must be explained). But he is incorrect to imply, as he does in his critique of neoliberalism as an explanatory concept, that Housing First is somehow *different* from “policies that punish the poor” (*ibid.*, p.88) Housing First and punitiveness are two sides of the same coin.

Conclusion

Proponents of Measure S in Berkeley made the relationship clear: In a “humanitarian city,” if troublesome people – understood as pathological – refused the soft side of the stick, then they should feel the hard side. Varieties of punitiveness, here in the US as well as there in Europe, *include* socialization and medicalization. It is to the great credit of voters in Berkeley that in this instance they rejected just that formulation, even if they did not necessarily move beyond seeing homelessness as an attribute of individuals rather than a condition of society. But that’s one small struggle in a very big battle. The real fight has got to be around understanding homelessness as a condition of society, rather than an attribute of individuals, and with that to rework that society – and the mode of production upon which it is based – so that it quits so ruthlessly producing homelessness as a necessary condition of its own existence. Without that it won’t matter that in Europe, as O’Sullivan (2012, p.89) concludes optimistically (if in contrast to his own evidence on incarceration rates and the adoption of punitive policies across the continent), that “homelessness policy is still largely driven by the politics of inclusion rather than the politics of social exclusion,” just as it doesn’t matter *as far as the condition of homelessness goes* that the voters in Berkeley so wonderfully rejected Measure S.

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The Criminalization of Homelessness: A Canadian Perspective

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Introduction

In “Varieties of Punitiveness in Europe”, O’Sullivan sets out to review on-going debates on the use of criminal justice systems as a strategy to manage homelessness. That is, he explores the question of how do we understand exclusionary measures such as the enactment of laws targeting people who are homeless, as well as specific policing practices intended to restrict the use of public spaces, in terms of the neoliberal turn of the past quarter century. To this end, O’Sullivan challenges some of the assumptions of the neoliberal narrative, arguing that the evidence from various European countries is quite variable and the use of law enforcement as a response to homelessness must be contextualized in terms of local circumstances. O’Sullivan begins with a thoughtful review of the criminological literature that indicates that many nations in both Europe and North America have taken a ‘punitive turn’, as evidenced not only by higher rates of incarceration, but also by laws, legislation and practices that result in the use of law enforcement to ‘manage’ marginalized populations such as the homeless.

The point highlighted by O’Sullivan that context matters in making sense of this shift is important. O’Sullivan also correctly notes the necessity of accounting for the historical development of punitive vagrancy and anti-begging legislation, which extend back to the 19th century in many countries, and that the enhanced use of legal measures and law enforcement to deal with homelessness, cannot be understood simply in terms of contemporary ideological shifts.

Without jettisoning the impact of neoliberalism altogether, it is worth taking a deeper look at how such contemporary political shifts may interact with other factors, some with deep historical roots, others that are local and contextual, and finally serendipitous factors that can shape local policy development. Examining

the criminalization of homelessness in the Canadian context is perhaps instructive in making sense of how neoliberalism is enacted, experienced and shaped by local political, historical and social factors.

Managing Homelessness

The first point to be made is that in understanding the development of punitive approaches to homelessness, we must make sense of how neoliberalism acts not only upon the logic of law enforcement, but importantly, on how homelessness is managed and sustained. The two are inherently interconnected, as O'Sullivan points out in his analysis of crime control and welfare. There is no doubt that in the Canadian context it was in fact neoliberal shifts in federal and provincial approaches to welfare provision that preceded the 'punitive turn'. Significant socio-economic transformations led to homelessness becoming a 'problem' in Canada in the 1990s, which resulted from a range of policy decisions at the national, provincial and local levels that were certainly shaped by neoliberal ideologies. In 1993 Canada cancelled its National Housing Strategy, which in the early 1980s was producing around 18000 new units of social housing annually. The belief was that there was a market solution to the creation of affordable housing, a faith in market forces that in the end was never borne out. At the same time Conservative governments in many jurisdictions cut government benefits for low-income earners and people living in poverty, including welfare supplements. Finally, a restructuring of the Canadian economy led to lower incomes for the bottom forty per cent of the population. This was the perfect storm, and led to a noticeable and visible increase in homelessness in many communities across the country throughout the 1990s.

The response since that time has been largely to rely on emergency services and supports, rather than a strategy to prevent homelessness or aggressively move people into housing. As a result, many people became locked in homelessness, and the numbers of chronic and episodic homeless people began to increase. The key point here is that when people are kept in a state of homelessness for long periods of time, the problem becomes more visible. And when it is visible, there is often an outcry to 'do something about it', which may include more positive or supportive social welfare responses. However, in many – but not all – Canadian cities this 'something' was to use law enforcement as a solution, in addition to (not in opposition to) more supportive strategies.

It could be argued that the fertile ground for the shift in the latter direction builds on negative and long-standing prejudices about homeless persons. There is evidence that a considerable number of Canadians feel that people who are homeless 'choose' to be so, don't want to work, are petty criminals etc. (Norris, 2011). These negative

attitudes are enhanced when the public perception of homelessness is also shaped by longstanding prejudices against marginalized subpopulations, whether they are youth, radicalised minorities (in Canada, Aboriginal people), or others. Homelessness is not a neutral category, but one that is often conflated with other experiences of marginality. There is, however, no evidence that these negative attitudes regarding the homeless were particularly new, and as O’Sullivan rightly reminds us, the problems of the present have deep historical roots.

Homelessness and Moral Panics

The existence of prejudice against homeless persons in a context where the size and visibility of the homelessness problem is growing still doesn’t tell us why some communities, but not others take the punitive turn, as these conditions surely exist in many, if not most, communities across Canada. Here, we must make sense of local political circumstances and culture that produce a climate for such change. In several Canadian cities in the late 1990s, a moral panic emerged regarding the growing visibility of homeless youth who were begging and/or squeegeeing car windscreens in many cities. Comments by local politicians and newspapers fanned the flames, with such homeless youth being framed as ‘dangerous’ and ‘delinquent’, and as a threat to public safety and the local economy, particularly tourism (Parnaby, 2003; O’Grady *et al*, 2011). The result in cities such as Montreal and Toronto, and the province of British Columbia was to enact legislation outlawing begging and restricting the use of public spaces. Laws such as the Ontario Safe Streets Act (2000), while not mentioning homeless persons (or even youth) in the actual language of the legislation, were essentially designed to address these public concerns.

Now a clear irony – one pointed out by activists at the time – was that the use of legislation to criminalize homelessness (through anti-begging laws) was overkill, in that police already had in their arsenal a wide range of laws relating to minor offences and disorderly conduct that can – and are – deployed both to ‘control’ how public space is used, and to potentially remove or exclude marginalized sub-populations (including not only people who are homeless, but youth, visible minorities, and more generally the poor) from these places. That is, laws against drinking in public, loitering, and even seemingly unrelated acts such as ‘jay-walking’ can and are regularly deployed against marginalized population such as homeless people in many Canadian cities. So too is the practice of regular ‘stop and searches’, of asking people for identification, interrogating them, and searching through their possessions.

It can be argued, then, that legislation such as the Safe Streets Act in Ontario – and the debates surrounding the increasing visibility of homelessness – are in some ways designed for public consumption by politicians and political parties (typically Conservative) interested in projecting a ‘get tough on crime’ agenda. Clearly, the local political context is a factor in making sense of how and why legislative shifts leading to punitive responses to homelessness take place.

An additional factor to be considered in making sense of punitive approaches to homelessness is the culture of policing, which can differ from jurisdiction to jurisdiction. That is, the actual practice of policing, both in terms of broadly sanctioned strategies to address urban crime, but also in terms of local practices of policing must be made sense of. It should be noted, for instance, that in the 1990s the philosophy of “Broken Windows” policing, originating in New York City, also resonated with many police services in Canada, including the City of Toronto. Toronto is Canada’s largest city, with a large police service and a budget of almost one billion dollars annually. It is also one of Canada’s safest cities, according to regular national surveys of criminal victimization. Low crime rates combined with a large police presence can mean more charges for minor offences, as police strive to meet performance targets. So, in spite of several studies that show that the incidence of public begging declined dramatically in Toronto since the turn of the last century (City of Toronto, 2009; O’Grady *et al*, 2011), the number of tickets issued under the Safe Streets Act increased exponentially, from 782 in 2000, to over 15 000 annually ten years later (O’Grady *et al*, 2011). As O’Sullivan points out, there is often a considerable disconnect between actual incidences of criminal activity or minor offences, and enforcement.

Yet the experience in Toronto of actively policing the homeless cannot be easily generalized to other jurisdictions in Canada, where a different approach to homelessness has emerged, one that focuses on strategic plans to end homelessness through prevention, an investment in affordable housing, and the adoption of Housing First. In several communities that have made major progress on homelessness, including Calgary (pop. 1 million) and Lethbridge (pop. 90 000) police have actually been engaged in a supportive role in addressing homelessness, working collaboratively with local service providers, Assertive Community Treatment teams and outreach workers, to assist people experiencing homeless to access services.

Conclusion

So, the Canadian case supports O’Sullivan’s contention – that while neoliberalism can go some ways to explain both the rise in homelessness (through reductions in state interventions in housing, and cutbacks to benefits), and particular law and order responses that essentially ‘criminalize’ homelessness, other factors also seem to be at play. One of the challenges of structural analyses – including the use of master narratives such as ‘neoliberalism’ – is that they can often be wielded as an over-determining (near causal) explanation of social phenomena. The reminder that “context matters” is one that we should heed, as well as the need to understand the deep historical roots of punitive responses to homelessness and poverty. Different nations, and indeed within nations different jurisdictions, have ‘cultures’ of law enforcement and policing’ that may be distinct, as well as local histories and political configurations that may lead to legislative turns that may support or conversely counter broader neoliberal shifts in how the state constitutes itself regarding the poor. The problem in jurisdictions such as Toronto where a punitive response has been embraced by police services, then, is perhaps not one of ‘out of control’ begging, or disorderly behaviour. It is more so the failure of all levels of government to actively reduce the problem of homelessness in the city. Point in time counts show homelessness to be a seemingly intractable problem, and one that remains visible. And once again, when we keep people in a state of homelessness, the problem is made visible, and law and order follows, alongside emergency shelters and soup kitchens.

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Narratives of Punishment: Neoliberalism, Class Interests and the Politics of Social Exclusion

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Introduction

In an instructive piece, O’Sullivan challenges the grand narrative according to which the punitive turn in Europe can be explained by reference to neoliberal policies originating from the United States or to socio-economic and cultural changes associated with late modernity (e.g. Wacquant, 1999; Young, 1999; Garland, 2001; Simon, 2013). While he agrees that European countries have also adopted exclusionary measures to police, control, and incarcerate homeless people who occupy public spaces in the last decades, he suggests that such punitive measures have a long history in Europe, and that we should rather speak of varieties of punitiveness based on “distinctive cultural, historical, constitutional and political conditions” (p. 75, quoting Tonry, 2007, p.1). O’Sullivan also suggests that the adoption of punitive measures developed alongside more inclusionary measures adopted by a majority of EU member States relying on relatively generous social democratic welfare regimes. As a result, he argues that “homelessness policy is still largely driven by the politics of social inclusion rather than the politics of social exclusion” and he calls for further research in this area (p.89).

Neoliberalism and Broken Windows Theory as Legitimizing Discourses

O’Sullivan’s first argument is generally well-taken. It is true that neoliberalism, as an all-encompassing political economic theory and ideology, as well as recent U.S. policies advocating broken windows policing cannot directly explain the adoption and enforcement of repressive measures at the national and local levels across Europe and the Americas. Such a totalizing diagnosis is reductive of the complexity

of the penal field (Carrier, 2010) and tends to over-generalize the U.S. and U.K. experiences to the detriment of solid comparative analysis (Lacey, 2008). However, it is difficult to maintain that neoliberalism and theories such as broken windows have not been widely and conveniently used as *legitimizing discourses* to justify existing repressive practices elsewhere. For instance, in Montreal, Canada, public officials and the police relied on U.S. (and European) initiatives to justify the adoption of their program on antisocial behaviour targeting homeless people as they resonated with local concerns (Sylvestre, 2010a). Similarly, in Rio de Janeiro, Brazil, officials did not need the ideas or techniques of the *Manhattan Institute for Policy Research* to police street people, – they knew all too well how to do it and had been doing it for a long time (Holloway, 1993) – but it would be naive not to recognise that the ideas conveyed by the think tank have been opportunely welcomed as they support well-established repressive practices founded on years of military influence (Wacquant, 2004).

Interestingly, while O’Sullivan refuses to attribute the punitive turn to neoliberalism and invites us to consider local politics, culture and experiences, he does not deny the importance of structuralist accounts which emphasize the connection between penal policies and different states’ political and economic forms of organization, including in many cases neoliberal market economies, as well as class interests. He does so for instance by referring to Lacey’s “varieties of capitalism” (2008) (p. 71-75). Moreover, in his conclusion, he suggests that punitive measures may be reflective of “elite perceptions of homeless people” throughout successive historical periods from “dangerous” to “disaffiliated”, “disturbed” and more recently, “disorderly” individuals (p. 88). Similarly, in the Canadian context, historical research has shown that the nineteenth century elites perceived vagrants as being either “indolent, lazy and worthless” individuals who chose not to work, “habitual criminals” likely to engage in serious criminality if provided the right opportunity, and/or “morally depraved” individuals belonging to a “self-perpetuating class of citizens who lived without fixed abode” (Ranasinghe, 2010, p.60-61). Such perceptions of the homeless as criminals, morally depraved, or individuals who should be blamed for their own misfortunes, are echoed by 20th and 21st centuries elites’ discourses (Sylvestre, forthcoming), and are directly connected to the creation and reproduction of class relations in contemporary (capitalist) societies.

In Bourdieu’s sociology, social classes are constituted by individuals who, by virtue of the fact that they occupy similar positions in a social space and are subjected to similar conditions of existence, share affinities, tastes and interests but also common aversion, misrepresentations and misunderstanding of people from other classes, and are predisposed to act as a class if so mobilized (1984). Thus, if we think about class struggles as including other forms of capital and symbolic power, we clearly see how the regulation of homelessness and urban

marginality corresponds, both historically and in the present, to certain empowered groups' interests related to the preservation of a certain social and economic order. The rejection of neoliberalism as a totalizing explanation to the punitive turn does not necessarily invalidate structural constructivist approaches (Lacey, 2008). Such theories remain interesting to (re)build local relationships and to see how they interact with macro and global narratives such as neoliberalism and broken windows theories (Bell, 2010).

Narratives of Resistance and Inclusiveness

In his article, O'Sullivan also emphasizes recent studies focusing on more inclusive responses to homelessness and suggests that we pay attention to narratives of resistance and inclusiveness. Being born and raised in Quebec, a North American state with European (and Aboriginal) cultural roots, a “coordinated market economy” with (existing, yet continuously challenged) welfare regimes, (primarily) public education and health care systems, and a dynamic civil society, I understand very well the intersections, tensions and contradictions between punitive and inclusive measures in dealing with poverty and social problems, as well as those between repression and resistance. For the past ten years or so, my colleague Céline Bellot and I have conducted research on the regulation of homelessness in Montreal in partnership with *Opération Droits Devants* (ODD), a coalition of community groups and researchers committed to defending the rights of homeless people dealing with the criminal justice system as a result of their occupation of public spaces (Bellot *et al*, 2013). The first studies conducted between 2005 and 2007 found that there was an important increase in the number of statements of offences issued against homeless people for violations of by-laws, systemic and generalized use of imprisonment for default payment of fines, a connection between penalization and incarceration and the production of homelessness and delayed street exit process, increasing legal costs (Bellot *et al*, 2005), and a lack of empirical evidence that such punitive measures were justified by harmful behaviour or supported by a community consensus (Sylvestre, 2010b).

Public officials and the legal community reacted strongly to the publication of our studies and to the political actions led by the ODD. The Quebec government launched a Parliamentary Commission on Homelessness which found that the penalization of homelessness should be avoided at all costs and that alternatives, including investments in social programs, should be supported; the Quebec Human Rights Commission issued a legal opinion holding that the penalization of homeless people in Montreal constituted a case of social profiling and was a direct consequence of penal policies against antisocial behaviour; the Quebec Bar called for striking off homeless people's records; and the judges of the Montreal Municipal

Court stopped issuing warrants of committal for incarceration for default payment of fines, and along with the City's prosecutors and fine collectors, they put together a special program in order to attenuate the impact of the criminalization on homeless people by withdrawing charges and striking off their judicial debts. Even the Montreal police admitted that there had been some cases of social profiling and created a special unit in which police officers started patrolling with social workers. Finally in 2013, the Quebec government held a two day consultation on the adoption of a national policy on homelessness aiming to address penalization, but most importantly access to housing, health care, education and decent income.

Meanwhile however, the same government announced important cuts to the welfare regime as well as to health and education programs, and remained committed to eliminating the province's deficit within the first year of its mandate, and business improvement organizations, promoters, downtown residents' associations and local politicians continued to advocate for a more visible police presence and to support investments in the downtown area at great social costs for the homeless. We published a third study which concluded that between April 1st, 1994 and December 31st, 2010, the police had issued 64 491 statements of offence to 8 252 homeless people, for violations of municipal by-laws or Montreal Transportation Society (STM) regulations, and that almost half of those statements (30 551) had been issued between January 1st, 2006 and December 31st, 2010 as public officials and the legal community renewed their efforts to deal with criminalization (Bellot *et al*, 2012).

Conclusion

There is little doubt that historically and in the modern era, control and regulation of the poor and the homeless through relief programmes and public welfare policies have existed alongside repressive penal policies. Moreover, actors working within the criminal justice system have long walked a thin line between terror and mercy (Hay, 1975). While we should acknowledge the existence of inclusionary responses to homelessness, celebrate stories of resistance, and support genuine efforts to mitigate the impact of criminalization, we ought to recognize however that inclusive measures are insufficiently funded and that they are generally neutralized by counterproductive punitive strategies. The police and the State may act as mediators between conflicting and contradictory sets of demands for exclusion and inclusion from different interest groups within a community (Huey, 2007), but ultimately the demands of certain groups of people sharing socio-economic characteristics and tastes prevail.

The tensions and the apparent ambivalence between inclusiveness and punitiveness may be finally explained by reference to an important line of differentiation among homeless populations alluded to by O’Sullivan in his article and which also shows remarkable historical continuity, namely the distinction between the deserving and the undeserving poor (Geremek, 1987; Foucault, 1975). From vagrancy statutes of the 16th century to poor houses managers of the 19th century, and to 21st century judges and police officers walking their beat in downtown Montreal, the distinction made between homeless people who “refused” to work and should be blamed for their “choice” of living in the streets as opposed to those who are deserving objects of charity and public relief, is a key differentiating factor between punishment and compassion. Again, this distinction bears a direct connection to class interests and forms of economic organization, which cannot be completely left out of the analysis.

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Neo-liberal versus Social Democratic Policies on Homelessness: The Nordic Case

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Introduction

On the twenty-first of May 2013, a group consisting of 250 ministers and diaconate staff of the Lutheran Church of Norway joined members of voluntary organizations to sleep rough for a night in one of Oslo's parks. This was in protest against the recent revival of a ban on sleeping in public places in Oslo. It was another example of a frightening trend in the criminalization of poverty, the organizers explained. The Church of Norway wanted to show its solidarity with people living on the streets. The new regulation, adopted by the city council, is but one of several diverging approaches to policy on homelessness and social marginalization in Norway. I want here, in responding to O'Sullivan's extensive and thorough discussion of 'the punitive neo-liberal state', to point out and comment on various tendencies in the social democratic state of Norway, to illustrate the strengths and limitations of the 'punitive state' thesis. Like O'Sullivan, I question the master narrative that European welfare states, under the influence of neo-liberal ideology, are pursuing an increasingly tough and repressive line on homeless people and other disadvantaged groups.

Punitiveness and the Nordic Welfare Model

The Nordic welfare model – which is also known as the social democratic welfare regime – is characterized by a generous redistribution of resources, relatively small social differences and high employment rates. The Nordic model is recognized for the care it takes of its citizens. Norway fares better than most other countries in that it has Europe's lowest rate of unemployment; indeed, there is a shortage of labour in some sectors. Prison populations in the Nordic welfare states are also relatively low. Sweden, Finland, Denmark and Norway have the lowest incarceration rates in Europe, significantly below the average for the EU countries (except Slovenia) (O'Sullivan 2012, Table 1). And while the Nordic prison population grew

between 2001 and 2011, the rate of growth remained below the European average. There may be various explanations for the low number of prison inmates in the Nordic countries. First, the social democratic welfare state is less punitive in mind-set and constitution than other types of welfare regime. A generous welfare state tends moreover to reduce the prevalence of certain types of crime, in particular offences associated with homelessness and destitution. This, of course, also helps keep the general crime rate down. A third explanation, related to the second, is that a high degree of equality is likely to dampen tendencies to social unrest, an activity which, if not resulting in violations of the law, is often subject to criminalization itself.

Control of Public Space

The social control exerted by the welfare state takes place, broadly speaking, in two spheres; the civil sphere and the penal system. The latter includes the police, courts and correctional services. The remaining institutions of the welfare state constitute the civil sphere. In the universe constituted by the master narrative of the punitive welfare state, an important point is that these two spheres are intertwined, and further that this process has been accelerating in recent decades. There is and will always be a need to regulate public space. Regulation takes place more or less through internalized (unwritten) norms, formal rules and regulations. Rules and regulations tend to impact disproportionately on marginalized groups, such as homeless people, people begging and active drug users. As O'Sullivan points out, it is difficult to say whether the intention is to control homeless people and other users of public space on the streets, or whether they get caught in the crossfire as a result of the steps taken. It isn't difficult to find examples of public spaces, which due to privatization and architectural transparency, are increasingly hostile to homeless people. The major Nordic cities and urban areas are no exception in this respect (Franzén, 2001; Lomell, 2007). In historical terms, some of the techniques used to police public spaces, such as surveillance cameras and surveillance technology in general, are of relatively recent date. Other methods are as old as the poor laws and anti-vagrancy laws. One of these non-technological methods is the "police gaze".

The term "police gaze" originates from an observational study of police patrols (Finstad, 2000). The police have a duty to maintain public order. The professional gaze is an important tool for the police and possibly a crucial factor for the safety of both the police and the public in many situations. What attracts the police gaze tends to be people who by definition don't fit in, that is, they are "out of place" (Douglas, 2002). Police observations while patrolling the streets are collated and divided into formal and informal categories. "Slob" ("slask") is one of the informal categories. A "Slob" is not defined by a single characteristic, but several. They include general appearance, clothing, hair length, circadian rhythm, places

frequented, with whom and at what times of the day. The police gaze searches for a particular type of person, according to Finstad, primarily people with signs of active drug use, low educational levels, and unemployment. Their lifestyle is public and visible. A “Slob” does not need to have committed an offence; he just has to look like a regular “customer” of the police. The “Slob” will tend to share many of the characteristics of the homeless (Dyb and Johannessen, 2013). After spotting a “Slob” on the streets, the police frequently initiate a “stop and search” procedure: The individual is stopped, questioned and searched for possession of drugs, stolen goods, etc.

It is not difficult to find analogies between current stop and search procedures and the control mechanisms under the Vagrancy Act, which remained in force in Norway until about 1960. The Vagrancy Act was not so very different from similar laws in other countries. It gave the authorities the power to take people into custody for those without a fixed abode, begging on the streets and being drunk in public. In a comprehensive study of vagrants in Oslo in the early 1960s, Ramsøy *et al* (1971) reproduced an interrogation protocol used in the remand of vagrants. What we see here is that not only was the verdict an aspect of the control of so-called vagrants, the interrogation was too. The questions are detailed and revolve around difficult and sometimes embarrassing issues. Many people went through this interrogation grinder time and time again.

Control in the Correctional Services

We arrive now at the direct, open control mechanisms that target specific groups on the margins of society, i.e. the mechanisms of criminalization and incarceration of homeless alcoholics. Work camps used to be promoted as the most effective means of treating and preventing vagrancy and drunkenness in the Nordic region, as they were in other European countries. The Opstad Labour Camp for ‘alcoholics’ was the leading facility within this part of the modern prison system of the 1900s. Opstad opened in 1915 after a lengthy planning period, including study trips abroad to observe more advanced penal systems than Norway’s was considered to be at this time. The Opstad buildings recall the panoptic surveillance philosophy (see Foucault, 2001), the point being to monitor the many while remaining inconspicuous oneself. We find the same idea in the account of how Opstad came into being by its founder (Omstad, 1949). The most important form of surveillance was, however, the internal control procedures, which are still used extensively in today’s prison system. Privileges are awarded and withdrawn according to an internal punishment and reward system. Rewards can be individual and collective. Penalties are often collective, however, which encourages detainees to enact a form of internal justice. The so-called “confidence system” at Opstad was a crucial control mechanism

simply to get the place to work. Inmates working in the forests and fields were subject to limited scrutiny. It was a policy intended to enable their rehabilitation and, not least, balance the institution's operating budget.

The emphasis of modern correctional services on the rehabilitation of inmates and on keeping them in work and other forms of employment is considered a crucial aspect of prison rehabilitation programmes. The correctional services, however, offer several ways of serving a custodial sentence, with tests, training and education programmes to help inmates cope with life outside prison. Cohen (1994) lists 27 different forms of detention in terms of facilities, terms and courses, as well as hundreds of tests, scales, diagnostic tools and sorting mechanisms used by Western correctional services in the mid-1980s. The Norwegian correctional services offer today a broad range of detention programmes and services to offenders. Cohen applies a classification and control perspective to the analysis of imprisonment, training and testing in modern Western correctional services. It is difficult to find support for the idea that differentiated forms of detention and training are intended to enhance the control of inmates and offenders in various types of custody. On the other hand, the penal system and control measures put in place with the best of intentions cannot escape their association with the welfare state's institutions of crime control. Since the difference between assistance and control balances on a fine line, it can be difficult to differentiate between what is motivated by the need for control and the intention to provide help.

Opstad labour camp for 'alcoholics' closed for good in 1970, and the place is used today as an ordinary prison. The social profile of the current inmates of Åna Prison is, however, remarkably similar to that of the old labour camp's internees with an overrepresentation of the most disadvantaged people in the prison system, characterized by habitual relapse into crime, serious substance abuse and homelessness. Alcoholism is no longer punishable by imprisonment or fines. Drunken and disorderly behaviour is typical in city centres on Friday and Saturday nights. Illicit drugs have taken over the role of drink and are the main reason why homeless people are taken into custody. One-third of all inmates in Norwegian prisons are convicted of illicit drug offences. In addition, a large percentage of inmates have committed illicit drug-related offences, especially violence perpetrated under the influence of illicit drugs and drink and theft to finance the habit. Imprisonment is one, and the most immediate, way of controlling certain types of social deviance.

A Neo-liberal Criminal Regime?

As Esping-Andersen (1990) points out, one of the preconditions for the legitimacy of the welfare state is that the middle classes demonstrate solidarity with the working class. Middle-class support for universalistic welfare programmes are an important feature of the Nordic model. This middle-class support relies on a certain assumption; that is that the schemes and programmes are designed in such a way that the affluent classes have no need to purchase care and attention from the private sector. The popular legitimacy and support of the welfare state rely on everyone making a contribution and shouldering part of the burden. The main poverty-reducing mechanism in the Nordic countries since the 1980s has been workfare, which has cross-political support. At a macro level, the goal is to get everyone working and at the individual level, entitlement to state benefits requires participation in the workforce. According to several studies, including a recently published research report (Djuve *et al*, 2012), the various workfare schemes do not produce the anticipated results. A minority do find a job and are offered new programmes with varying results.

In the more populist debates about workfare as a policy, political pundits in Norway agree it is important to get up in the morning even if, or precisely because, you are unemployed. In reality, many young people in the groups targeted by workfare schemes and programmes belong to and will remain members of a reserve labour force, as did the old alcoholics. Many of them did odd jobs in good periods, as stevedores or factory hands for example. Politically, to ensure the popular legitimacy of a relatively generous welfare, workfare in its various forms is an absolutely essential policy. According to this way of reasoning, the control of healthy, unemployed persons is a government imperative. There was a general election in Norway in 2013 resulting in a victory for the Right after eight years of Left-wing government. Neo-liberalism enjoys significant voter support in the Nordic welfare states, though they have preserved many of their so-called social democratic features, including relatively small social differences and small prison populations.

Conclusion

One of the questions asked by social scientists and politicians is whether immigration could undermine the Nordic welfare state. One of the reasons for the success of the liberalist Right parties is their tough line on asylum and immigration policy. In Norway, we are again discussing the issue of begging on the streets, a few years after the ban on begging was repealed (2006) – which, incidentally, was the final remnant of the old Vagrancy Act. Along with a stricter ban on sleeping in public places, a revival of the anti-begging law would represent another step towards the criminalization of the homeless and poorest in society. But it is highly questionable whether any of these measures can be linked directly to a neo-liberal political wind in the Nordic welfare states. These discussions and protests have been triggered by a group of highly visible beggars who are ethnically Roma and originate from Romania. Neo-liberalism means in essence support for the free flow of people (as well as capital and goods), and a more open Europe. People's growing opposition to begging and sleeping rough in public places probably has something to do with concerns about this group. The Roma are a stigmatized group in Norway, as indeed they are in the rest of Europe. It is worth noting in this respect that no one today would condone the treatment meted out to gypsies in Norway in the 1950s and '60s, the heyday of the social democratic welfare state. It is seen as a gross example of a government's abuse of a vulnerable group. Although there are plenty of examples of institutional abuses of power, control and criminalization of the homeless and the most vulnerable groups in the social democratic welfare state, it is difficult to say, using Norway as a case study, whether control and criminalization have grown stronger over the last few decades.

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Situating Homelessness

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Introduction

The latest contribution by Eoin O’Sullivan (2012) to the *European Journal of Homelessness* (EJH) entitled, ‘Varieties of Punitiveness in Europe: Homelessness and Urban Marginality’ is an ambitious, wide ranging article examining *inter alia* rates of imprisonment across Europe, the history of European vagrancy laws, the emergence of punitivism in the USA, and homeless punitivism in present day Europe. O’Sullivan argues that; (i) punitive legislation aimed at controlling ‘urban marginality’, and thus the behaviour and life chances of homeless people, is characteristic of all European states, though the level and intensity of such legislation vary country by country; (ii) that European punitivism is not a copy of American punitivism; (iii) that punitivism is not new to Europe, there were antecedents in the 19th and early 20th centuries; and (iv) that the ‘master narrative’ of punitivism and neoliberalism provides an inadequate explanation for the European ‘punitive turn’.

This final theme, which privileges ‘local circumstances’ over ‘neoliberalism’ in ‘shaping [European] responses to homelessness’ (p.69), is the principal and concluding message of the paper. It complements and extends the subject matter and arguments hinted at in earlier papers by O’Sullivan (2004; 2007) and those examined in several other articles published in the EJH over the past seven years (Tosi, 2007; Johnsen and Fitzpatrick, 2008; Flint, 2009; Huey, 2009; Missetics, 2010; Kinsella, 2012). Cumulatively these EJH publications reflect an on-going concern, in the wider academic community and among policy makers and homeless service providers, with the complex relationships linking punitiveness, criminality, marginalisation, homelessness and neoliberalism (e.g. Murphy, 2007; FEANTSA, 2012; Squires and Lea, 2012).

There is much to agree with and learn from O’Sullivan’s paper. Particularly welcome is his attempt to situate an analysis of present day European homelessness in historic, geographic and sociological context in an interdisciplinary analysis of commendable scope and vision. His coverage of the history of vagrancy legislation

in Europe and the USA also stands out in bringing to our attention hitherto little known (at least to this commentator), details and legacies. With such a wide breath of topics packed into a short article it is not surprising that there are issues to query and question, and indeed (particularly with regard to the principal message regarding neoliberalism), to contest. Regrettably his fixation on questioning the relevance of neoliberalism to an understanding of homeless punitivism detracts from his analysis of the three other themes identified above.

The Uneven Development of Punitiveness in Europe

O'Sullivan begins his paper with an examination of variable rates of imprisonment – what Wacquant (2012, p.246) labels the 'back end' of punitiveness – between European nations and their association with public social expenditure. Using country data derived from the OECD and World Prison Brief (Table 1, p.74)¹ O'Sullivan makes several claims about the relationship between social expenditure and rates of imprisonment in Europe. First, he identifies an inverse relationship between expenditure and numbers imprisoned. And indeed a simple statistical check on this association using Spearman's Rank Correlation confirms as much: Public social expenditure expressed as a percentage of GDP explains about 50 percent of the variation in incarceration rates across Europe in both 2001 and 2011 ($r_s = 0.56$ and 0.55 respectively; $p < 0.01$). Secondly, he claims that as welfare expenditures increase, incarceration rates decrease. This relationship however is not supported by a Spearman test: The correlation between percentage change (2001 to 2011) in public social expenditure and percentage change in national prison populations is negative and not significant ($r_s = -0.005$). However, and in contrast, the relationship (not examined by O'Sullivan) between incarceration rates in 2001 and incarceration rates in 2011 is strongly and significantly positive ($r_s = 0.89$; $p > 0.01$): The best predictor (assuming a causal relationship) of the number of prisoners in 2011 is the number of prisoners in 2001, not the decennial change in social expenditure (at least as indexed by percentage of GDP).

Thirdly, O'Sullivan argues that the association between national variations in social expenditure and rates of incarceration can be grouped by welfare regime: For example, 'social democratic' Scandinavian countries which have some of the highest public social expenditures also have the fewest people in prison, while

¹ Unfortunately the precise nature of the data used in Table 1 (p.74) is not explained in the text. Indeed rates of prison population are mislabelled as 'per capita' rather than 'per 100000' and it is unclear whether social public expenditure is recorded as a percentage of 'total GDP' or 'per capita GDP' – one assumes the former. Further, trend analysis (preferably from 1980 or so when neoliberalism starts to bite in Europe), rather than cross-sectional analysis (2001 and 2011), would have significantly enhanced interpretation.

'post-socialist' countries of central and eastern Europe and 'liberal' countries of the Atlantic fringe which have some of the lowest social expenditures, have higher incarceration rates. He cites the relationship between welfare regime group averages for social expenditure and rates of imprisonment in support of this contention (Table 1, p.74). Yet the averages for 'conservative, continental' regimes and 'social democratic' regimes, which have the same level of social expenditure but very different rates of imprisonment, rather question that association.² Similarly, when individual countries are examined- e.g. France (conservative, continental) and Denmark (social democratic) – the relationships are revealed as more problematic and complex.³

O'Sullivan recognises some of these anomalies and in seeking other explanations he identifies national variations in 'crime control strategies'. Citing Rose (2000), O'Sullivan identifies two such strategies: 'Circuits of inclusion' and 'circuits of exclusion', with the latter, in particular, criminalising survival behaviours among the marginal and homeless populations. O'Sullivan cites Tonry, who points to the 'distinctive cultural, historical constitutional and political conditions' of individual societies, to explain which strategy prevails in a country (p.75, Tonry, 2007, p.1). Regrettably the discussion ends there. In the context of a paper whose main proposition is that 'local circumstances' trump 'neoliberalism' in explaining levels of punitivism, the absence of any direct reference or even hint as to the possible influence of neoliberalism is... unfortunate. These and related issues are considered further in the final part of this commentary.

Americanisation of Punitivism

In a section entitled 'Punitive responses to homelessness' O'Sullivan identifies the enactment from the 1980s (presumably linked to the adoption of crime control strategies characterised by 'circuits of exclusion'), of a variety of punitive measures designed to deal with the growing problem of homelessness in USA, Canada, England, Australia, and elsewhere. These punitive responses, which include both criminal and civil legislation, relate to the controlled use of public spaces, the removal of people engaged in prohibited activities from city centres, sweeps of areas known to be frequented by homeless people, and the selective enforcement of laws relating to jaywalking, loitering etc. In addition to the adoption of such 'order-maintenance' policies, O'Sullivan notes the development of complementary

² Average social expenditure for both 'social democratic' and 'conservative' regime countries was 25 in 2001 and 27 in 2011. Average incarceration rates for 'social democratic' countries were 61 in 2001 and 69 in 2011; for 'conservative' countries the respective figures were 86 and 100.

³ In Europe, France and Denmark had the highest levels of social expenditure in 2011 (30 percent) but imprisonment rates in France were considerably higher than in Denmark.

'hybrid social control mechanisms' (e.g. Business Improvement Districts in the USA) by a variety of 'bureaucratic actors' which 'further contribute to the extension of the penal or carceral state' (2012, p.79).

Yet, there is so much more to be considered here. As with his coverage of the variable relationship between social expenditure and rates of imprisonment, O'Sullivan prematurely concludes his examination of homeless related punitivism, passing over other mechanisms (beyond prisons which he acknowledges) 'for managing... advanced marginality... generated through the systematic dismantling of the welfare state and a veneration of markets' (O'Sullivan, 2012, p.71). Foremost here are the issues of urban restructuring, gentrification, and the politics of public space (see Fyfe, 1998; Low and Smith, 2006). Yet, notwithstanding his curtailed coverage, O'Sullivan concludes: '... [I]t seems that across advanced industrial nations, after half a century or so of broadly inclusive policies and practices geared at ameliorating the plight of the homeless and destitute, vindictive punitive policies are increasingly becoming the norm' (2012, p.77).

So much is agreed, what is in dispute is the extent to which such punitive policies were transmitted across the Atlantic from the USA – where they were first celebrated and implemented in the 1970s and 80s – giving rise to the notion that an 'Americanisation of [responses to] homelessness' is occurring in European countries.⁴ O'Sullivan cites two sources as purveyors of this notion: A 2011 special issue (volume 32 number 7) of the academic journal *Urban Geography*, and the work of the sociologist Loïc Wacquant (1999). O'Sullivan is critical of both and perhaps rightly so; but he is a little unfair on both sources for while 'Americanisation' is certainly part of their argument it is often more nuanced than he credits. Indeed all the papers in the *Urban Geography* special issue – including that on Germany by the editor (von Mahs, 2011) – clearly cast doubt on an unalloyed Americanisation thesis and Wacquant seems – with the identification of a 'Western European Road' and 'distinct national paths' (Wacquant, 2012, pp. 246 – 247) – to have clarified his position; indeed a re-reading of some of Wacquant's earlier work (e.g. 1993) reveals that his approach was always more subtle and considered than is sometimes acknowledged.

⁴ The origins of neoliberalism are traced to the work of Friedrich Hayek and The Mont Pelerin Society in Germany and Austria in the 1930s. Its modern manifestation is associated with the Pinochet Chilean junta which, post Allende, embarked on a programme of economic privatisation and deregulation advised by the so-called 'Chicago boys' who had been trained by Milton Friedman. Neoliberalism and the punitivism with which it is associated are considerably more international in their origins than O'Sullivan seems to allow.

O'Sullivan's objection to the Americanisation thesis seems to be heavily reliant on the European rejection of the American 'broken window' theory (Wilson and Kelling, 1982) and the associated 'zero tolerance' policy which was apparently widely adopted in USA cities during the 1980s. It is certainly the case that the forces of law and order in Europe rejected zero tolerance. However, rather than reflecting any European qualms about implementing such overtly punitive measures, it was ultimately rejected on the pragmatic grounds that it did not work (a failure which O'Sullivan acknowledges, 2012 p.78; see also Harcourt, 2001; Feldman, 2004, pp.51-56). O'Sullivan makes much of this issue – even though the USA was the modern primogenitor and some diffusion will have inevitably have taken place⁵ – because he considers the rebuff of zero tolerance a significant illustration of the European rejection of neoliberal ideology and polices shaping homeless punitiveness in Europe.

Punitive Antecedents and the Present Day

O'Sullivan's coverage of the history of vagrancy in the USA and Europe identifies similarity, but especially highlights difference. For example the development of 'skid rows' in the USA and their apparent absence from European cities, and the innovative development of 'labour colonies' for vagrants and destitutes in Europe.⁶ The message here is that Europe in the past, as today, had little to learn from the USA; indeed Americans were apparently 'envious' of European 19th century 'punitive practices', especially the labour colonies (p.85). For modern punitive practices, historical continuity is the more important, spatial diffusion has little influence. O'Sullivan concludes: 'It is difficult to sustain the thesis that the contemporary punitive turn towards homeless people is a consequence of a neoliberalism largely exported from the United States, when the historical record shows that a core response to homelessness was always punitive and that it originated in countries like Belgium and Switzerland' (2012, p.88).

⁵ O'Sullivan occasionally seems inclined to concede this point, viz: 'A range of punitive measures was enacted, firstly in New York and then spreading across the United States to Europe' (2012, p.89).

⁶ Labour colonies were detention and work centres for 'habitual' vagrants where inmates worked on farms and in institutional workshops. These colonies were seen as alternatives to imprisonment and were steeped in, rhetorically at least, a rehabilitation ethic that envisaged inmates returned to the community after a variable period of detention infused with a work ethos. Such 'colonies' were well established in many European countries including Germany, France, Belgium, Holland, Switzerland and Britain by the beginning of the 20th century, several surviving until the 1960s. Their efficacy in terms of their stated objectives is disputed (adapted from O'Sullivan, 2012, p.89).

Others have identified similar historic 'affinities' but present a rather different take on what prompts present day punitivism. Feldman for example identifies a clear disparity between historic antecedents and the present day:

The movement from vagrancy law to anti-homeless legislation... involves a significant transformation in the identification of the very problem or threat to which the laws address themselves. This transformation reveals... a larger shift in the very constitution of the public sphere: from the productive public sphere and its preoccupation with idleness to the consumptive public sphere and its preoccupation with aesthetic appearance (Feldman, 2004, p.29 – see also Bauman, 2000).

While there is undoubtedly dispute about Feldman's particular emphasis on 'production' versus 'consumption', his interpretation suggests that 'continuity' between the 19th and early 20th century Europe on the one hand, and late 20th and early 21st century Europe on the other, may not be quite as clear cut as O'Sullivan contends.

Neoliberalism, Punitivism and 'Master Narratives'

Towards the end of his paper O'Sullivan quotes approvingly, Lacey's assertion that the 'conceptual vagueness' of neoliberalism 'dooms' it to failure in providing an 'explanatory account of contemporary punishment' (2013, p.277 cited in O'Sullivan, 2012, p.88). While neoliberalism may not have 'conceptual precision', its operational 'plasticity' and 'mutability' should be the 'very stuff' of intellectual life and political activity for hardened and practised social scientists; this 'flexibility' and indeed 'promiscuity' (Clarke, 2008) is what arguably provides neoliberalism with its strength, ensuring its survival and effectiveness.

Much has been written on the definition of neoliberalism over the past three decades and while there is considerable debate regarding its impact and consequences, there is reasonably wide agreement as to its definition – a definition that emphatically questions Lacey's assertion of 'vagueness'. David Harvey's definition (2005, *passim*) captures neoliberalism's revolutionary aspirations and purpose. For Harvey neoliberalism is 'the doctrine that market exchange is an ethic in itself capable of acting as a guide for all human action' (2005, p.2). It is 'a theory of political economic practices that proposes that human well-being can best be advanced by liberating individual entrepreneurial freedoms and skills within a framework characterised by strong property rights, free markets and free trade' (2005, p.2). Within this, the role of the state is to 'create and preserve an institutional framework appropriate to such practices' (2005, p.2)- guaranteeing the integrity of money, protecting private property rights, ensuring the proper functioning of markets as well as setting up markets where they do not exist – in transport, in

education, in health provision and in the delivery of social welfare. Under neoliberalism the role of the state is reconstituted such that its direct interventions in the economy are minimised and its obligations to provide for the welfare of its citizens are diminished. That neoliberalism seems less revolutionary now than when it first emerged in the 1970s is testament to its success in not only reshaping our economic and social structures but also in infiltrating our cultural proclivities. As Harvey notes, it has had ‘pervasive effects on ways of thought to the point where it has become incorporated into the common-sense way many of us interpret, live in and understand the world’ (2005, p.3).

The ties between neoliberalism and homeless punitivism have been frequently identified in research and demonstrated through political practice. The channels of connectivity are many with the ‘economisation of the social’ (Herrmann, 2011) and ‘urban restructuring’ being to the forefront. The former leading to the cuts in benefits, reduction in affordable housing, insecurities of tenure, cutbacks in support services and so forth; the latter accelerating the privatisation of public spaces, denying homeless access and occupation, clamping down on homeless behaviours and dispersion to city peripheries (Doherty *et al*, 2008).

O’Sullivan challenges what he calls this ‘dystopian tone’, this ‘master narrative of punitivism’, by citing several case studies of ‘more inclusive.... supportive... non-punitive’ responses to homelessness drawn from Europe, North America and New Zealand (2012, p.80-81). He also suggests that EU homeless policies have a non-punitive agenda, citing ‘Housing First’ as an example.

While it is undoubtedly correct to see Housing First as progressive and non-punitive, it is also instructive to examine the history of this programme. It originated in New York in the early 1990s at about the same time as ‘zero tolerance’ – punitive and supportive can co-exist it appears. While Housing First has thrived (albeit unevenly) in the USA and is now the subject of a major study in the EU (Busch-Geertsema, 2013), zero tolerance apparently has lost its appeal for most city mayors in the US, and apart from a brief experiment in Hartlepool and Middlesbrough in the UK, has never been widely or seriously considered in Europe. Housing First, having struggled for credibility in its early years, was eventually adopted as a flagship programme by George W. Bush (perhaps the most enthusiastic neoliberal of the US presidents). The explanation for this apparent paradox is that Housing First turns out to be not only a reasonably effective programme but also financially advantageous – a cheaper alternative to ‘housing ready’ approaches in dealing with homelessness.⁷ In this instance ‘economising the social’ allowed Bush to trumpet his administration’s adoption of Housing First

⁷ See Larimer (2009) and Sillanpää (2013). For conflicting evidence see Waegemakers Schiff and Rook (2012); for an overview see Culhane (2008).

as part of his 'compassion agenda' (Willse, 2010). David Cameron is having less success promoting his 'fair' housing benefit caps and bedroom taxes as part of his compassionate 'Big Society'. 'Compassion' is no stranger to neoliberalism, but often turns out to be something else.⁸

Conclusion

The problem with this 'trading stories' approach to evaluating the relative merits of a 'punitive' versus 'supportive/compassionate' interpretations of present day homeless policies is that it reduces the process to a 'numbers game' and fosters a 'think local, act local' perspective,⁹ a retreat into a cocoon of comfort trifling in its narrowness that will ultimately take us nowhere in terms of understanding and explanation. If seven decades of research has taught us anything it is that homelessness is not just about individual behaviour and good (or bad) intentions. It is also critically and essentially about societal constrictions and impositions and possibilities which themselves are the expression of present and past economic circumstances and prevailing political doctrine. It thus serves nothing to dismiss punitivism and neoliberalism with a pejorative postmodern trope. We need rather to rise to the challenge articulated by Amster (2008) and Wright (2000) and enlarge, not constrict, our horizons, exploring imbrications across scale and process, evaluating and situating homelessness in the local, certainly, but also in the regional, national and global and, as necessary, jumping scales to explore interconnectivities (Smith, 1992).

⁸ "Cost-benefit analysis may be the new compassion," Philip Mangano (formerly Executive of the Interagency Council on Homelessness) and George W. Bush's 'Homelessness Tzar.' See also Hackworth (2010) and Stivers (2011) on the outsourcing of homeless services to FBOs.

⁹ This is from Huey (2009): An extraordinary injunction in that it seemingly runs entirely counter to the approach she has adopted elsewhere (Huey, 2007).

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Punitive Approaches and Welfare State Intervention: Reflections and Future Research Directions

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Introduction

O’Sullivan’s article is an important and timely contribution to a growing body of literature that cautions against a simplistic analysis that US style neoliberalism is the main reason for a proliferation of punitive policy against homelessness across Europe. As a researcher who has discussed the question of a potential “Americanization” of homelessness in Germany (von Mahs, 2011a) and who, with Don Mitchell, edited a special collection of articles on the topic, I agree with O’Sullivan that European responses are, by no means, as revanchist as those displayed in virtually any US city (see von Mahs and Mitchell, 2011). A similar point was also made in a much noted study by Doherty and colleagues in 2008. I also agree that European circumstances cannot simply be explained through “neoliberalism” and thus emulation of US practices alone.

Managing Marginals in Europe and the US

O’Sullivan carefully crafts his argument by first delineating the comparative context of punitive policy and tremendous variations that exist between industrialized countries depending on their underlying welfare regimes, and thus circuits of inclusion and exclusion. His main contention hereby is that Europe has a long, but varied history of punitive policy and currently has, in virtually every member state, disproportionate numbers of foreign nationals in prison or jail. This, so the author contends, implies that Europe has its “own” history of legal exclusion, and that current exclusionary practices are literally homegrown rather than imported from the US’s neoliberal regime. He used two main bodies of evidence including, a) the

extent of racial and anti-immigration bias in the current criminal justice systems of Europe more generally, and b) a long history of treating vagrancy, and homelessness in particular, through punitive means across virtually any European country.

Particularly convincing are O'Sullivan's accounts about distinct European practices of managing marginals which provide a historical perspective that shows, rather clearly, that most European countries have long dealt with surplus labour in a very controlling and systematic fashion, arguably more so than in the US. The author sets up his argument carefully by first discussing punitive responses to homelessness in the US offering a poignant synthesis of the US literature on the topic which helps the reader to more clearly see the differences between US and European approaches. This, in turn, allows him to challenge the dystopian American narratives, and thus refocus the debate on the distinct historic origins of the social control of vagrancy in Europe, and more recently, a rise in anti-immigration sentiments, rather than an anti-homelessness backlash causing a more punitive bent in Europe.

While I find his arguments very persuasive with regards to variations among different welfare regimes and the legacy of historic labour colonies to control surplus labour, I was less convinced of the author's relatively brief discussion of current racial bias in European criminal justice systems. For one, the figures provided in Table 2 (p.82) do not indicate the extent of disproportionate conviction rates in Europe – a second measure indicating the proportion of foreign nationals within the proportion of the overall population would have helped to show such bias more clearly. What's more, the author brushes over US statistics which, if included in the table, would have shown the absurdity of a comparison more clearly, both in the overall extent of prison populations and the disproportionate share of ethnic minorities among the over two million people currently residing in penal facilities in the US. If anything, wouldn't the disproportionately high overall numbers of prisoners and the highly disproportional representation of minorities over the past few decades be an indication that European countries may follow the US? Moreover, how is such punitive policy related to homelessness? Like most studies, O'Sullivan cannot provide us with an answer for the simple reason – to this day there are virtually no statistics that clearly differentiate prison populations by previous housing status. This, ultimately, weakens the argument a bit.

What's further missing, in my opinion, is a more scalar analysis. O'Sullivan refers in his abstract, to "local variations", yet rarely moves below the scale of the nation state when discussing European circumstances. This, to me, is a major omission because the real scale of neoliberal contention and ultimately enactment of punitive policy is the urban local scale and scale of lived experience. I have long contended that, in agreement with O'Sullivan, there are few indications of neoliberal inroads at the national or even state level in most European countries, but there are indications

that US style rhetoric and exclusionary measures are rather evident at the urban scale. In cities across industrialized nations in the global north, private capitalist interests (i.e. public private partnerships) have long infringed on public spaces and their regulation. This practice is then accentuated by new means of spatial control such as the omnipresent surveillance of public, private, and semi-private spaces. The public responses, in Europe at least, then may not be based on explicit anti-homeless ordinance as the in the US, but the ultimate consequences of using general laws and ordinances pertaining to public conduct remain the same: The homeless and other fringe groups are the ones who have to go.

Similarly important urban factors, rather implicitly addressed in O’Sullivan’s article, pertain to post-Fordist urban economic restructuring with its ramifications on local labour and housing markets whereby welfare regime specific arrangements determine outcomes. I found in my own research that local welfare state deficiencies – most notably insufficient cash assistance and inadequate job referrals – cause many homeless people to engage in sanctioned behaviours, even in Germany where the extent of public intervention is much higher than in the US and recent neoliberal inroads and experimentation with workfare will likely bypass homeless people and further reinforce their marginality and exclusion. This local welfare-criminalization nexus – one hallmark of neoliberal local practice – appears rather peripherally addressed in O’Sullivan’s article and is certainly worth being explored further.

Conclusion

Ultimately, O’Sullivan provides us with a very important discussion that lays bare some of the limitations of current debates that focus too narrowly on neoliberalism as an explanatory framework for understanding homeless people’s exclusion. The author makes a persuasive case for what I called elsewhere “path dependence” in that both punitive approaches and welfare state intervention produce different penal outcomes with attendant potential implications for homeless people (von Mahs, 2011b). O’Sullivan’s paper, clearly, advances our understanding of the inter-relations of punitive policy and homelessness by showing that punitive policy in Europe is by no means only a question of an emulation of neoliberal, US-style practice. Still there is ample of room for further research as we ultimately still lack a clear understanding of both the extent and consequences of punitive approaches to homelessness, its economic (neoliberal?) causality, how it intersects with welfare and social service intervention, and what outcomes it produces.



Research in Progress



Part H

Progress Report of On-going Research: A Strengths Based Intervention for Homeless Youths: The Effectiveness and Fidelity of Houvast

Background

The start of a study on the effectiveness and fidelity of Houvast was announced in Vol. 5(2) of this journal in 2011 (Wolf *et al*, 2011). Houvast was developed in response to a lack of evidence-based and tailored interventions for homeless youths (Altena *et al*, 2010). Houvast is a strengths based method and developed based on scientific evidence as well as practice-based insight. It was developed in close collaboration with homeless youths and professional. The main aim of Houvast is to improve the quality of life of homeless youths by focusing on their strengths and stimulating their innate capacity for autonomy and self-reliance. In the meantime, data collection among homeless youths and professionals is almost finished and we can present results on the fidelity of the Houvast method in the experimental condition.

Objectives

The primary aim of this study is to test the effectiveness of the Houvast method on quality of life in Dutch shelter facilities for homeless youths. Research questions are:

- Is Houvast more effective than 'care as usual' in improving quality of life among homeless youths?
- Is Houvast more effective than 'care as usual' on secondary outcomes regarding recovery like psychological health, substance use, care needs, fulfilment of psychological needs, coping, resilience, working relationship with the professionals and attainment of goals.
- To what extent do trained professionals work according to the Houvast method? In other words: what is the degree of fidelity of the Houvast method?

Methods

We used a cluster-randomized controlled trial research design with a control and an intervention group and one baseline and two follow-up measurements. The study is conducted among ten Dutch shelter facilities, which provide ambulant or residential care to homeless youths. The shelter facilities were randomly allocated to the intervention ($n = 5$) or control group ($n = 5$). Professionals, team leaders and managers who participated in the intervention group were trained in the Houvast method. Subsequently, youths in the experimental group received care according to the Houvast method and youths in the control group received 'care as usual'. Youths in both groups were interviewed within two weeks after the start of the ambulant or residential care (T0). They were interviewed for a second time (T1) when they left the shelter facilities or care was terminated or when youths had received care for six months consecutively. The final follow-up interview (T2) took place nine months after the first interview. In addition, also professionals filled out a questionnaire around T1 about their perspective on the quality of the working relationship with their client and their quality of life. More details on the objectives, design and methods of the study can be found in a study protocol that was published recently (Krabbenborg *et al*, 2013).

Progress to-date

Implementation of Houvast

Different activities were conducted to facilitate the implementation of the Houvast method in each of the five shelter facilities in the experimental condition:

- End 2011, and prior to data collection, all five shelter facilities finished their training in the Houvast method:
 - Professionals received a four-day training provided by experienced trainers to learn the principles of Houvast;
 - Team leaders received a two and half day training to learn the principles of Houvast targeted at managing a team;
 - Two to three managers of each shelter facility attended a meeting with the researchers in which they on how to optimize the implementation of Houvast (e.g. by organizing internal seminars).

However, because transferring what was learned during the training to daily practice proved to be more difficult than expected (e.g. because of staff turnover), we organized the following additional implementation activities:

- April 2012, in each shelter facility a supervisor was assigned who would be responsible for coaching the workers on the job in the strengths based method. All supervisors attended a six-day training in the coaching of Houvast.
- September 2012, all professionals attended a follow-up training day.
- April – June 2013, all shelter facilities received a so called ‘booster session’ on location which was targeted at improving the recommendations that were given in the fidelity reports (see next paragraph).

It can be concluded that even though in general, professionals, team leaders and supervisors were enthusiastic about their training in the Houvast method, they experienced some difficulties fully implementing this method in their day-to-day practice. In particular, we found that it takes time to shift from a problem-oriented approach to a strengths-based approach and that facilitation by management is crucial.

Data collection

Data collection of the baseline measurement started at the beginning of 2012. At present, baseline interviews (T0) are completed with 251 homeless young adults of whom 68% are male. Also, we finished follow-up interviews (T1) at the time they leave the shelter up to a maximum of 6 months after T0. In total, 198 youths were interviewed for a second time (T1), which results in a response-rate of 79%. In addition, we started the final interviews (T2) nine months after T0 and expect to complete the last ones in January 2014. At baseline, 25,5% ($n = 64$) of the young adults received ambulant care and 74,5% ($n = 187$) received residential care. Their age ranged from 17 to 26 years (M age = 20, $SD = 1.7$) and the majority had a Dutch nationality (91%). At the moment, also 135 professionals have completed a questionnaire on the working relationship.

Emerging Findings on Fidelity

In order to answer our last research question, fidelity assessments were conducted between June and September 2012 among five Dutch shelter facilities for homeless youths that participate in the experimental condition. To assess the fidelity of Houvast several tools were developed, such as interview outlines, an observation scheme, and questionnaires. During a one-day audit by two trained researchers on location, a file analysis, a focus group with homeless youths, and interviews with the team leader and supervisor were conducted. Professionals, supervisors and team leaders had to fill out a questionnaire two weeks prior to the audit. Fidelity was measured using the Dutch version of the strengths model fidelity scale, which consists of ten indicators corresponding to three subscales: structure, supervision and clinical practice (Rapp and Goscha, 2006). A total fidelity score was composed by averaging

the ten indicator scores. The results showed that the average fidelity score on caseload, group supervision and strengths assessment was satisfactory. However, six months after implementation, none of the shelter facilities achieved a sufficient total model fidelity score. Recommendation on how to improve a low fidelity scores are diverse and range from factors at the primary process to the organizational level (Krabbenborg *et al*, forthcoming). For example, professionals did not consistently use the tools belonging to the Houvast method and shelter facilities tended to use institutionalized resources instead of naturally occurring resources. Also, professionals barely received field mentoring while supervisors argue that they did not have enough time to provide supervision to each professional. The availability of financial resources and the willingness from organizations to change their policy on certain points (e.g., investing in supervision) are factors which could lead to an improvement of all indicators. Each shelter facility received an informative report on the audit, including the scores on the indicators and the total fidelity score, a summary of the results with specific recommendations on how to improve model fidelity. This report was much appreciated by the team leaders and managers as it gave concrete pointers for improvement. In addition, an information leaflet about the aggregated results of the model fidelity of Houvast was disseminated.

Outlook

We are currently working on a publication of the role of self-determination in explaining quality of life in homeless youth at the time they enter shelter facilities. Additionally, as data collection is almost completed, with the input of an expert committee we are finalizing a data analysis plan for testing the effectiveness of Houvast. We expect the results on effectiveness to be available in Spring 2014. The final research report for the Netherlands Organization for Health Research and Development (ZonMw) who funded this study, will be available in Autumn 2014. These results will be disseminated at national and international conferences and publications.

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The Risk of Homelessness in a Scandinavian Welfare State

The Danish National Center for Social Research is currently conducting a research project on the risk of homelessness in Denmark. Leader of the research project is researcher Lars Benjaminsen who is also a member of the European Observatory on Homelessness. The project is financed by a grant from The Danish Council for Independent Research, Social Sciences.

The project is based on individual micro data for the entire Danish adult population of 4 million people on various demographic, economic and social characteristics, such as income, employment, education, ethnicity, mental health, substance abuse etc. The data are obtained from administrative registers and are linked on individual level. This information is linked to data from a nationwide client registration system on homelessness shelters made available by the Social Appeals Board.

One subproject aims at comparing the risk of homelessness across different welfare systems. The analysis mirrors the paradigmatic study by Kuhn and Culhane on the typology of shelter users in New York and Philadelphia that found three different groups amongst the homeless – the transitional, the episodic and the chronic homeless, and that these three groups had both different patterns of shelter use and different profiles in terms of support needs. The Danish study analyses whether a similar or different pattern can be found in Denmark – in a different type of welfare state.

A second subproject aims at analysing the risk of homelessness in Denmark, determining what are the main risk factors for homelessness. It is analysed whether homelessness is a rare or regular event in major risk groups such as amongst the mentally ill, substance abusers, or individuals who have been incarcerated. Due to the strong data, detailed analysis on the relative impact of different risk factors can be conducted and interaction effects between different risk factors can be tested statistically – for instance to what extent comorbidity between mental illness and substance abuse further increases the risk of homelessness in addition to the statistical main effects of these factors.

|||||

A third subproject aims at analysing the risk of homelessness amongst young people. Besides risk factors characterizing young people themselves, also risk factors for their parents are included in the analyses, such as the educational level of the parents, and whether a parent has been diagnosed with mental illness. Thereby the project gives new knowledge on the impact of family background on the risk of homelessness.

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Research Project on Prevention of Homelessness in North Rhine-Westphalia, Germany

Background

The Ministry of Social Affairs in North Rhine-Westphalia (NRW), Germany's regional state with the largest population (17.5 million), is responsible for the only action program to tackle homelessness that exists in Germany. Under this program innovative projects are funded, a revised homelessness count is conducted every year, thematic workshops are organised and several research projects and the development of advice material have been commissioned. In November 2012 the GISS research institute in Bremen was contracted by the Ministry to conduct a large project on the prevention of homelessness in NRW.

Objectives

The research project aims at enumerating the number and profile of households in NRW that been threatened imminently with homelessness during the year 2012 (broken down by the 393 municipalities of NRW and differentiated by population size). The local responsibilities, administrative structures and proceedings for preventing homelessness are explored. The project works with a concept of secondary prevention, i.e. it focuses on households being in imminent risk of homelessness (but who have not (yet) lost their homes at the point of intervention).

Methods

Quantitative as well as qualitative methods are used in this research project. All municipal prevention services, NGO advice centres and jobcentres in NRW were asked to complete an online questionnaire with detailed questions about the local organisation of prevention services (which has often changed quite considerably after the introduction of the "Hartz reforms" in Germany in 2005), the number and structure of households in imminent risk of being evicted from their homes or

heaving to leave these for other reason (such as escalating conflicts), the reasons and triggers for being threatened with homelessness, support needs of the households in this situation, type and extent of support provided, the results of prevention measures etc. In addition a considerable number of qualitative local case studies are conducted, covering different types of administrative organisation of preventative work and involving all experts doing preventative work at the local level (at the municipality, NGOs, jobcentres etc.).

Progress to date

The written survey has been carried out in summer 2013 and had a very good response rate. Almost all of the 23 large independent cities (more than 95 per cent) and more than half of the 373 municipalities in districts have participated in the research. More than two thirds of all NGOs advice centres participated as well.

The project was able to base the quantitative analysis on data from 180 municipalities having been in contact with more than 45 000 households under imminent threat of homelessness in NRW during the year 2012. Details of this analysis will be published in summer 2014.

In autumn 2013 local in-depth case studies were conducted in twelve municipalities of different size all over NRW. The results of these qualitative case studies will be presented together with the quantitative results in 2014.

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Caring for the Homeless and the Poor in Greece: Implications for the Future of Social Protection and Social Inclusion

This research follows the growing policy concern in Europe on how to address acute forms of social exclusion and homelessness. In Greece, the issue has only recently been recognized in the context of the prolonged economic crisis, so its documentation is limited. This research seeks to assess the efficacy of current provisions for the homeless in Greece and examine the applicability of integrative models of care developed in the US and the UK. The research aims first: to provide updated evidence for the extent of various levels of visible and invisible homelessness in Athens and to map different types of shelter and homeless assistance. Second: to organize a dialogue among key stakeholders, to diagnose key problems in the provision of care and to consider the means for advancing social innovations like ‘housing led’ approaches. Attention is given to local responses to the crisis and the potential for bottom-up change. The project is led by associate professors Arapoglou Vassilis and Gounis Kostas at the Department of Sociology – University of Crete and is financed by the National Bank of Greece Research Innovation Fund on South East Europe and the Hellenic Observatory at the London School of Economics.

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Reviews



Part I



Symposium on Jürgen von Mahs (2013) Down and Out in Los Angeles and Berlin: The Sociospatial Exclusion of Homeless People.

Philadelphia: Temple University Press, pp.208, \$74.50.

This book sets out to find an answer to the paradox that although the U.S. and Los Angeles (L.A.) have scarce service and housing supply for homeless people, while Germany and Berlin offer a comprehensive system of support and resources also for this group, their share of homeless people is approximately the same. Furthermore, the Berliners' time as homeless is even longer, which implies that exiting homelessness is at least as difficult for them as for Los Angeles' inhabitants. This poses challenging questions for homelessness research, such as: "What role does government intervention play in helping homeless people secure income and shelter and, ideally move on to employment and housing?" (p.2). The author seeks an answer through a theoretical model and analyses of ethnographic data (from Berlin) and secondary research (on homelessness in L. A.).

In Chapter One (and in several other places in the book), von Mahs outlines the purpose, content and structure of the book as well as its theoretical foundation, which comprises Esping-Andersen's welfare regime theory; 'deconstruction' as a method to explain (lasting) homelessness; external and internal determinants of exit from homelessness; and finally, a life course approach to account for homeless persons' different ages, experiences, etc. The author claims that his main contribution to theories on homelessness is his conceptualisation of 'sociospatial exclusion' as the combined result of legal exclusion, service exclusion and market exclusion as the main reason for homelessness. His general conclusion is that homelessness (in the 1990s) lasts longer in Berlin because – although service exclusion and legal exclusion are less severe than in L.A. and the U.S. – regulations of wages in Germany reinforce the market exclusion. The question is then: Does he really show this through an analysis of his data and research literature? In the remainder of this review I will discuss von Mahs' findings and conclusions in relation to his theoretical points of departure, methodology, data analysis, and concepts with a special focus on its possible weaknesses.

The book is explicitly inspired by *Malign Neglect* (1993) by Wolch and Dear,¹ especially its geographic approach to urban development and homeless people's experiences and the ambition to interweave macro and micro data into a coherent theory. Some structural aspects, however, are not dealt with by von Mahs, such as the global restructuring of finances and industrial production. Instead, he draws attention to the unification of East and West Germany. Some of his respondents define themselves as 'unification losers'; they used to have regular life courses, but lost their jobs and housing in connection with the unification. This category of Germans has a situation akin to that of the black industrial workers in L.A. in the 1980s, which Wolch and Dear (1993) analyse in their book. They lost their jobs through the global restructuring of the economy and production, their working skills and experience became obsolete, and eventually they became homeless.

According to von Mahs the 'conservative-corporatist' welfare regime of Germany enables a better and more humane prevention and management of poverty and homelessness than does the American liberal (or residual) welfare state. However, the decisive difference seems to be that the German homeless, as opposed to those in L.A., have the same social rights and access to social security and assistance as other citizens, in other words, that there are welfare arrangements in Germany that are missing in the U.S. It does not matter, then, what kind of welfare regime Germany belongs to; Esping-Andersen's typology should not be necessary to highlight this difference.

As 'internal determinants' of exit from homelessness von Mahs identifies gender, age, health etc., but also three kinds of capital, each connected to one aspect of the welfare regime – social capital (the family), human capital (the market), and social welfare capital (associated with the state). The two latter of these 'nexuses', in turn, correspond with market exclusion and service exclusion, respectively. These theories and concepts make up a neat and comprehensive model for explaining and describing homelessness, but this reader remains unsure of the usefulness of some of the concepts and their actual contribution to our understanding of current homelessness and exit from it. 'Social welfare capital' is defined as 'awareness of, access to, and use of welfare and other social services' (p.7), but in contrast to the general idea of capital as something relational – to a field, a market or a system, and to competing individuals – it is not really used to distinguish between homeless people, but rather to contrast the two countries' welfare systems to each other. 'Human capital' is also, curiously, the only form of capital related to

¹ It is somewhat troubling that this book, which is mentioned several times (see, e.g., p. 5, 47 and 70), is not included in the list of references. On the other hand, another book by the same authors, *Landscape of Despair* (1987) appears there twice, once as Wolch & Dear (1987) and once (correctly) as Dear & Wolch (1987).

the market, which is otherwise mostly associated with economic capital, at least when it comes to housing. On the other hand, 'cultural capital' could have been useful to explain the relatively bad outcomes for the six respondents with East Germany descent, of whom only one managed to get regular housing within the follow-up period.

As a general explanation for homelessness von Mahs puts forward the concept of sociospatial exclusion, comprising three forms of exclusion: legal exclusion, service exclusion and market exclusion. For some reason 'legal exclusion' is only used to refer to spatial exclusion from certain places in the city, although evictions or, for instance, rejections of undocumented migrants are also regulated in law, and unregulated exclusion might have the same consequences for homeless people in the urban centres, e.g. mandatory entrance fees, or security guards expelling people who do not appear as proper consumers in shopping malls.² The concept of 'service exclusion' applies here to the fact that services for the homeless tend to be located outside – excluded from – commercial city centres, and especially in the case of L.A., placed in the most impoverished districts. In addition, von Mahs underlines that the public transport system mitigates such exclusion in Berlin. But what should you then call a tendency of the services to themselves exclude homeless people, for instance because they have failed to look for jobs, or stay sober, or do not fit with the target group? This phenomenon is unfortunately not dealt with at all by von Mahs.

Market exclusion, finally, refers to both housing and employment. Also in discussing exiting from homelessness and the respondents' degree of success in this regard, von Mahs keeps employment and housing together as a whole, as if exiting homelessness would not be possible without a regular work income to cover rents, and as if housing would not suffice to solve individual homelessness. This may be logical in an American context, although the author underlines that while low-paid temporary work in L.A. does give access to housing, it is insufficient to keep it in the long run. However, in a welfare state it should be possible even for unemployed individuals to have a home, and in other contexts the author highlights the importance of housing allowances and public welfare to paying the rent in Germany. Thus, having permanent housing should – in this reviewer's opinion – be a sufficient criterion for exiting homelessness in the final analysis. Likewise, 'market exclusion' should have been divided into exclusion from the

² As von Mahs regrets the scarcity of empirical studies of such exclusion, I take the opportunity to recommend two very interesting Norwegian monographs on this subject: Heidi Mork Lomell (2005), *Det selektive overblikk. En studie av videoovervåkingspraksis* [The Selective Overview. A Study of CCTV Practice], and Ida Nafstad (2013) *Et anstendig menneske. Møter mellom rusbrukere og det offentlige rom i Oslo* [A Decent Person. Encounters between Drug Users and the Public Space in Oslo], both published dissertations in criminology at Oslo University.

labour market and from the housing market respectively, since they require different forms of 'capital'. Furthermore, housing access or exclusion are not only a consequence of the market and the individual's human capital, since many barriers can be removed (or indeed reinforced), through state intervention and public policy, something that Wolch and Dear (1993) highlight in their study of homelessness in L.A. von Mahs himself provides interesting information in his book on the protected market segment policy in Berlin, through which 20 per cent of all new homes are allocated to people who are or risk of becoming homeless (p.118), and which has helped thousands of homeless people to get access to regular housing or avoid homelessness. However, his theoretical model and framework cannot fully account for this great success.

The 28 homeless respondents in Berlin, who were interviewed several times in the course of one year, are divided into five categories based on their lives up to the present homelessness episode. A main distinction is made between those with previously regular life courses – young people with a 'normal' childhood and upbringing, and 'old' people (between 35 and 50 years), who used to have regular work and housing – and those without. The latter, in turn, are subdivided into people with 'transient' or 'deviant' life courses, respectively, and finally homeless people 'with disabilities'. The typology seems to be based on a mixture of common knowledge of prospects on the one hand, and client categories and priorities within the social services on the other. It works decently in some analyses, such as in the interesting observation that older men with previously regular life courses had special difficulties due to their shame and sensitivity to degradation. However, other distinctions could have been discussed, since the outcome in terms of optimizing or stabilizing their situations after one year's follow-up does not really fall out as expected.

In the interesting, but somewhat bewildering, Table 5.1 (p.108) von Mahs lists and typifies the outcomes for his 28 respondents after a year, using a categorization originally created to account for welfare recipients' development. Here 'optimizing' means regular housing and work (4 persons), 'stabilization' housing but no work (12 persons), and 'entrenchment' means being still homeless and living off welfare (12 persons). In discussing his results the author does not really make use of his elaborated previous typology, based on previous life courses, or his conceptualisation of sociospatial exclusion, but remarks rather on the respondents' substance abuse, their amount of help received from social workers, and their degree of activity in looking for work; in other words, he applies a social work perspective. If one does combine the outcomes with the previous typology, it is obvious that six of the eight persons defined as 'transient' were 'entrenched' after one year, but this held also for three of the eight older persons with previous regular life courses, while half of the 'deviant' cases were 'stabilized'. Four were still (or again) in the same transitional

housing, despite the fact that they had received a lot of help from social workers, and two among the six that obtained regular rental housing did not get such help. It seems to me that these results call for more, refined and renewed analyses that might result in a new, empirically grounded, and theoretically informed typology.

The author has a tendency to discuss his results from Berlin as 'evidence' and to compare them with general findings from research into homelessness in L.A., which is sometimes based on completely different methodologies and data. For instance, 16 of von Mahs' 28 respondents were accessed in a 'mid-level transitional shelter', while two thirds of the shelters in Berlin at the time were emergency shelters, or commercial shelters of low quality (p. 33f., 20). The homeless persons targeted by the quantitative studies in the United States were probably found in other kinds of facilities, and since this is a qualitative study, there can be no pretensions on statistical representativeness anyway. More reflection on the sample and its possible bias would have been welcome. In addition, von Mahs keeps 'quantifying' his results (see, e.g., p.56, 108f.). Analytic induction (see Katz 2001), i.e., scrutinising the 'deviant' or 'negative' cases, would probably have been a theoretically more fruitful way of analysing this data.

The book is built on ethnographic research from the 1990s but published in 2013. Therefore, it is strange that Housing First is barely mentioned and not discussed as an alternative way to reduce homelessness. It is also curious to read the author's advice on more individual case management and service-plans, better coordination of services and agencies, and more communication as ways to facilitate exits from homelessness, since such measures are not obviously related to his theory of sociospatial exclusion, nor to his typology of homeless people. In addition, it is unclear how these old, almost ritualistic recommendations for social workers might affect homeless people's access to housing (besides possibly redistribute it). The suggestions that better shelters and more engaged social workers will solve the problem of homelessness are partly based on the result of the follow-up study, which showed that the respondents in a mid-level shelter in general scored better after one year than the others, are not viable without a deeper analysis (especially since we do not know if the former comprised a special selection). Besides, this result was not clear-cut (see above).

This review has highlighted some shortcomings and areas where I think further discussions, research and analyses are needed. This should not hide the fact that *Down and Out in Los Angeles and Berlin* is a zealous theoretical work, with interesting empirical data on homelessness in Berlin. It is well structured and accessible. Several figures in the book illustrate the relations and applications of its key concepts, as well as the differences between L.A. and Berlin. Where they appear, quotes from interviews serve an important function by giving a voice to homeless

people in Berlin and explicating their situation and dilemmas. In this reader's view, the strongest contribution to the general knowledge on homelessness is that it demonstrates how and why the welfare state of Germany makes it somewhat easier to exist as homeless in Berlin, but not to exit homelessness. In summary: This book is definitely worth reading and discussing, even though it will not be the final word in the on-going discussion on how to exit or end homelessness.

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I was recently asked if I'd be interested in undertaking a review of a newly released book featuring a comparative analysis of the sociospatial exclusion of homeless citizens in two cities: Los Angeles and Berlin. My response was as immediate as it was positive. For the past decade I've been working within and across cities in three countries, trying to tell the stories of the people I meet, both within their individual settings and across those spaces. To discover someone else engaged in this type of work, and to be given the opportunity to get a first glimpse at a body of their work, was a 'happy-making' moment in the usually dreary end of an academic year. Upon receiving the book, I dived in with enthusiasm. It's a slim volume, so it was only a matter of days before I finished my first reading. And when I put it down, two words came to mind: Ambitious and passionate. Allow me to explain why.

The book is ambitious in its purported scope. Too few scholars take on comparative work for various logistical and other reasons. It's expensive, it's challenging to set up two research sites, it is hard work to conduct two or more forays into field research at a time, and finding comparable sites is always problematic. I could go on. Thus a book that promises to compare the treatment of homeless citizens within not only two major metropolitan areas in two very different countries, but across two distinct cultures and languages? Yes, I would consider that to be a very ambitious project.

This book is not that project. Deeming this book comparative in any true sense of the word is problematic for one simple reason: There is no parity – or anything approximating parity – in terms of how data was collected and who it was collected from. For the Berlin phase of research, a series of interviews were conducted in 1998 and 1999 with 28 homeless citizens, as well as interviews with 16 'key informants.' Interview data is supplemented with observations based on field research. It is also rounded out by information collected on the larger institutional and socio-political environment within which the research participants are situated.

Contrast the data collection in Berlin to that of Los Angeles. Whereas in Berlin the approach is said to be 'bottom up', the author inexplicably switches to a 'top down' approach in Los Angeles. The overall effect of employing this alternate perspective on the issue of socio-spatial exclusion is that the lived experiences of homeless citizens in Los Angeles are excluded from this book. And yet, in the first chapter the author specifically advises that for this work he engaged in a "comparison at the urban scale and the scale of *lived experiences*" (von Mahs, 2013, p.3; emphasis mine). Instead of actually tapping into these lived experiences, the reader must wade through secondary data from homelessness service providers published in the 1990s. To be fair, the Los Angeles data is not all based on others' data or references to the literature. Fourteen L.A. service providers and eleven federal policy-makers (or their staff members) were also interviewed (very conveniently the author

appended a list of interviewees). Still, how one can arrive at some notion of individual lived experiences through employing what has been termed a 'top down' approach is not at all clear. Having myself been told often enough by homeless citizens that service providers do not always adequately represent their views, I cannot help but think that the book would have been significantly better, more of a truly comparative endeavour offering real insights into its topic, had the author made any attempt to fly out to Los Angeles and meet even a handful of the thousands of individuals who live there without permanent housing and ask them to share their stories. Instead, we have a book that purports to tell us something meaningful about sociospatial exclusion in two cities for the purposes of helping to inform public policy discussions, and the homeless citizens of one of those cities do not make even the briefest of appearances across its pages.

When comparing two sites, it's critical to explore how they have been shaped by not only socio-cultural factors, but also geographical, political and economic issues, particularly in public policy discussions. These dimensions ought to be examined in order to set out clearly why they are good sites for comparison and what such comparisons will tell us about the applicability of policy transfer from one site to another, as well as the likelihood that such policy transfers might actually take root in adopted soil. As a reading of both the literatures on neoliberalism(s) and policy transfer will tell you, there are not only 'spaces of exception' (Savelsberg, 1994), but also spaces in which, for socio-cultural, political, geographical, and/or economic reasons, some ideologically rooted policy 'innovations' might be borrowed without the wholesale adoption of another country's way of life (Dolowitz and Marsh, 1996). Thus, we stumble onto another reason why comparative work is seldom undertaken: It is complex, often tedious work to flesh out each of those dimensions in order to explain the possibilities of policy transfer and their potential effects. Some effort is made in the first chapter to establish a comparative framework by looking primarily at differences, and a few similarities, in welfare provision, as well as exclusionary practises directed at homeless citizens in both Germany and the U.S. However, what is missing is that deeper analysis that tells us why Germans have followed the policy paths they have, and why Americans chose the forms of welfare provision they do. We also have no sense of whether, at the local level, Berlin or Los Angeles is representative of the forms of welfare provision in their respective countries. Simply asserting that policies are set at a federal level is not enough; practise occurs at the local level, and while influenced to varying degrees by federal policies and funding, is also the product of local attitudes. Thus, in the U.S., you find cities with varying progressive and regressive attitudes and policies directed towards their homeless citizens. So, why is Los Angeles the paradigmatic example of the U.S.? How similar or different is the treatment of homeless citizens in Berlin compared to how they might be treated in

Munich or Hamburg? Do the attitudes of Berliners represent those in both urban and rural areas? Can they stand in for all of Germany? Such questions need to be considered and in detailed fashion.

Of some further concern is that, based on my reading of this book, Los Angeles appears to be the land that time forgot, forever trapped in about 1997. I recognize that by the time a book is completed and comes to market, there can be a gap of anywhere from one to five years, but this is a fifteen year gap for a book that is supposed to tell us about the strengths or pitfalls of particular forms of welfare provision, so that it can be done better in the future. Berlin is slightly more fortunate, as some effort has been made to update readers on what has taken place there since 1997; however, we don't *really* get much further than about six pages of discussion of select macro-level post-1997 happenings. Such events include the Hartz IV reforms in 2005 and some mentions of the global recession and the potential for negative effects on Germans following the Euro debt crisis (about six pages). Unfortunately, we have no specific data on how individuals themselves – including those who form the basis of much of the earlier analysis – are faring within the current system; rather, we only know how they did fourteen or fifteen years ago.

In relation to the second word that sprung to mind upon finishing this book – passionate – I am referring to both its central argument and the theoretical scope of the book. In essence, this book is intended to serve as a warning: “My intentions, at the time, were twofold: Using the example of homelessness, I wanted to show a German audience that any flirtation with U.S.-style neoliberal policy – hotly debated at the time – was counterproductive and damaging. At the same time, I wanted to show a U.S. audience that an alternative – better provision of welfare, as in Germany – was possible and desirable” (von Mahs, p.ix).

As the author's data makes clear, at the time that this study was conducted, welfare provision in Germany wasn't ideal, but there were no solid indications that Germans were about to abandon their existing system (in 1997) for anything approaching what might have been seen on the ground in Los Angeles. Further, as previously noted, whether Germany was primed socio-culturally, economically or politically to adopt an American style of neoliberalism – a necessary set of preconditions – wasn't concretely set out, so we have no real sense of how realistic such concerns really were or are.

What *is* offered as empirical support for the position that it is possible (or was), that Germans might adopt an U.S. form of neoliberalism, insofar as their treatment of homeless citizens, are three clues: 1. references to 'hot' public policy debates; 2. the fact that Berlin, like many other cities in Europe and North America, had been creating and enforcing bylaws that limit the ability of homeless citizens to utilize public spaces as they might see fit; and 3. the Hartz IV reforms. Of these, perhaps

The forms in which and the extent to which homelessness manifests itself in a society depend not only on the prevailing economic, political and legal conditions at the national level but are, rather, also characterised and moulded to a considerable extent by local conditions. The comparative method, as a quasi-sociological substitute for the experiment, is unfortunately an instrument applied only rarely for better understanding these conditions and developing more successful strategies to combat homelessness. The book entitled "Down and out in Los Angeles and Berlin" by Jürgen von Mahs arouses great interest on account of being, on the one hand, one of the rare comparative studies dealing with homelessness and providing a two-dimensional comparison in this regard, i.e. national (USA, Germany) and local (Los Angeles, Berlin) and, on the other hand, focusing in a consistent manner on conditions conducive to and posing an obstacle to overcoming homelessness.

The empirical basis for the study is formed, for Los Angeles, by a secondary analysis of the already numerous studies on homelessness in that city, as well as expert interviews. To analyse Berlin, which has not been examined extensively by previous studies, von Mahs conducted his own impressively diverse empirical studies in 1998 and 1999. In addition to an analysis of the literature, these comprise surveys (e.g. among neighbours of emergency accommodation shelters), as well as key-informant interviews with representatives of various state and NGO institutions (list 153ff). He also used ethnographic participant observation methods with institutions providing assistance for homeless people, including a one-month stay in a transitional accommodation facility for the homeless. The most extensive source used in the further analysis comprised in-depth interviews with homeless people. Of particular interest in this regard was the experience that homeless persons had with a high number of state bodies and social services, which is a very strong determining factor not only for the circumstances of their lives as homeless people but, rather, also with regard to their chances of overcoming homelessness. The experience and life courses of the homeless interview partners are classified under five different life course types. Subsequently, the specific problems and support needs of the five groups in their attempts to overcome homelessness are described and corresponding requirements for social services drawn up. By way of brief follow-up interviews conducted about one year later, von Mahs is able to document the success or failure of 28 single homeless interview partners in their endeavours to overcome homelessness.

The study results are structured in theoretical terms by loosely following a geographical approach, welfare regime theory, the life course approach of dynamic poverty theory, in addition to a dissertation on the 'internal and external determinants of exit from homelessness' (p.6). Chapters 3-5 analyse the different dimensions of exclusion of homeless people. The situation in Los Angeles and the USA fades into the background at times in this respect, forming in the main a backdrop

against which the substantial empirical material is expounded and interpreted. The chapter on legal exclusion deals with the criminalisation and expulsion of homeless persons by the local state and shows how insufficient financial support for homeless people encourages the development of informal survival strategies and how the life situation of homeless people forces them into a life in the public domain. The fourth chapter looks at the second dimension of exclusion, i.e. 'service exclusion', in a very impressive manner. It shows how the geographical situation of the urban area, as well as poor standards in facilities and accommodation for the homeless, each individually contribute towards exclusion and exacerbate problems of homeless people. Although they offer at least a minimum of assistance and advice as well as the possibility of mutual support and the development of supportive peer networks, they are stigmatising places (p.88) that immobilise their users, promote hopelessness, encourage the consumption of alcohol and drugs and alienate people from contacts with the world of the non-homeless. It is only in well-equipped facilities with intensive social assistance programme that the situation looks somewhat better: "It is notable that, although almost two-thirds of the Wohnheims's (rated as mid-level shelter S.N.) residents found housing, often relying on assistance by social workers on the premises, none of the respondents ever exited homelessness from a low-quality shelter" (p.80).

Barriers of the labour and housing markets, which make it more difficult or impossible to overcome homelessness, are analysed in the chapter on market exclusion, which also contains an introduction to the reform proposals presented, among other things, in the concluding chapter.

The unregulated labour market in Los Angeles, compared to Berlin, makes it easier for homeless people to find work. However, such work often does not provide a living wage and is precarious, meaning that homelessness threatens once again. Von Mahs considers German labour and housing markets to be much more closed than those in the US and Los Angeles. "So-called insiders, participants of Germany's social insurance system, enjoy excellent social protection, whereas so-called outsiders, including the homeless, find themselves increasingly and sometimes permanently excluded from the formal economy, entrenched in and dependent on welfare as their life circumstances deteriorate to the point of hopelessness. The often-inevitable result is long-term homelessness that comes with great personal and cumulative fiscal costs" (p.114). Tight housing and labour markets, market access barriers in conjunction with insufficiencies of social services, as well as inadequate counselling and placement are the essential elements of 'market exclusion' that keep far too many homeless people trapped in their situation.

The final section, chapter 6, first brings together the different dimensions of exclusion, i.e. legal exclusion, service exclusion, market exclusion, to form 'one coherent model of socio-spatial exclusion' (p.122). These are then compared with each other with regard to their reciprocally exacerbating impact on homelessness in Berlin and Los Angeles. One problem associated with von Mahs' study, not addressed by me up to this juncture, a problem which makes it considerably more difficult to get into, takes on renewed significance here, i.e. that the initial thesis of "the prevalence rates of homelessness being almost as high in Germany as in the United States in the late 1990s, affecting close to 1 percent of the total population" (p.1) is contra-intuitive, at least for the European reader, and in addition, not adequately substantiated or, in my view, even verified.

Firstly, with regard to prevalence rates: von Mahs bases the statement that around 1 percent of the population was homeless in the late 1990's both in the USA and Germany on, for the latter, one source, i.e. the National Federation of Service Providers for Homeless People (*Bundesarbeitsgemeinschaft Wohnungslosenhilfe, BAG-W*), the only institution that publishes data on the total number of homeless people throughout the entire country. These figures, as well as those cited for the USA, are not discussed on the basis of a critical analysis of the sources or with regard to their comparability (definitions, survey methods). It is not mentioned, for example, that, on account of the lack of official statistics concerning homelessness, the figures published by the BAG-W are estimated numbers, not related to a day count, but rather to the estimated total annual prevalence number of homeless people.

At another point, von Mahs quotes the number of officially registered homeless persons (i.e. without unreported cases, without the homeless living on the streets, based on a day count) in Berlin (p.14, footnote 18). The figure of 11 000 officially registered homeless persons given by von Mahs for 1997 ("late 1990s") corresponds to 0.32 percent of the residents of Berlin at that time, on the basis that there were a total of 3 425 759 inhabitants in Berlin as a whole. If the number of officially registered homeless people amounted to 0.32 percent of the population "in the late 1990s" for the "homeless capital" of Germany, there would appear at least to be a need to explain how that compares with the total annual number of homeless people in Germany as a whole, including hidden homelessness and homeless persons living on the streets, being supposed to have been more than three times as high, i.e. "close to 1 percent" (p.1).

In addition to presenting homelessness as "close to 1 percent", the initial thesis further states: "Not only that, but the extent of long-term-homelessness (homeless spells lasting more than one year) was almost twice as high in Germany, affecting approximately two-thirds of all homeless people nationwide" (p.1). The source quoted in this regard is regrettably unclear. It can be inferred from an earlier publi-

cation by von Mahs (2005) that the statistical reports of the BAG-W must have been referred to in this regard. In the earlier article mentioned above, von Mahs reports, however, that 50 percent of the homeless persons had been homeless for longer than one year. In fact, BAG-W statistical reports available to me online show the proportion of homeless persons who were homeless for longer than one year in Germany between 1994 and 1996 as being 53.1 percent, 49.5 percent and 47 percent respectively.³ Furthermore, it should be noted in critical terms that no reliable details concerning the proportion of long-term homelessness in Germany as a whole can be derived from the data contained in the BAG-W statistical reports as these record only a small, non-representative section of the total quantity of homeless people in Germany, i.e. those who receive more intensive personal assistance in institutions run by the non-profit-making homeless assistance organisation which use computerised documentation. Not recorded or under-represented in this respect are those homeless persons who do not have any contact with the non-profit-making homeless assistance organisation (i.e. the vast majority of homeless people), homeless families, homeless persons linked to local-authority assistance systems who live in local municipal shelters, as well as homeless people in the eastern German federal states.

This therefore means that the comparative conclusions placed in the context of the welfare regime theory by von Mahs are also based on very weak premises; i.e. that specific conditions in Berlin, and Germany, (strongly closed labour market, widespread long-term homelessness, access barrier to the housing market), tend to lead to greater long-term homelessness, while the specific conditions in Los Angeles, and the USA, (more flexible labour market, under-employment, inadequate financial support for the unemployed, as well as a more pronounced level of legal and service exclusion), lead more to cyclical homelessness and poorer living conditions among homeless people.

In view of the stronger welfare state and better equipped assistance system for homeless persons in Germany, it is astonishing and needs to be explained why, as referred to by von Mahs on several occasions in his book, Berlin was so ineffective in helping homeless people to overcome homelessness in the 1990s (e.g. p.126). Attempts at explanation presented by von Mahs and the reform proposals building on these would have been more diverse, more precise and, perhaps, would have led to a change of judgements if he had examined in a more detailed manner over time which factors influenced the development of homelessness in Berlin in the late 1990s and the first few years of the new millennium. What is

³ BAG-W statistical report – Statistical Data on Homeless Single People Statistische_Table T 28 – duration of homelessness http://www.bagw.de/agstado/statistikberichte95_96.zip

striking is that Berlin was successful, following a phase of social distortions related to reunification, in roughly halving the number of (officially registered) homeless people between 1997 and 2004⁴.

An account of this development should have been given, and an analysis carried out with regard to what role the reorganisation (de-institutionalisation and strong preventive orientation), as well as the differentiation and quantitative expansion of programmes offered by the homeless assistance system in Berlin played during those years. Something else that should have been examined, in addition to the absolute number of homeless persons, is the fluctuation caused by those leaving and joining their ranks, i.e. how many new people became homeless per year (and what effect did the expanded preventive system have on this), how many people were able to overcome their homelessness and how many remained trapped in homelessness? The development of housing market conditions should also have been analysed in more precise terms. For Germany, this would also include the development in the number of social housing units, the size of the housing stock earmarked for those seeking accommodation as a priority, and the supply quota for those entitled to benefit from this, as well as the development of rents and the vacancy rate of rented accommodation as an indicator of the tightness of the housing market, plus an evaluation of rent levels considered reasonable by social welfare authorities as an important factor regulating access of unemployed persons to the housing market. These should then have been analysed in relation to the development of homelessness.

Although von Mahs does mention the importance of economic cycles of the housing market, (and labour market), at various points (p.95, p.113, p.115,) as well as the significance of the 'protected market segment' in Berlin (p.135), these factors are only incorporated into his model of socio-spatial exclusion in a very general manner rather than being subjected to systematic analysis. This results in an overemphasis, in relative terms, on what is correct and important criticism regarding the inadequacies of the social services and homeless assistance programmes, criticism that is illustrated in an impressive manner by personal reports emerging from interviews with those affected.

⁴ In 1988, around 6000 persons or 0.29 percent of the population of (West) Berlin were registered as homeless. In 1997, around 11000 persons or 0.32 percent of the population of Berlin (as a whole) were registered as homeless. In 2004, around 6000 persons or 0.17 percent of the population of Berlin (as a whole) were registered as homeless. The number of homeless people in Berlin: von Mahs 14, footnote 8. SN calculations with demographic development data: In 1987 (census), West Berlin had 2012709 inhabitants. In 1997, Berlin as a whole had 3425759 inhabitant and 3387828 inhabitants in 2004. http://de.wikipedia.org/wiki/Einwohnerentwicklung_von_Berlin

The specific reform proposals made by von Mahs accordingly ignore the area of social housing policy, through further development and re-invention of a social housing policy, which should not only be a policy of improving market access. Rather it should also be a policy of de-commodification or restraint of the market, which would constitute an essential contribution towards a successful policy for reducing existing homelessness, as well as preventing a serious housing crisis with structural long-term effects.

Instead, the reform proposals outlined by von Mahs are largely confined to the expansion and improvement of social services. However,

under current political and particularly fiscal circumstances, it is unlikely – unfeasible, even – that social welfare spending and funding for homeless services will substantially increase anytime soon. (...) Under such fiscal conditions, it is simply unlikely that services catering to an already highly stigmatized group could garner the local political and business support to increase service provision, cash assistance, or other benefits which the homeless already perceived as too low in the 1990s. Consequently, it is imperative to develop pragmatic and cost-effective solutions that involve the clients themselves early in the decision-making process (p.132).

Reform demands following this deliberation, i.e. for better case management, improved cooperation, communication and coordination of the social services involved, as well as anti-stigma activities are not only not new; they are disappointingly weak and miss the point (p.132). In the concluding prospects for the basic political conditions and further developments in Berlin and Los Angeles (pp.135 – 138), the focus is again broadened, in particular, towards criticism of neoliberal policy, leading to the declared finding that “(...) this research is a call for *more* – and more precisely, *better* – welfare intervention” (p.138).

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Jürgen von Mahs accepted a big challenge: A comparison of Los Angeles and Berlin concerning the sociospatial exclusion of homeless people. His main goal is to explain an apparent contradiction, namely “different welfare systems yielding similar outcomes” (p. IX). One of his provocative theses is an “Americanization of homeless policy” in Berlin (p.23). This statement is founded on a claimed exclusion from public space in both cities. In the framework of a huge ethnographic study with mixed methods he undertook a substantial number of interviews with homeless people and key informants, but also engaged in participant observations. And here the problems start. First of all he collected empirical data in Berlin, but not in Los Angeles. Thus he compares literature-based findings (Los Angeles) with empirical findings added to by a literature review (Berlin). The second, and bigger, problem is that his ethnographic study is around 14 years old. In the meantime radical changes have taken place in Germany. The neo-liberal welfare reforms since 2005 (“Hartz IV”) and the previous modifications of the homeless care had (and have) substantial consequences.

In addition, some of his checked facts (concerning Berlin), are out of date, wrong or imprecise. For example, the most recent valid data on homeless people in Berlin is from 2004, but he claims increasing numbers in several parts of his book. He uses old references, where there are newer ones, and there is considerable confusion about (changed) regulations and structures over the years (number of Berlin’s districts, German currency, legal foundations, etc.). The claimed deportations of homeless people took place in the nineties and are not conducted anymore. The claimed service exclusion (Figure 6.3) is not correct, on the contrary, most of the services for homeless people are located in the centre of Berlin (e. g. the biggest service concentration with night shelters, transitional accommodation etc. is a five minutes walk from the main station). Homeless people are not “contained in service ghettos” (p.128) as most of the needy persons are supported in forms of ambulant care (supported single or group living). Transitional accommodations like (commercial) hostels are mostly located in the centre of Berlin and also the claimed warehousing in low quality shelters was overcome many years ago. Yes, homeless people in Berlin are often “disillusioned, bored and depressed” (p.127), but there are not only “few places they are allowed to remain” (l.c.). So the author can’t furnish his strong statement about the Americanization of Berlin’s policy on the care of the homeless with evidence.

This is a shame because some of his findings are of great interest. Out of his interviews with 28 homeless people he developed different life-course types. The characteristics of the homeless represented in groups concerning personal vulnerabilities, human capital, social capital and pathways into homelessness seem to be quite different (Table 2.1). His conclusion is that this could (or should) affect the acting of the welfare system and its stakeholders. It would have been interesting to

state more precisely what this means. In contrast his conclusions at the end of the book are a little superficial: Case management, (better) communication, and (better) coordination is what he recommends. He states “outsiders’ to the system, including long-term unemployed and homeless people, have difficulties breaking into labour and housing markets, especially during profound economic restructuring periods” (p. 138). Given that von Mahs didn’t interview homeless people in Berlin “during [a] profound economic restructuring period” as mentioned above, it is regrettable that the author does not involve current discourses like that about “Housing First” models in his conclusions. In his book, von Mahs creates a Berlin that never existed in the described form (poor conditions of the nineties mixed with the neoliberal reforms from the nineties until today). This undermines his very interesting and comprehensive empirical study.

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Filipa Lourenço Menezes (2012)

Percursos Sem-Abrigo. Histórias das ruas de Paris, Lisboa e Londres.

Lisboa: Editora Mundos Sociais, pp.200, €9.00.

Percursos Sem-Abrigo. Histórias das ruas de Paris, Lisboa e Londres (Homelessness Trajectories. Stories from the Streets of Paris, Lisbon and London) is one of the very few books ever published in Portugal on homelessness. The book, which is based on a PhD thesis completed in 2009, provides cross-national comparative (FR, PT, UK) research on homelessness, taking the concept of risk as a fundamental analytical string. The empirical research is based on semi-structured interviews conducted in Paris, Lisbon and London in 2005 and 2006. This book is an important contribution to the existing evidence on homelessness in Portugal, not only because of the paucity of research in this domain, but also because of the approach undertaken by the author. To-date, most studies in Portugal have adopted a descriptive focus on the analysis of homelessness situations and trajectories.

In *Percursos Sem-Abrigo. Histórias das ruas de Paris, Lisboa e Londres*, the author develops a cross-national comparative analysis of the trajectories of homeless people, of the perceptions and discourses of different social actors, social workers and homeless people, and of intervention practices identified in the three cities. This cross-national comparative analysis is conducted through a “conceptual lens”, that of risk. This approach enables the author to go beyond the usual descriptive approach towards homelessness and to explicitly identify the interactions between different causal factors. By exploring homelessness trajectories and perceptions through this conceptual lens, the author discusses the how poverty and inequality, exclusion from the housing market, low levels of social protection, unemployment and precarious labour markets, among others, shape the trajectories of the homeless people interviewed and on the expected, and actual, outcomes of intervention strategies adopted in the different cities.

The book is structured around six main chapters. The first chapter is centred on the theoretical discussion of the concept of risk as a cultural and social construct and how it may usefully apply to the analysis of homelessness situations and trajectories. The “Risk of Homelessness” chapter addresses the complexities of defining homelessness, both at a national and at a European level, and the consequences

of adopting different types of definition for building up diverse understandings of homelessness. One of the missing aspects in this initial discussion is the lack of reference to ETHOS, European Typology on Homelessness and Housing Exclusion, – when discussing European approaches to defining homelessness. Curiously enough, some of the arguments developed in this chapter are directly linked to some of the challenges that the adoption of ETHOS has raised in recent years, namely the possibility to contribute to a more comprehensive awareness of homelessness and housing exclusion situations, and to unveil some hidden forms of homelessness referred to by the author. Another missing element one can identify in this chapter is the lack of accuracy regarding the author's reporting on existing national definitions of homelessness. In fact, there seems to have been no update on this regard between the original PhD thesis on which the book draws and the 2012 publication. This particularly applies to Portugal, where an official definition of homelessness was adopted by the first National Strategy on Homelessness (ENIPSA) in 2009. This first chapter also addresses the challenges arising from the so-called risk dynamics within modernity without ignoring other “less modern” risk dynamics that contribute to our understanding of the structural dimensions of homelessness in Western societies. Finally, the author argues that the widening of social uncertainty and the different ways of “managing risks” in our society may impact on the way social behaviours are labelled and addressed, particularly among the most vulnerable populations. The role of social policies, and particularly of different forms of social support which address the homeless population, is discussed in the final part of this section.

Chapter two focuses on the trajectories of 54 homeless people (47 men and seven women), who were interviewed in the three cities, and who were either sleeping rough or using night shelters. One of the limitations of the approach undertaken is the lack of information regarding the criteria for the selection of the interviewees. The author explores their “journeys” through homelessness, identifying different, but inter-related, factors that shaped their experiences. Based on the views of the homeless people themselves, the author highlights the importance of these men and women's encounters with structural forces such as the housing market, the labour market, poverty and its intergenerational effects, and access to education and training. The role and the functioning of existing social supports are given a special emphasis in one of the sections of this chapter. One of the interesting outcomes of the analysis of these individual pathways is the structuring of systematic interconnections between homelessness trajectories and different types of “capitals” (e.g. health capital, social capital, educational and professional capital). In one table the author shows how different homelessness trajectories impact on

these different “capitals”, identifying the societal and or institutional resources and obstacles individuals face along their homelessness trajectories and which either reinforce or weaken their “capitals”.

However, the housing dimension is only barely addressed by this approach, yet lack of access to housing has been identified as one of the main obstacles within the social support continuum. Moreover, this chapter would have been improved if the author had framed her analysis of the interactions between homelessness trajectories and the conception and operation of the existing social supports within the discussion around models of support, and in particular housing-led versus stair case approaches, on which extensive literature is available. The major components of such a discussion are in fact implicitly addressed by her description of the services provided and by the analysis of the obstacles encountered by homeless people in their trajectories into, through, and out of homelessness.

The focus of chapter three is the perceptions of workers in the homelessness sector regarding homelessness situations and the operation of social support services in the three cities. The interviews were conducted in different services: Public sector services; NGOs; and other private not-for-profit social providers. The author explores the conceptual issues around homelessness in the three cities, which reflect existing national approaches, as well as the difficulties identified in the measurement of homelessness in the respective cities. As regards this approach it would have been particularly useful to have the author’s reflection on the consequences of the persistence, at least in some countries, of a narrow definition of homelessness (e.g. the roofless), both in the development of research in this field, but also in the way policies are being designed and support services developed and implemented. Overall, this chapter provides an interesting comparative overview of service providers’ perceptions of the social support provided in the three cities, but would have benefited from a more critical approach by the author. In contrast to the previous chapters, the author does not provide an interpretation of the discourses by applying the “conceptual lens” of risk and risk dynamics. In this chapter the author opted for a more a-critical exploration of the empirical material, providing a more descriptive overview of the workers’ discourses, which, in many cases, ends up reproducing existing stereotypes on homelessness and on homeless people.

Chapter four focuses on the perceptions of the homeless people themselves and the author explicitly assumes that this comparative overview has been developed through “a predominantly descriptive register.” Accommodation trajectories and strategies are a dominant feature of this chapter. In spite of the intentionally descriptive approach taken, the voices of the homeless people interviewed helpfully illustrate the impact of temporary accommodation “solutions” in the lives of homeless

people. The author provides a lively description of homeless people's diverse daily routines and survival strategies, of their social networks, and of their needs and assessment of the support received. In contrast to the descriptive approach adopted throughout most of this chapter, the author ends the chapter with a short but interesting section where she integrates the dominant perceptions identified in the three cities within a theoretical discussion regarding some of the structural components and trends that shape the lives of homeless people in both their more objective and more subjective dimensions.

Chapter five engages in an intersectional analysis of both levels of discourses, the homeless people's and the workers', identifying relevant perceptions of risks of homelessness with regard to social control practices and social intervention strategies developed in the three cities. The analysis of the "risk dialogues between workers and homeless people" highlight local practices and local circumstances, which shape different punitive responses to homelessness in Lisbon, London, and Paris, within national legal and policy frameworks. The persistence of contradictory discourses among social support stakeholders is the subject of another section within this chapter. The author argues that in the three cities access to social support is still permeated by concepts of the deserving and undeserving poor. These concepts are linked to different risk perceptions of the homeless population: That of deviant individuals (who need to be controlled); and that of victims (who deserve support). These perceptions have direct consequences on the relationships between providers and clients, and on the intervention logics that shape social support practices across the three different contexts. Several perceptions are shared among workers and homeless people, namely the ones related to the constraints felt in the provision of social support (e.g. access to social housing, prevalence of emergency responses and lack of prevention approaches, inadequacy of existing infrastructures). The author argues that although the concept of risk is present in the social support practices implemented, it is mainly used for the identification of causes of homelessness, for identifying the profiles of the homeless individuals, and for prioritizing groups of users in a context of scarce resources. The concept of risk is hardly ever used as a tool for developing prevention strategies and for intervening in the early stages of homelessness trajectories.

The final chapter addresses "*Risk dynamics in modernity and homelessness*". In this concluding chapter, the author summarises the main outcomes of the empirical research and interprets them within the theoretical framework developed in the initial chapters of the book. The author then revisits the complex interactions between different levels of factors that purport to explain homeless trajectories: Structural, relationship, and personal factors. She discusses the association between risk dynamics, composition of homelessness, inequality levels, social policies, and the underlying social and cultural beliefs. The main findings stress the

existence of relevant impacts on the conceptualisation of preventive, social control, monitoring, and social reinsertion measures. The author argues that these impacts are originated by divergences identified in the different utilisations of the concept of risk in the three cities under analysis. However, “in spite of historical, cultural and political diversity it was possible to identify that the conceptual divergences found among the three contexts, including the design of social support measures, end up by converging in field practices” (p. 170).

Percursos Sem-Abrigo. Histórias das ruas de Paris, Lisboa e Londres provides a relevant contribution for the development of research in Portugal and a useful comparative overview of homelessness trajectories, perceptions, and intervention practices in three European cities.

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Josef Hegedus, Martin Lux and Nora Teller (Eds.) (2013)

Social Housing in Transition Countries.

London: Routledge, pp.342, £80.00.

The changes to political and governance structures which swept across Eastern Europe from the late 1980s onwards left in their wake a range of societal challenges which garnered far less attention from commentators and observers than was warranted. Core issues relating to employment, social welfare, poverty and social deprivation and health seem to have been marginalised on the basis that all remnants of the ancient regime had to be flushed out as a new market model was ushered in on the assumption that this was by definition a superior model of economic and social organisation.

Needless to say the evidence has been stacking up over the past two decades that the “magic of the market” has proven to be decidedly uneven in its effects and new problems and social inequalities of a socio-economic nature have emerged which have replaced those rooted in party affiliation and privilege which characterised the previously centralised system of production and consumption. Key social indicators around mortality rates, population health, risk of poverty, and unemployment show how the promised benefits of economic liberalisation have been at best unevenly distributed and at worst captured by elite groups who were well positioned to capitalise on the privatisation policies and stripping of state assets in such sectors as energy, natural resources and telecommunications.

One sector which has been subject to profound changes has been the housing systems of the transition societies. Of all areas of social provision it might have been expected that the basic human need of adequate shelter would have been prioritised in the transition to the market society. However, across most transition societies the desire of governments to develop market economies meant the re-introduction of the concept of private property which effectively set public housing up as fair game for exploitation under the new conditions. Privatisation was often pursued in its most simplistic and crudest form by simply giving dwellings away to sitting tenants. There was little by way of exploring alternatives which might have buffered the fabric of public housing from the most deleterious effects of privatisa-

tion, through for example, stock transfers to not for profit entities such as housing associations and co-operatives, or through disposal of units at market cost to tenants. While there have been some variations on this trend as might be expected, these don't represent structural exceptions, and over time local policy differentiations have been largely eliminated to the degree that the concept of public housing in transition societies has all but disappeared.

A clear outcome of this has been deepening inequality. While some strata were "more equal" than others under state socialism prior to the transition, they were also the ones most positioned to capitalise on the changes and become both richer and more privileged post transition. For instance in Serbia, Russia and Poland households who by virtue of their pre transition "*nomenklatura*" status, became even more privileged post transition when their status could be consolidated through property acquisition.

This book is an attempt to draw together the disparate strands and experiences of how housing systems have fared since the collapse of state socialist regimes of varying complexions and their replacement by market based arrangements. The book is divided into four parts. The first sets the analytical context and provides the tools by which to understand what has been happening. It identifies the similarity of the broad structural changes which have occurred but also points out that the policy responses in different countries were shaped by factors such as the structure of the political system, the role of the state in the economy, and the structure of the financial sector. Part two highlights a range of critical issues which the transition processes have revealed including privatisation and restitution, finance, rents regulation, housing management and social exclusion. The third part presents a series of country case studies detailing the housing experiences in twelve transition societies, and finally part four offers an extended reflection on the challenges facing social housing in post socialist societies. Each of the sections are appealing to the reader in their own right and combined offer insights at different levels: – conceptual; thematic; policy; and empirical. This reviewer found part four to be a particularly interesting approach to concluding the discussion. In a single extended chapter the authors construct a commentary on where public housing has come from and where it is going and in doing so critically appraise the consequences, which have been mostly negative, for concepts such as equity, redistribution, and sustainability. Their use of subheadings to weave the narrative is particularly useful.

Kristina E. Gibson (2011)

Street Kids – Homeless Youth, Outreach and the Policing of New York’s Streets.

New York: New York University Press, pp.247, \$24.00

For those interested in youth homelessness either from the perspective of research or practice *Street Kids*, a new book by urban geographer Kristina Gibbs, is a welcome addition to the literature. In this book Gibbs presents a detailed ethnographic description and analysis of the lives of young people who are homeless in New York City. She also explores features of the response to youth homelessness, including an in depth focus on street outreach as a practice, and conversely, on the policing of youth homelessness as a revanchist practice

One of the strengths of this book is Gibbs’ effort to historically ground her ethnography and analysis. Discussions of homelessness – the conditions that give rise to it and the response – are often ahistorical, or engage in an analysis that frames the problem in terms of contemporary or recent historical trends. Gibbs reminds us that while neoliberalism, for instance, may shape particular features of homelessness and our response to the problem – the use of policing for instance – it must also be understood that there are deeper historical roots that contribute to how we frame the problem, and most notably, how it is experienced by the young people she has engaged and worked with.

Her analysis of youth homelessness and its relation to ‘the streets’ is thoughtful and engaging. As with many contemporary urban geographers, Gibbs is concerned with the space of the streets, and in this case how young people both construct a sense of self while homeless, but also how those spaces are also constructed and governed externally, and how these forces are continually enacted upon young people who are engaged in street life either because they are absolutely homeless (of the streets), or are housed, but participate in street youth culture (on the streets). She also suggests that street youth are “sandwiched between two powerful social ideologies – the Street (a subjective place laden with concepts of democracy, civil society, danger, romance, chaos and social order) and Youth (a subjective position encompassing social understandings of innocence, development, freedom, competencies, potential, hope and fear)” (p.26). This is crucially important, and a key reminder to those involved in

research, practice or policy that our understanding of, and responses to youth homelessness, must necessarily and always be cognizant of how social frames regarding youth (adolescence and young adulthood), and in the context of homelessness produce unique experiences for young people, and therefore require different solutions. Too often our response to youth homelessness takes the adult system (emergency shelters, day programs, soup kitchens, outreach), and creates “adult homelessness light”; a watered down, age specific version of essentially the same services and approaches, perhaps with an added dose of concern about young people’s penchant for delinquency, moodiness and irrationality.

In thinking about these social frames, Gibbs offers an interesting and thoughtful historical account of youth homelessness in the US. Here she bridges some of the research on the invention of adolescence (ground well covered by researchers such as Nancy Lesko), with a historical account of youth homelessness. The three eras she offers as key to framing paradigms – 1) Immigrant Youth and the Child Saver’s movement, 2) Youth Development, Delinquency and Subcultures, and 3) Street Kids and Youth Geographies, provide a colourful and nuanced account of how cultural norms and trends, research findings and social work practice have evolved steadily from the early days of concern about working class “street Arabs” to the present. This history is interesting, and is also an important reminder that as paradigms, these social frames do not simply go away, or be replaced by the next one, but in many ways are sustained and incorporated in present day thinking and practices. The whole historical discussion provides an important touchstone for understanding what we (and others) do regarding youth homelessness and street culture, and how history frames how we think about such young people and the spaces that we occupy.

While situating youth homelessness within an analysis of geographies of exclusion is an important contribution of this book, it is the ethnographic description and analysis of street outreach as a philosophy and practice that is the core of this work. It is significant, for in spite of the widespread use of street outreach as a way of engaging homeless persons who are not connected to agencies or services, it is an activity that has drawn very little attention from researchers over the years. As with her discussion of youth homelessness, Gibbs provides a thoughtful historical analysis of street outreach, and the social and cultural frames and practices that underlie this work. She seeks to make sense of how neoliberal shifts underlie the ‘outsourcing’ of this important work largely to charitable (and religious) service providers, and the implications this has on the practice. Lack of funding, the heavy use of volunteers, inadequate training, and challenging working conditions mean that workforce retention is problematic, which undermines the knowledge-base that supports effective street outreach practice.

She also explores the actual practice of street outreach in a very nuanced way. That Gibbs herself participated in street outreach for several years strengthens her perspective, and makes her participant-observation ethnographic account that much richer. As a Geographer, she is aware of the spatial dimension to this work, and how the work of outreach staff is both a response to the social production of the 'streets' not only by street youth, the police, but also by outreach workers as well. Her description of doing street outreach, augmented by quotes by colleagues, provides a rich and nuanced description of the work. Much time is spent exploring this practice, and beyond mere description; this allows for a more careful explanation of her analysis of the work.

The theoretical framing of all of this is important, although sometimes there is a sense that this aspect should be more focused. While relevant theoretical perspectives drawn from urban geography are presented, other theoretical perspectives (and theorists) are brought to bear with much less success. Foucault is mentioned briefly, as are another theorists, in ways that may demonstrate the breadth of reading that went in to this work, but do not move the discussion forward in a strong way. Likewise, the discussion of Judith Butler does not necessarily add to the analysis of outreach as performance, and represents a missed opportunity, for an analysis of the gendered nature of the streets, and the very important question of how homeless youth 'perform' their gender(s) is not adequately explored.

The final key theme of this book is to explore the policing of youth homelessness, and its impact on the young people involved, and how the streets as a 'space' are constituted. There is a growing body of work on the criminalization of homelessness, and Gibbs makes an important contribution to this literature. She takes the reader through the impact of Wilson and Kelling's "Broken Windows" philosophy of policing and on what happened in the transformation of New York (Manhattan). This philosophy was adopted and implemented in a most robust – and one could argue, uncritical – way in New York, with full support of the Mayor and Chief of Police William Bratton, to rid the streets of crime and 'disorderly' people, including the homeless. Lest we think that Broken Windows policing is merely a manifestation of neoliberalism, Gibbs reminds us once again of the historical roots of current punitive practices to address poverty and homelessness. The streets have always been contested as 'public spaces', and social norm theory has long had an influence on how we govern such spaces in light of perceived threats by marginalized populations seen to be delinquent or operating in ways counter to 'dominant' social norms.

A key point of all this is that the heavy handed criminalization of homelessness through new laws, through existing practices (arrests for minor offences), and through regular harassment and "stop and search's" – practices for which there is no official record – have had a huge impact on the lives of homeless youth. First,

the efforts to eradicate money making practices such as panhandling (begging) and soliciting funds from transit users, as well as curtailing the use of spaces such as parks, streets and public transit, has had the effect of pushing homeless youth into other activities to earn money, and also displacing them from many key areas of Manhattan. The second major impact has been a shift in the culture of youth homelessness. It can be argued that if it is the persistent visibility of homelessness that produces a law enforcement response, it is the persistent policing of people who are homeless that renders them invisible. Gibbs explores how street youth now very proactively dress and behave in ways that do not identify themselves as homeless. She also relates how the need to be less visible also creates challenges for street outreach, in that it becomes harder and harder to identify homeless youth, and at the same time, many youth in these circumstances may seek to avoid outreach workers altogether, in order to avoid having such an interaction contribute to a very public identification of their homelessness.

All of this leads to some major questions, which Gibbs begins to explore. In light of the impact of revanchist policing on street youth, what does this really mean for street outreach in the future? She has some thoughts on this, but perhaps because of her closeness to the field, she avoids addressing some of the really big questions. For instance, as youth homelessness becomes less visible, what new tactics and strategies are needed? In many cities, including New York, young people who are homeless are being pushed more and more to marginal and distant areas, and those that remain in gentrifying downtown cores are more difficult to identify. How can street outreach, as a practice, adapt? A second consideration is to address the challenges and opportunities that technology has and will have on outreach? She remarks that web-based technology has completely transformed the sex trade and drug dealing, for instance, bringing these activities indoors and underground, out of the view of the police, the public, and most certainly street outreach workers. This presents real challenges for those wishing to make connections with young people and to help reduce their exploitation. If technology has become part of the problem in this case, does it also offer any solutions? Where do we go from here? All of this suggests a need to reconsider the role of street outreach. Is the process of street outreach a means to an end, or an end in itself? While she does explore various points of view as to why we should support street outreach in the end one is not left with a solid justification for the practice. Helping young people make connections with adults is important on one level, but to what end, especially if those adults are poorly trained, and may carry with them their own ideological baggage? How does street outreach contribute to moving young people forward in their lives? More discussion would be helpful here.

Overall, taken as a whole, this is an excellent book that makes an important contribution to the literatures on youth homelessness, urban geography, street outreach and the criminalization of homelessness. Gibbs is a very strong writer who is able to use her narrative skills to bring the content alive, so that we can understand the experience of youth homelessness and street outreach in a very visceral way. Though at times the content is a bit repetitive and in need of editing (for instance, a story about approaching a sleeping girl appears twice), the book is engaging and easy to read. The book is very informative and should be of interest not only to students and researchers, but also to policy makers and those who work with homeless youth. Though the focus is on New York City, its applicability is broad, and could inform thinking in a number of national and local contexts. We need more books on homelessness such as this.

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Ella Howard (2013)

Homeless: Poverty and Place in Urban America.

Philadelphia: University of Pennsylvania Press, pp.288, \$45

I came of age in suburban New York in the early 1980s, and trips to the city during this time provided my first encounters with homelessness and the Bowery. Here was a stretch of Manhattan marked by haggard old men, seedy surroundings, and empty bottles of Night Train Express wine were littered everywhere. By then the Bowery, one of the best-known examples of the “skid row” homeless districts that marked all large US cities, had almost passed from the urban landscape. With this passing came a transformation of homelessness into its contemporary incarnation and the ascent of this issue to the social problem most emblematic of the post-industrial city. Ella Howard, in her book *Homeless: Poverty and Place in Urban America*, looks to the Bowery as a link between homelessness past and present, and more broadly, as a window to understanding “the complex relationship between poverty and place in nearly a century of the modern city” (p.5).

Conventional accounts of skid row districts such as New York’s Bowery emphasize their unique place in the urban landscape. Skid row was seen as a distinct ecological niche, akin to a reservation for the homeless that defined US homelessness during the post-World War II era. Central to this ecology was a continuum of housing that ranged from low-cost residential hotels, to cheap “flophouses”, to municipal shelters, and Christian rescue missions for the truly down and out. Bars, cheap eats and soup kitchens, pawnshops and used clothing stores, and other institutions catering to the homeless man (skid row was predominantly, though not exclusively, male in demographics and in orientation), were set amidst dreary commercial areas. Welfare bureaus and charity organizations would steer those in need of relief to skid row, and police would see to it that skid row residents, once settled, would know their place. Here place became an extension of the man; spatial and personal dimensions of failure that represented a cautionary tale to a society in the midst of prolonged prosperity.

In contrast, Howard’s approach to the Bowery is an indirect one, viewing the Bowery through the actions of emissaries from the mainstream—chiefly policy-makers, charities, urban planners, and researchers. She picks up her narrative in the 1930s, when the Great Depression exiled tens of thousands of newly displaced

economic refugees to the Bowery and overwhelmed its ecology. The first two chapters provide a thorough and in depth chronicle of local and federal efforts to address this poverty, which was of an unprecedented scale and urgency. She shows how the demands of this widespread destitution trumped the traditional reservations of charity, and transformed welfare policy, albeit reluctantly. Chapter 3 extends this narrative into the post-World War II era. Here Howard continues to follow the municipal response to poverty and homelessness, and expands this view to include the developing field of alcohol rehabilitation as the state of the art approach to responding to the homeless man. Chapter 4 has skid row on the skids, with grassroots interests battling City Hall to determine the nature of the Bowery's demise, and Chapter 5 scrutinizes the expansive research done on the Bowery by social scientists at Columbia University's School for Applied Social Science Research. The final two chapters examine the resurgence of homelessness in the 1980s, this time bereft of its geographic moorings, and link this resurgence to a Bowery that no longer exists.

Contrary to what is promised in the introduction, it is unclear how this monograph lays out any systematic intersection of poverty and place. The first two chapters, while offering compelling narratives in and of themselves, are more general narratives about addressing Depression-era poverty and homelessness and are largely devoid of specific references to the Bowery. But homelessness in New York City was never interchangeable with homelessness on the Bowery. During the Great Depression, hordes of newly unemployed partook of the Bowery's endemic poverty but not of its subculture, and Howard leaves this juxtaposition unexplored. By the third chapter we are in the 1950s, and the wave of newly homeless that commanded public attention in the Great Depression had receded to again leave the Bowery to a reduced number of more stereotypical homeless denizens. But by here it is clear that Howard has abandoned pretences of clarifying any intersection of place and poverty. Instead, she laments about how policy was dominated by a persistent and pervasive viewing of homelessness as "a group of sick individuals" at the expense of veering away "from serious structural analysis of poverty" (p.114).

Such a bait and switch to the tired trope of individual versus structural causes of homelessness gives this book a thematic drift just as it comes to its two strongest chapters. In chapter 4, Howard finally sets her sights directly on the Bowery, as the battleground of a larger conflict between community interests and New York's planners. True to Theodore Caplow's description of the skid row as "a social system [that] adapts to the external environment by not reacting to it" (1970, p.6), Bowery interests themselves were secondary to the outside interests who were the primary players in this struggle for how the area should be redesigned. Ultimately, this battle royal was fought to a stalemate and granted the Bowery a stay from the wrecking ball whose shadow now casts a pall over the district. Here Howard shows how the

Bowery's inconspicuousness, once its key survival weapon, became a liability as different interests had different designs on this district, and questions of what to do with the dwindling number of aging Bowery habitués were secondary to competing visions of what to do with the Bowery real estate.

To answer questions on how to best clear the bums off the reservation, policy-makers turned to social science. Skid row has always been the object of disproportionate fascination among social scientists, a place where, again according to Caplow "for the price of a subway ride, [the sociologist] can enter a country where the accepted principles of social interaction do not seem to apply" (1970, p.6). Led by Caplow and Howard Bahr, the Bowery became the focus of extensive research in a partnership between New York City and Columbia University's Bureau of Applied Social Research. In chapter 5 Howard turns the tables on the researchers with an in-depth view into the processes and findings of this Bowery project. What results is an even-handed assessment of this largely forgotten body of research, done with the benefit of almost fifty years of hindsight. This leads to new insights on this research for those familiar with this literature and an accessible entrée for those who are not. Particularly impressive is how Howard fits this research in with both the social theories and policy priorities of the time, while pointing out the blinders that ultimately limited this research.

And then, with the onset of chapter 6, the Bowery was gone. It is only after Howard spends most of the chapter delving into the crises and politics of the resurgence of homelessness in the 1980s that she returns to the Bowery to examine its demise. Her explanation is basically twofold. First, she argues that by the 1980s the Bowery was lost to the forces of gentrification and, second, that shifting demographics led to a situation where, as the traditional older white male Bowery population declined, a younger, darker skinned, population of both genders, and often with family in tow, emerged to present a much different homeless population. Neither explanation is particularly satisfying. The Bowery was one of the last in a succession of disappearing skid rows across US cities. As Howard shows, predictions of the Bowery's demise anticipated its demise by several decades, and the more interesting question is how skid row was able to hang on as long as it did. The answer to this lies in the political economy on the Bowery, something that is largely missing in this book. Attention to this would paint a different relationship between poverty and place, one where poverty was lucrative enough for Bowery-based commercial ventures to stave off a succession of attempts to clean up the area. Ultimately, this got more difficult with the declining numbers of homeless (of the old, white male variety).

Viewed in this light, there would not appear to be much continuity between the homelessness on the Bowery and the homelessness that has confounded every New York mayor since Ed Koch. The Bowery, both in place and in person, was a

remnant of Depression-era homelessness that passed away. This contrasts with “new” homelessness that came of age in the “double-dip” recession of the early 1980s. Along with their differing demographics, their geography is different as well. Theirs is a post-industrial geography, not rooted in the social disaffiliation of Caplow and Bahr’s Bowery, but rather in the concentrated poverty and hyper segregation of such New York City neighbourhoods as Harlem and East New York.

Given this, what is the legacy that the Bowery, and homelessness past, leaves to homelessness in a more contemporary era? Howard’s response is to give a whirlwind tour of homelessness in New York City through over two decades and three mayoral administrations before asserting that New York’s skid row policies showed “moderate effectiveness” and “public-private partnerships at work” (p.220). At that point such an assertion seems more like nostalgia than argument, as support in the book for such a position is hard to come by. A closer look at the current state of homelessness would also reveal more specific continuities with the past. For example, in the wake of the evisceration of the single room occupancy (SRO) hotel, a Bowery mainstay that kept many skid row residents from literal homelessness, have come new models of housing in which non-profit organizations are essentially rebuilding this SRO stock. Additionally, just as homeless people on the Bowery aged and gave way to a “new” homelessness, there is now evidence that this more recent generation is now aging and declining. In the wake of this decline, another generation of homelessness appears to be massing, rooted in such dynamics as the Great Recession, the Iraq and Afghanistan wars, and mass incarceration policies (Culhane *et al*, 2013).

In summary, this book casts some welcome attention on the Bowery, an area that has historically sought to be left alone. At its best, Howard introduces the Bowery as a setting for the efforts of public agencies, private interests and researchers to address homelessness. For these efforts, the book is well worth the read. Howard also attempts to frame these elements in narrative which, instead of providing a grander overview of homelessness, conflates homelessness on the Bowery with the more general poverty of past eras and creates tenuous continuities between skid row homelessness and the more contemporary homelessness that succeeded it. This leaves the reader poring over some good history while searching for a promised intersection that never really occurs.

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Vanessa Oliver (2013)

Healing Home: Health and Homelessness in the Life Stories of Young Women.

Toronto: University of Toronto Press, pp.281, \$29.95.

Vanessa Oliver's *Healing Home* is an in-depth, qualitative exploration into the health of young women experiencing homelessness in the Toronto area. This book aims to explore issues related to the health of the young women, specifically their health status, their own interpretations of their health needs, and importantly, their interactions with healthcare service providers. Employing a narratological or 'storytelling' approach in presenting the women's lives, Oliver integrates the narrative analysis of the young women with wider literature on homelessness, sociological insights, and social policy. The primary dataset of the study is drawn from eight in-depth, life history interviews with young women between 15 and 21 years of age – all of whom were residing in, or in contact with, a Toronto shelter for young women. While existing research on homelessness and health have been inclined to emerge from the biomedical and psychology disciplines (which tend to favour quantitative measurements), Oliver's innovative blend of narrative and sociological exploration provides a compelling insight into homeless women's own interpretations of their situation. This book is a particularly important contribution to knowledge given that the needs of homeless women, and in particular young women, are considered by many researchers to be largely overlooked in research and policy planning (Edgar and Doherty, 2001; Baptista, 2010).

The study is guided by a number of different perspectives and approaches. Feminist theory and feminist political economy, narrative theory, insights related to subjective encounters with social structures, and considerations of neoliberalism and the social welfare state are incorporated in Oliver's analysis. The combined theoretical approaches attempt to expose the multitude of social, cultural and economic constraints (some of which are competing or contradictory), whilst also revealing how women continually shape their own lives as distinct individuals. Oliver continually challenges wider discourses of pathologising poverty and homelessness, and seeks to contextualise the women's narratives in a particular time (age, life course stage, or social and historical context), and in a particular space (socioeconomic contexts, differentiated access to resources, etc.). The prevailing and often

compounding tiers of exclusion such as age, race, class, and sexual orientation that can impact on the women's access to healthcare and housing are also discussed. Further, constructions of gender are explored by drawing upon literature pertaining to gender and homelessness, the 'home' vis-à-vis the role of women, gender performances in the context of street life, and female sexuality. Thus, the reader is offered a multidimensional understanding of "the ways in which relations of gender and power are fundamental to the understanding and practices of health access, health delivery, and health-seeking behaviours of homeless youth" (p.4).

Central to *Healing Home* is the voice of the women themselves. The opening findings chapter offers eight detailed life history narratives of each of the female research participants in which their 'self-stories' are recounted faithfully and sensitively to the reader. Common patterns emerge across the dataset, such as early childhood trauma or abuse, family violence or neglect, enduring poverty, failures in the state care system, mental health problems, self-harm, problematic alcohol or drug use, unstable living situations, or sexual exploitation. Such themes echo much of the existing literature on homeless women (Jones, 1999; Reeve *et al*, 2007; Mayock and Sheridan, 2012). Through these accounts, Oliver provides a textured and multi-layered understanding of the women's lives in which we can begin to grasp their worlds and their needs. It reveals the extent of the deep structural inequalities persisting across the life course, and the way in which the women negotiated and navigated such constraints as they carve out their future. It is through the women's opinions, desires, and ambitions within their narratives that they are, in basic terms, "ordinary young women living under extraordinary circumstances" (p.44). In other words, their homelessness is only one aspect of their unfolding lives and labels such as 'homeless' can eclipse our understanding of their needs.

Following from this, the pertinent health issues for the women interviewed – specifically mental and sexual health issues – are discussed in detail. Depression, anxiety, suicidal ideation, self-harm, Post-Traumatic Stress Disorder (PTSD), histories of violence or abuse, and problematic drug or alcohol problems featured prominently across their narratives. Other issues relating to body image and physical appearance were seen to cause additional stress and anxiety to existing feelings of stigma relating to their homelessness. Analysis of sexual and reproductive health among the women demonstrated how they did not have an appropriate outlet within which they could discuss normal sexual health questions, worries, or curiosities. Their precarious living situation was seen to further exacerbate their health needs and also impeded their ability to seek help. In situations where women did pursue help for their health issues, many reported negative encounters or experiences. The author concludes that there needs to be "a shift away from traditional models of service delivery and towards creative thinking

that takes health care out of clinical spaces and into streets and shelters” (p.200). The young women need to be afforded greater influence on the design and delivery of health services, Oliver argues, not only as a way of providing more appropriate and sensitive service provision, but crucially, to foster a sense of belonging, of importance, and of empowerment among this marginalised group.

There were some methodological limitations in relation to the research design and recruitment of participants. Notwithstanding the merits of in-depth qualitative research with small research samples, the author’s continuous references to the same eight women as a way of illustrating the arguments throughout the discussion chapters felt limited at times. As such, a larger sample size, longitudinal follow-up interviews, or perhaps triangulation of the existing data with systematic ethnographic observation, for example, would have enriched the discussion even further. It would have been particularly valuable to recruit more than just one migrant woman (i.e. a woman born outside Canada), as it would have expanded our knowledge of the health and housing needs of migrant women in an economically developed nation-state; an area of enquiry which is lacking (Mayock *et al*, 2012). Furthermore, given that the study’s sample was recruited through one single service in Toronto, the research would also have benefited by diversifying the sites of recruitment to capture a broader range of service experiences.

Overall, however, the strengths of Vanessa Oliver’s book are substantial. It succeeds in capturing the women’s heterogeneity, resilience, agency and even their personalities, whilst, at the same time, always remaining rooted in the wider social, economic and cultural landscape. To achieve this – as any researcher in the field of homelessness research is aware – is no easy feat due to the profound complexities inherent within this area of enquiry. The result is a well-developed, theoretically-robust set of arguments, which, through its story-telling style of presentation, makes it captivating and highly readable for both the academic and non-academic reader.

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Ray Forrest and Ngai-Ming Yip (Eds.)(2013)

Young People and Housing: Transitions, Trajectories and Generational Fractures.

London: Routledge, pp.243, £34.99.

This book was published as part of a 'housing and society' series, edited by Ray Forrest, for Routledge. Its focus on young people and housing derived directly from a specially organised seminar held at City University, Hong Kong in 2011 which brought together eleven invited academics working in this area. The background to the seminar was a concern that young people were facing increasing difficulties in accessing appropriate housing across a wide range of societies. The seminar, and book, aimed to explore this assumption, looking at institutional, economic, and cultural factors that may influence this trend. The eleven contributors cover eleven countries, five in Europe (Ireland, Sweden, Greece, Italy and France); four in East Asia (Japan, Taiwan, Hong Kong and China); Russia; and Australia. The rationale for the selection of the countries is not clear and would have benefited from some explanation, although it certainly provides a rich and interesting volume.

The book begins with an introductory chapter by Forrest, 'Making sense of the housing trajectories of young people'. Forrest's essay provides a wide-ranging and insightful review of what is known about housing for young people, providing both a historical and international perspective. He makes the important point that analysts need to be careful about focusing on a contemporary and ethnocentric perspective. The literature covered in this chapter provides a useful basis for understanding the material covered in later chapters.. For example, it considers the degree to which extended transitions and longer periods in the parental home are problematic or not, and the extent to which structure does or does not influence people's early life-courses (in contrast to theories of individualisation that emphasis the role of culture, lifestyles and personal projects). Whilst most of this discussion focuses on the impact of social and economic change on all young people, Forrest does emphasis the likely differences within youth cohorts, noting that 'the apparently independent may be more vulnerable than the dependent' (p.9), and that the ability to survive changing circumstances will be shaped by access to both material and social resources. Although not explicitly addressed in the chapter, all of these factors are key contextual factors to an examination of youth homelessness, and will therefore be of interest to homelessness researchers.

The rest of the book is divided into three parts; the family, demography, and the transition to adulthood (Chapters 2 to 5); housing affordability and youth housing trajectories (Chapters 6 to 8); and economic change and generational fractures (Chapters 9 to 12). These three themes are not immediately obvious and feel as though they have, to some extent, been imposed upon diverse chapters, although as one reads the volume the pattern becomes a little clearer. Within each section, a number of countries are covered, again with no obvious reason for the country groupings. A more detailed introduction to these chapters would have been useful for the reader.

Within the first part of the book, Chapter 2 (Emmanuel) looks at the role of family and increasing levels of co-residence with parents in the Southern European model in Athens. In a fascinating paper, he argues that both the role of 'familism' and the shift in values, norms and lifestyles associated with the Second Demographic Transition have both exerted influence on young people's housing pathways, with increasing proportions of young people remaining in the parental home, and delayed marriage amongst those aged 19-33. Further, this has occurred across social class, with economic hardship and housing deprivation a feature of the outcome for lower income households. Chapter 3 is complementary to Chapter 2, examining the first steps on the housing ladder in Italy and family intergenerational transfers. Poggio argues for the salience of intergenerational transfers and how they may shape inter-cohort inequality, potentially widening existing social inequalities. This chapter also examines the independent housing options for young people showing how young people with no or restricted family support, including migrants, often have to struggle with both insecure and low paid employment and high housing costs. Chapter 4 takes a broader brush and examines the housing transitions of young people in Australia, looking at both changes and continuities in recent years (Beer and Faulkner). Analysis reveals that young Australians (25-34 year olds) are actually entering home ownership at a younger age than previous generations, but that some are also exiting it soon after, highlighting an increasing risk of default on mortgages. Finally, in this section, Chapter 5 focuses on the living arrangements of just-married young adults in Taiwan (Li). It demonstrates that sharing housing with parents is a major living arrangement for young people when they get married, with more young people dependent on their parents than a previous cohort. This reflects cultural norms and also the resources available to young people, with those with higher economic status more likely to live outside the parental home.

Part II of the book deals with housing affordability and begins with a chapter on young people's housing and exclusion in Sweden (Lieberg). This chapter shows that young people are leaving home somewhat later in life than previously (though still much younger than most European countries), and that increased housing costs and changes in the housing market are factors in this, along with prolonged studies. A (too) short section on homelessness reports that young people with experience of homelessness

usually leave home earlier than their peers. In some contrast, Chapter 7 focuses on homeownership in Hong Kong for the post-eighties generation (Yip). Within a context of familism as the cultural norm, again growing proportions of young people are living in the parental home. Prolonged education, falling salaries and a property boom have made it more difficult for young people to enter home ownership, with differentiation among young people increasing and inter-generational transfers becoming increasingly pivotal for young buyers. Chapter 8 examines the significant housing problems faced by young people in Chinese cities (Zhu). Neoliberalized housing development policy in China has led to 'serious housing affordability problems' for young people, including for the young middle class, to the extent that the author warns there could be a major social crisis if these housing problems are not addressed by government.

Part III of the book is concerned with generational fractures and begins with a consideration of this process in Japan (Hirayama). This chapter (9) demonstrates that economic decline and the rise of a neoliberal housing policy have made it increasingly difficult for young people to participate in the established 'home-owner' society. The author argues that Japan's low fertility rate can be partly explained by reduced opportunities for new family housing/ formation, and it is therefore a social sustainability issue as well as a housing policy problem. Two chapters then follow on the European situation, firstly focussing on the French generational gap (Chapter 10; Bugeja-Bloch) and secondly on young people's trajectories since the late 1960s in Ireland (Chapter 11; Norris and Winston). Bugeja-Bloch demonstrates that there are strong inter and intra- generational inequalities in housing. Norris and Winston focus on headship rates (by young people) since the 1960s, showing how they declined in the 1980s following economic recession but recovered in late 1990s/ early 2000s as the labour market context improved. However, young people borrowed much higher amounts than their predecessors and face much higher lifetime debt-servicing costs than previous generations. The final chapter examines the lived experience of housing among young people in Russia (Chapter 12; Zavisca). Drawing on qualitative work, Zavisca graphically depicts the constrained housing opportunities available to young Russians, (who mainly live in home owner properties headed by parents or other relatives), and describes how they experience the post-Soviet housing order as 'arbitrary and unfair.'

The strength of this book is in the rich detail of the chapters, with most chapters confidently examining change over time as well as documenting the contemporary situation of young people's housing. It is striking how economic change over time (both recession as well as economic and social restructuring), has had a major impact on young people's housing chances across such diverse countries. Equally, social and cultural norms have a strong effect on housing preferences and outcomes. The chapters amply demonstrate how 'leaving home' is a long process, rather than a single point in time (Jones, 1995).

The main limitation of the book is that there are no comparative contributions (save, in part, for the short introduction by Forrest). Whilst it is understandable that this is the case, as the work is not underpinned by a major programme of research/workshops¹, it is disappointing for the reader that analysis was not available on the extent to which countries differed, or were similar, in their approaches to housing young people. Failing this, the thematic sections could perhaps have allowed a small number of authors to address a similar set of questions. Forrest concludes that:

‘If there is a general conclusion it is that the interaction between youth and housing has to be understood in its particular cultural and historical context; that apparently similar trends in relation to the transition to adulthood may have different causes and consequences in different cultures; and that what is ‘normal’ in relation to the pattern of departure from the family home varies temporally and culturally’ (p.14).

A more detailed comparative cross-country analysis would have been able to bring out some of these conclusions more sharply.

It is important to point out to the reader that the book does not explicitly address the needs of marginalised young people in the housing market, nor that of homelessness per se (with the exception of the Swedish chapter). This is both a strength and limitation depending on one’s viewpoint. The book makes a good case of identifying young people as a marginalised group as a whole, and does highlight inequalities within young people. Arguably, however, these points would only have been strengthened if there had been an opportunity to examine the situation of marginalised young people more closely. Nonetheless, despite these limitations, the book is a welcome contribution to an important subject area which is likely only to grow in policy importance in the coming years. It will be of interest to both students and academics. It should also be of interest to policy makers who wish to reflect on the impact of housing policies on the position of present and future generations of young people in their societies.

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¹ Although it does inform a Hong Kong research project on ‘Housing the Post-eighties generation’.

Stadt Wien [City of Vienna](Ed.; 2012)

Evaluierung Wiener Wohnungslosenhilfe. Zusammenfassung des Endberichts [Evaluation of the Viennese Homeless Service System: Summary of Final Report].

Vienna: City of Vienna, pp. 112, available online at: <http://www.wien.gv.at/gesundheits/einrichtungen/planung/pdf/evaluierung-wohnungslosenhilfe.pdf>

This is a more than 100 pages “summary” of a 261 pages evaluation report with an appendix of 438 pages with tables covering the Viennese support system for homeless persons. It is in German, but has a (really) short English “Management Summary” of five pages.

When the author of this review read the report he immediately remembered the English saying, “you can’t have your cake and eat it”. In the introduction and the prefaces, the Viennese “step system” which has more than 4 500 places in shelters and transitional accommodation outside the regular housing market is praised for having an internationally acknowledged “excellent reputation” (p. 14), and being an example of European best practice (p. 6). The report shows that the number of places in this “secondary housing market” (Sahlin, 2005) increased between 2005 (when it provided only 2 460 places) and 2011 by more than 80 per cent (see Table 1, p. 18). In January 2011 the Viennese step system had – apart from advice centres and prevention services – 412 places in night shelters, 1 225 places in unspecified transitional accommodation (usually with shared facilities and common rooms), 379 places in transitional accommodation for specific target groups (either targeted on groups defined by gender or age, or on groups with additional support needs because of addiction and/or mental health problems), 279 places in transitional accommodation for families and mothers with children, and 1 089 places in time limited supported housing (where clients have to be more stabilized than in transitional accommodation, but are still seeking to become “housing ready”).

Furthermore, there were 1 076 places in so-called “socially supported housing”, a kind of “safe haven accommodation”, mostly for older homeless people in need of permanent support who can stay there permanently without a tenancy contract. The authors, researchers from an independent research institute, emphasise the “differentiated offer” and show that reaching “housing readiness” by moving “upwards” in

this system is an important requirement for getting access to what is termed in the Austrian discourse, the “final dwelling”; a permanent tenancy in a self contained flat with full tenancy rights. However, they mention as well, that single steps of this staircase system might be skipped and “gliding transfers” might be possible.

The Housing First approach, which has been developed following a critique of the staircase approach and as an alternative to keeping homeless people outside the regular housing market until they are “housing ready”, is presented as a “worthwhile amendment to the intervention options of the Viennese service system for homeless people” (p.104). However, in the same section of the report the discussion about Housing First is introduced as a “radical change of paradigm” and its’ turn away from a treatment first approach is acknowledged as being “a counter-thesis of some elements of the established Viennese step system”. The solution for the authors seem to be some “pilot projects” with the Housing First approach, a peculiar interpretation of the decision of the Viennese City Council that the Housing First approach “should be increasingly realised in future” (SPÖ Wien / Die Grünen Wien, 2010, p.36).

Some readers may ask why this should be done if the Viennese step system works as excellently as it is presented in the report. One reason might be the enormous costs of such a system, but unfortunately the report does not include any more detailed information about the costs of the system (although an annual amount of €43m is mentioned, see p.5) nor on the costs caused by homeless people using non-homelessness services (such as emergency health care and criminal justice services), because they are homeless. Perhaps the money spent in these areas could be spent much more efficiently and the numbers of homeless people could actually be brought down considerably by scaling up the Housing First approach. Other reasons mentioned briefly in the report (p. 84) are some “unnecessary barriers to moving up” in the step system; the problematic aspects of night shelters with long durations of stays, little privacy and the stress of being sent back to the street every day (the number of places in night shelters has more than doubled from 194 in 2005 to 412 in 2011); effects of “shelterisation” in communal temporary accommodation and the question whether skills learned there are of any use for living in a self-contained dwelling after being re-housed. The fact that in the step system, a “successful” stay in supported housing ends with the need to move on to the “final dwelling”, thus disrupting any established contacts with the community in and outside the house, is also mentioned as a critical point. If they ever arrive at this stage homeless people do not only have to move to another place but will as a rule also be left alone without further support in their new and “final” housing situation. Offers for “aftercare” for formerly homeless people in permanent housing are extremely limited in Vienna (p.71).

The evaluation informs us (pp. 66-67) that only slightly more than half of all users of transitional supported housing, and only less than a third of all the 5 188 users of accommodation services for homeless people in Vienna in the years 2009 and 2010, have managed to get a regular tenancy when leaving the service, either in Vienna's large municipal housing stock, or in private rented housing, housing cooperatives, or even owner occupied housing. A particular problem seems to be that old rent arrears in the municipal stock (the City of Vienna is one of the largest landlords in Europe with 220 000 municipal housing units), will lead to complete exclusion from accessing this important source of permanent housing in Vienna (see p.77).

While we know that point in time measures overestimate the duration of homelessness and underestimate the fluctuation in and out of homelessness over a longer period it is nevertheless remarkable that of the 200 homeless people interviewed for the study, 27 per cent had first contacted the service system more than three years ago and a further 40 per cent have been in the system for between one and three years (see Table 93 in the appendix of the study). There are also indications of a considerable proportion of "frequent flyers" moving between different offers without exiting the system.

The study provides a very rich analysis of data, based on 201 interviews with homeless clients, longitudinal data of service use (excluding the night shelters), between 2006 and 2010 for more than 38 000 stays, 31 in-depth interviews with experts, and a short questionnaire filled in by 98 experts employed by service providers. The report describes the system of services for homeless people in Vienna and presents the different services of this system as viewed by the clients; it analyses client profiles and housing/homelessness biographies; the course of utilisation of the service system; the effectiveness of different services; and cutting points with other services for homeless people and other target groups.

There is also a small section on "Housing First – an Alternative to the Viennese Step System?" Obviously the answer to this question by the authors of the evaluation report is "no, or perhaps, but later". Housing First is – for the moment – primarily seen as a small additional part of the menu of options, with pilot projects recommended. However, this author has found a number of good reasons in the report for a "yes", particularly with new evidence that the approach works in European contexts as well as in the US and elsewhere (see Busch-Geertsema, 2013). Given the favourable situation of back-up by the Viennese City Government, and housing options available in the large municipal stock controlled by this Government, scaling up Housing First in Vienna and re-housing homeless people as rapidly as possible into permanent housing with floating support would certainly not lead to replacing all other services for homeless people. But it could help reducing homelessness in Vienna to a considerable extent and diminish

some of the critical aspects of the Viennese step system with its weird conception of “housing readiness” which should no longer be praised as an example of good practice for other European cities.

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Volker Busch-Geertsema and Ekke-Ulf Ruhstrat (2012)

Mobile Mieterhilfe Bielefeld. Ein Modellprojekt zur Aufsuchenden Präventionsarbeit eines freien Trägers in enger Kooperation mit der Wohnungswirtschaft. Evaluation im Auftrag von Bethel.regional in den von Bodelschwingschen Stiftungen Bethel. [Mobile Debt Management in Bielefeld – Pilot Preventative Services with Home Visits to Tenants with Rent Arrears. by a Non-profit Provider in Close Cooperation with Housing Companies]

GISS: Bremen/Bielefeld, Available at: http://www.giss-ev.de/giss-ev/tl_files/giss/upload/PDF/Endbericht_Evaluation_Mobile_Mieterhilfe.pdf

A “mobile” prevention scheme for selected tenants with rent arrears in Bielefeld housed in the largest local housing associations’ dwellings was initiated by a non-profit provider. The scheme ran between August 2009 and July 2012. The evaluation of the scheme was carried out by GISS Bremen in 2011/12. The program intended to complement the mainstream municipal services in Bielefeld for tenants with rent arrears by taking over a number of “clients” and offering them intensive case by case support and individualized visits, and by assisting them to access a range of further supporting services, preferably before they faced their rent contracts being seized because of outstanding rent payments. In this way the scheme cooperated with the local housing company’s administrative services that handled cases that were leading to evictions due to rent arrears – among them the *more difficult* cases for which regular prevention tools seemed to lack efficacy.

The objective of the evaluation itself was to ascertain how the scheme changed the households’ strategies and level of indebtedness; to determine what had led to clients becoming indebted with rents (and other expenses); and what results can be achieved at what price; what makes the scheme work or, on the contrary, what elements of the scheme seem to be problematic. The transferability of the scheme was also explored.

The evaluation was based on the follow-up of the tenants with rent arrears and on field based interviews with the actors involved in the scheme, among them the social workers of the non-profit provider and the social housing provider. Data including data on demographic and social background, financial situation, the amount of rent arrears and other debts were recorded for every individual user of the service. In addition detailed data on all activities undertaken by the service and on the outcomes of these activities was recorded. Clients from a small sample of households who had used the service were individually interviewed about their experiences and impressions after the closure of the scheme. An expert group made up by employees from the housing provider and the mainstream municipal prevention service was included in focus group sessions to apply a so-called 'counter-factual analysis' to assess the potential of the scheme. Thus, a mixture of various evaluation methods was applied. Altogether, over 220 cases (covering 425 persons) were included in debt management activities, and control group data were shared by the municipal prevention service (for 190 cases) for comparison purposes.

The scheme targeted tenants who, in the selected year, could not be reached by the housing provider to settle the outstanding debts. One full time and one part-time professional staff, a volunteer worked on the scheme. The way of working with these households was different from the regular method; the backbone of the pilot activities were home visits and personal contacts with the clients. Not surprisingly, the target group was composed of households with higher risk of poverty: Close to half of them lived with children, the same share was largely dependent on social transfers, and half of them had heads of households over 40. Nearly all tenants had accumulated further debts beyond outstanding rent payments, half of them for the second or further occasion. Over 40 percent of the households were migrants who were facing difficulties both with language and with gathering information about services and transfers in Germany.

According to the non-profit provider's field experience, there were four groups of tenants: (1) tenants who paid their outstanding debts when they saw that the personnel followed up with them and regularly requested to cooperate; (2) migrants and others who were not able to understand the administrative procedures for repayment and requested additional help; (3) tenants with psychological problems and other challenges who had to be visited more often and for whom a step-by-step process was needed to gain their trust; (4) households with very fluctuating incomes, where no income stability could be anticipated. A large majority of the households could be helped at an early stage of the rent arrears (approx. €760 each), allowing for enough time to prevent eviction. Altogether, approximately 90 per cent of the clients got involved in counselling, although for over a third this involvement lasted only for a couple of weeks. One important tool offered by the non-profit provider was assisting households re-plan their financing. It turned out,

however, that close to half of the cases did not need that, a further quarter were not ready to engage with this service; and it was only the remainder that made use of this service. A commonly reported experience of the service provider was that tenants tended to underestimate the seriousness of their problems, and after the crisis had been resolved, tenants carried on the budgeting strategies applied before the intervention. Also, once the crisis had been tackled, tenants tended to stop dealing with the indebtedness issue.

The evaluation points out that there seemed to be various “success” elements of the scheme; these included tailor-made individual services; assertive and repeated contacts and home visits; low levels of bureaucracy; trust based on individualized engagement; and that the staff were generally well-informed about procedures within and beyond debt management. As a result, 90 per cent of all tenants maintained their contracts, over 70 per cent regularly paid their rents, 50 per cent rescheduled their repayment, and over 17 per cent cleared up all outstanding debts. The focus group discussions, which involved the provider and the mainstream debt service’s staff assessing the potential impacts of the scheme, indicated that a quarter of all participating households would have been evicted without the tailor-made mobile service they got. Thus, there were considerable savings made when the investment put into running the program and the costs that would have arisen if the scheme had not run are compared.

To sum up, the scheme contained mainly secondary prevention measures; counteracting evictions as the selected sample of the households was already at imminent risk of homelessness because of rent arrears (Busch-Geertsema and Fitzpatrick, 2008). The mobile service’s strength, as opposed to the mainstream provision, was that it incorporated “tenancy sustainment/floating support (for households with high support needs whose actions, e.g. failure to pay rent or anti-social behaviour, place them at risk of homelessness through eviction)” (Pleace *et al*, 2011, p.49). The evaluation itself tried to apply a robust mixture of methods to uncover the perspectives of a diversity of stakeholders engaged in the process. Thus, the research report can be a useful reading for municipal officials and social housing providers designing debt prevention and management schemes, and follow-up procedures for such services.

Jessie Hohmann (2013)

The Right to Housing - Law, Concepts, Possibilities.

Oxford: Hart, pp.286, £50.00.

The human right to housing represents the law's most direct and overt protection of housing and home. Thus, begins this excellent contemporary examination of housing rights. Jessie Hohmann provides an insightful and sophisticated analysis of the meaning, content, scope and nature of housing rights. She distinguishes between a right to housing (part of the broader human rights common to all), and housing rights (legal rights or entitlements codified into or arising from national domestic law). While rooted in a legal analysis, she draws on a range of disciplines including anthropology, political theory, philosophy, and geography, to create a major contribution to knowledge in this area.

The book is structured in three parts: Firstly, it outlines the right to housing within international and national laws; secondly, it examines the key concepts of housing – space, time and privacy; thirdly, it critically questions the potential of rights to housing to alleviate human misery, marginalization and deprivation. Hohmann questions why, at a time when the right to housing appears in major national and regional human rights covenants, its status as a human right is often greeted with scepticism. Conversely, those who espouse the right to housing appear to be overstating its potential, often failing to recognize its limitations.

Hohmann examines the right to housing as part of the socio-economic rights enshrined within UN instruments. Here, the concepts of security of tenure; availability of services; materials facilities and infrastructure; affordability, accessibility; suitable location; and cultural adequacy are examined. The right to housing within regional human rights instruments, such as the European Social Charter; EU Charter of Fundamental Rights; European Convention on Human Rights; American Convention on Human Rights; and the Arab Charter on Human Rights is carefully explored. Hohmann then examines in detail how the broad right to housing has been interpreted within constitutional law cases in South Africa and India. However, she suggests that in South Africa the transformative aims of the Constitution have

failed to result in actual social change, while in India judicial rhetoric has provided a profound conceptual foundation for the right to housing, but this has proved to be an unstable one to ground a claim for a right to housing.

Hohmann then examines why the right to housing has had such limited impact and remains, on the whole, thin and elusive. She suggests that the problem lies in giving the power to interpret the right to courts. The legal right to housing as interpreted by courts, can, in effect, exclude the suffering of entire groups of people from recognition. She points out that “[A]ny legal interpretation of a human right that fails to adequately embed the right within the social context of real deprivation, marginalization and inadequacy of living conditions that characterize the violation of the right must fall short of the radical and emancipatory potential of human rights” (p.121).

Clearly, the narrow focus of a legal liberal notion of rights conflicts with the broader contextual, political and emancipatory approach. Hohmann argues that courts have failed to properly interpret the right to housing and indeed, other human rights, in three ways. Firstly, there is a failure to properly define the right and the consequent obligations. Secondly, the legal interpretation is overly procedural, so that the substantive element of the right is overlooked. Thirdly, the legal interpretation is inadequately connected to an awareness of the actual social conditions of the violation. Indeed, Hohmann also identifies weaknesses within the UN architecture of rights definition, alongside national constitutional courts and the European Court of Human Rights. However, she points out that bodies like the Council of Europe – European Committee on Social Rights have grasped the contextual nature of housing, and developed much clearer and holistic definitions and benchmarks for rights to housing implementation. This is clearly evident from the decision in *FEANTSA v France* (Case 39/2006, 4 February 2008), where the Committee crafted a definition of the right to housing, set reasonable timeframes for a State to comply, addressed measurable progress indicators, and required evidence of dedication of sufficient State funds.

Hohmann suggests that a lofty principle of dignity, autonomy and equality for all persons through housing does not necessarily translate into an enforceable right (p.126). The tendency for courts to focus on proceduralism, requiring States to “act” rather than deliver is also a major issue. Rights discourses often operate at a high level of abstraction from the conditions of material deprivation. Indeed, Hohmann provides a valuable contextual examination of how the issues of community, privacy, hidden homelessness, identity, and personhood are critical to right to housing interpretations. Similarly, she examines how law manages issues of space, especially in the hidden relationship between the physical contours of living envi-

ronments and the legal rules that structure these spaces. Housing can be a space of social control or a space of social transformation. This contextual examination points to the importance of the right to housing as the base for housing policy.

The final chapter on “possibilities” offers a critical perspective on the right to housing itself. The construction of the right, which emerges from her analysis, is one, which is overly procedural, even programmatic. Coupled with the failure of courts, monitoring bodies and treaty regimes to define the right and give it normative content, “this procedural programmatic bent means that it is difficult to say what the right to housing is” (p. 231). In fact, Hohmann suggests, the legal discussions over the right to housing often appear to proceed blind to the fact that the dispossessed might be those for whom this right was intended. In any case, when the right to housing has been interpreted and applied by courts it has not had a radical effect, and we must ask whether relying on the right to housing to solve problems of homelessness and marginalization is a fruitless exercise.

Hohmann does not reject entirely the legal basis of this right, pointing out that law also plays an important part in the radical potential of human rights through the role it plays in the construction of legal subjectivity. The fundamental principles, which underlie the right to housing, are the most fundamental concerns of human rights. Hohmann contends that despite curial vagueness, overproceduralism and a failure to acknowledge the social context, courts have made determinations on the right to housing without bringing national economies “to their knees.”

Hohmann casts a wider focus to the realization of the right to housing. This draws in questions of the boundaries of the State in relation to rights and regulation. Traditional approaches to autonomy and freedom being achieved in opposition to the State must be reconsidered. The idea that the State creates the conditions where human beings can truly flourish and enjoy freedom and rights must be advanced. The tension between rights reliance and political action is also important. But there is a fear that in developing the ownership of rights by disadvantaged groups they will become bound in to the “tricky art of liberal ideology.” Hohmann concludes this valuable analysis by acknowledging the many varied approaches to rights and critiques of rights. Yet, in reality, she suggests, people do use their human rights to make their own vision of a just and emancipatory world.

One of the key insights of Hohmann is how housing rights must be rooted in the social context of the rights holder and must be geared towards their emancipation and full participation in society. This clearly distinguishes the narrow legalistic and policy approaches. It is different too from the approaches of some housing and homelessness agencies, as a proper understanding of the emancipatory nature of this right would guard against poor social housing and emergency accommodation.



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