The Danish Homelessness Strategy – explaining mixed results

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Structure of presentation

- The Danish homelessness strategy

 - housing provision

 - floating support

 - results

- Development in homelessness in Denmark in the programme period

- Explanations of mixed results

Danish Homelessness Strategy 2009-2013

- Housing First as overall principle
- Test whether Housing First works in a Danish context
- Develop evidence based floating support methods - Assertive Community Treatment, Intensive Case Management, Critical Time Intervention
- Implement a mindshift away from Treatment First to Housing First on policy level, in organisation and daily practice
- 65 mill. € from central government
- 17 municipalitites (out of 98) participated in the 2009-2013 programme
- 24 municipalities in follow-up programme 2014-2016
- Third round 2017 ambition to involve more municipalities

Housing provision for HF programme

Mainly public housing (21 % of housing stock)

Public housing is for everybody regardless of income level – general waiting lists

Municipalities have a right to use one out of four vacancies for social purposes – e.g. for people in acute housing need

The priority access system has been an institutionalised mechanism to allocate housing for the Housing First programmes in municipalities

Challenges:

General supply shortages

Too high rent levels in parts of the public housing stock

Many groups 'compete' for priority access – the homeless, single parents, handicapped, etc.

Sometimes tradition of Housing ready approach in housing allocation

Floating support programme

Assertive Community Treatment (ACT) Multidiciplinary support team – social support workers, nurse, psychiatrist, addiction treatment specialist, social office worker, job office worker

Target group: People with highly complex support needs and great difficulties in using mainstream services, and in need of long-term support

Intensive Case Management (ICM) Case manager – social and practical support and coordination of use of other services. Intensive support

Target group: People with considerable support needs and difficulties in using mainstream services, and in need of long-term support

Critical Time Intervention (CTI) Time-limited case management (9 months) – social and practical support and coordination of use of other services. 3 phases of 3 months

Target group: People with support needs who are partly able to use mainstream services, but who need support for a while in doing so, and who mainly need support in the transition phase from shelter to own housing.

Results from the first programme (2009-2013)

- Housing First works for most homeless people – 9 out of 10 who were housed in the programme maintained their housing (no control groups – no RCT)

- People whom we never thought could have been housed were housed

- We cannot predict in advance who will fail – Housing First should be default

- Better experiences with independent scattered housing than with congregate housing

Challenges

- Scarce supply of affordable housing for allocation – not enough units and too high rent levels in parts of the public housing stock

- Income/welfare benefits are not sufficient to meet the increasing gap to rent levels – especially for young people

- Scaling up is difficult – municipalities are reluctant to finance the intensive floating support services out of their own budgets when central government programme funding runs out

- Challenges of coordination – within municipalities and with local actors – e.g psychiatric services on regional level

- Mainly use of CTI and ICM, a particular challenge to get municipalities to use ACT

Increase in homelessness during strategy period

Homelessness situation	Week 6, 2009	Week 6, 2011	Week 6, 2013	Week 6, 2015
Rough sleepers	506	426	595	609
Emergency night shelter	355	283	349	345
Shelter	1.952	1.874	2.015	2.102
Hotel	88	68	70	113
Familiy and friends	1.086	1.433	1.653	1.876
Short term transitional	164	227	211	178
Release from prison with no housing	86	88	64	90
Release from hospital with no housing	172	173	119	138
Other	589	718	744	687
Total	**4.998**	**5.290**	**5.820**	**6.138**

Large increase in youth homelessness

Age	2009	2011	2013	2015	% 09-15
<18	200	204	144	96	-52
18-24	633	1.002	1.138	1.172	85
25-29	490	596	617	799	63
30-39	1.221	1.155	1.189	1.261	3
40-49	1.357	1.263	1.414	1.423	5
50-59	744	734	833	951	28
60+	235	232	289	301	28

Largest increase in cities

	2009	2011	2013	2015	% 09-15
Copenhagen	1.494	1.507	1.581	1.562	5
Frederiksberg	233	203	178	226	-3
Copenhagen suburbs	701	1.028	1.341	1.364	95
Aarhus	466	588	617	668	43
Odense	208	178	110	173	-17
Aalborg	218	231	259	241	11
Medium sized towns	1.056	1.053	1.198	1.300	23
Rural areas	622	502	536	604	-3
Total	4.998	5.290	5.820	6.138	23

Paradoxical results...

- Can a programme be regarded as succesful when homelessness increases?

- Caution not to confuse results on individual and aggregate level

- Succesful interventions but structural barriers and challenges

- Housing First works but cannot solve the housing affordability crisis or counteract consequences of welfare benefit reforms...

General learnings

- Problem that most homelessness programs/strategies are particularistic – model projects, testing of methods etc.

- Decoupling of the homelessness problem from general housing and welfare problems – housing shortages, benefit levels

- Negative/unintended consequences of general welfare reforms are not sufficiently taken into account in the formation and rethoric about homelessness programmes/strategies