



FEANTSA

**European Observatory on Homelessness: Statistics
Review 2005**

Slovenia

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Introduction

When speaking about homelessness in Slovenia, the broader context of this issue has to be taken into account. Namely, in the past (before the independence and transition to market economy) the homelessness was not very common, as the states obligation was to ensure housing for all citizens. This has changed with the transition, and homelessness has become more common. However, this rarity and the absence of the phenomena influences its perception in the present time. Therefore, it is often linked to the most visible form of homelessness, such as rough sleeping, and also commonly to individual circumstances, such as drinking or drug abuse problems.

In the research on excluded groups (Trbanc et al. 2003) these perceptions were partly confirmed in the interviews with people that deal with the homeless. Professionals in the Centres of social work indicated alcohol abuse problems, mental problems, domestic violence and excessive housing expenses as strongly linked with the occurrence of homelessness.

In the last years the homeless problem is increasing and also the socio-economic structure of the homeless is changing (Černič Mali 2000). The new groups of homelessness, whose numbers are increasing are young drug misusers, women with children and middle aged single persons. Among the reasons for homelessness is increasingly the inability to pay the rent (Černič Mali 2000).

It also has to be stressed, that in Slovenia there are not many data on homelessness. The research is not very common (see the Research update) and consequently the data that we can gather is mainly the estimations of the centres, NGOs and public officials that deal with homelessness.

Roofless

Rough sleeping is the most extreme manifestation of homelessness and housing exclusion. In Slovenia this phenomenon is still mainly linked in public perception to a specific vagrant life-style and to alcoholism or drug abuse. It is also more concentrated in Ljubljana, and some other big cities (for example Maribor). It is less common in other parts of Slovenia.

In 1996 it was estimated that 400 people were sleeping rough (a very proximate estimation, Housing indicators 1996; in Mandič 2004). Similar number of people has been reported to have been treated by the Centres of social work in 2003 research (Trbanc et al. 2003), however here the persons that go to NGOs are not counted, so the number should be higher. The estimate made by Cvetič (2004) is that in Slovenia we have today between 800 and 1000 homeless people. If we add the number of users of the services of various shelters for homeless (public and NGO), we get approximately 1140 persons; although here there might be overlapping of persons, that use various centres; also, some day services are used by people who have a place to stay, so they are not roofless. However, this enables a rough estimation of the phenomenon. The estimation of 1200 for the whole Slovenia was also made by the Director of the Homeless centre in Ljubljana¹.

The source of information on rough sleeping are the estimations of NGOs that offer services to this population. The estimates come only from the dealing with homeless that contact centres and search for help. There are no estimates or counts of homeless that perhaps do not contact these various organisations (either public or NGO). The area that is covered by these estimations is the whole Slovenia, however, with the emphasis on the big cities, where the services, NGOs are situated. There isn't any specific research on homelessness that would estimate the extent of the phenomenon. However, the city of Ljubljana will perhaps in near future fund a research on this subject.

¹ Interview carried out on 15/5/2005.

The provisions for this category (described more in detail in policy update) are the public Centres for homeless, which provide shelter as well as basic services (food, hygiene), and centres in the voluntary sector, mainly led by Karitas. In total the capacity of public shelters is approximately 68 beds. Also some of NGOs shelters offer overnight stay, however, we do not have exact data, but they are quite small (source: Cvetič 2004).

We can distinguish also between centres that offer an overnight stay and other services and daily centres that offer food, hygiene and social aid, but no accommodation.

Majority of the centres for the homeless does not limit the duration of the stay in the centre. For example, in the Centre for the homeless in Ljubljana², approximately half of the users of the accommodation facilities have been there for more than 5 years. However, in the frame of this centre there are since October 2004 available short stay accommodation in containers (approximately 18 beds available) – the stay is limited to only one night and the premises are closed during the day³.

As a form of preventing homelessness, Ljubljana municipality has a program for emergency shelters. These are for people, that due to their situation are in danger of losing or have lost their home and there is a need for prompt action. These can be for example people that were evicted. One of the reasons for this programme is to keep the evicted family together (in cases that the evicted family becomes homeless the child is separated from the parents and in dire cases given in foster care). In 1999 there were 20, and in 2000 50 such emergency dwellings envisaged in the Housing programme. According to the Director of Ljubljana housing fund there are 100 emergency abodes in use in

² Interview carried out on 15/5/2005.

³ However, according to the past experience, a large share of the users is quite constant (Interview carried out on 15/5/2005 with the Head of the centre).

2005⁴. However, the living standard in these dwellings is very low, as these units can be without kitchen or sanitary facilities for exclusive use, and the area minimum for the first bed is six m², for the second additional four m². (according to the rule book on minimal technical conditions for these emergency dwellings⁵)

Houseless

We have included all the homeless that live in any kind of homeless centre in above category, as the short stay homeless provision is quite new and very minimal.

The people in institutions and hospitals are not considered homeless and there is no specific data on their housing problem, which is why we cannot include any data or description concerning this issue. However, due to the trend of deinstitutionalisation, the issue is not negligible, as people are released from the hospitals but are not capable of living on their own (due to personal problems, financial issues, etc.). There are some NGOs that help in these cases (see 2nd and 3rd point below).

In this category we will mainly include four groups and types of housing provision:

- housing for immigrants (including asylum centres, reception centres and similar)
- institutional release
- supported accommodation for people with disabilities, mental problems and similar
- accommodation for mothers and children in case of violence

⁴ Source: Informal conversation with the Director of the Housing fund, Ljubljana, May 2005. The emergency abodes have existed in Ljubljana since 1997 (even before the necessary law was adopted). The length of the accommodation is not specifically limited. The law states that it is for the duration of the emergency.

⁵ Pravilnik o minimalnih tehničnih zahtevah, ki jih morajo izpolnjevati bivalne enote, namenjene začasnemu rečevanju stanovanjskih potreb socialno ogroženih oseb. UL, 5/10/2004. Vir: www.slonep.net.

Immigrants and asylum seekers

In the present time immigration is not very common. In Slovenia migration was high after the 2 WW from the poorer former Yugoslav republics, with the greatest migration flow between 1971 and 1981. In the period from 1953-1991 the share of Slovenians in the total population has dropped from 96,52% to 87,84% (Statistical Yearbook 1998). The number of immigrants in Slovenia in general is however not very high (as 83% of population reports themselves as Slovene - Population census 2002). According to the national report (Mandič et al 2004) the housing status of naturalised immigrants (that live a long time in Slovenia) is very similar to the population average (except for the overcrowding issue, which is more often present in migrant households).

The worker hostels have been the most common accommodation for immigrants in the past; it was a very well developed form of temporary accommodation prior to 1990. The problems appeared when the immigrant was joined by his family (which was often), as the workers hostels were not suited for families. However, employers often ensured housing for their workers. But, this could not solve the whole extent of the housing problem of immigrants. Illegal building has also been one way of self help by the immigrants (many of the illegal buildings were later on legalised – example in Ljubljana – Rakova Jelša).

During 90's many of the worker hostels closed down or changed to condominiums, but there is no systematic written record available. It is the private rental sector, i.e. it's bottom part, that took over some of the supply, however on the private, non-registered basis. The closing down of these worker's hostels has been also stated also as a cause for homelessness for this specific group of people (Černič Mali 2000).

Many immigrants have accepted Slovene citizenship and could enjoy privatisation of public rentals, which allowed sitting-tenants to buy their homes with generous discount. However, some of them now face the so called “poor owners problem”. Some of them lost their job during the nineties and others have low pensions, which causes difficulties in meeting their costs as owners (source: Mandič et al. 2004).

During the Balkan war the immigration flows increased, however the numbers of these immigrants at present is very small. According to data from the Slovenian Red Cross and the Government Office for Immigration and Refugees there were around 70,000 refugees from Croatia and Bosnia and Herzegovina in Slovenia in 1992. At the end of 1995, approximately 20,000 refugees, mostly from Bosnia and Herzegovina, had a temporary “home” in Slovenia (Zavratnik Zimic 2003). In July 2002 Slovenia passed the Law on Amendment of the Law on Temporary Refuge (Official Gazette 67/2002), which enabled refugees under temporary protection to obtain permanent residence permits.

For persons under temporary protection status the main accommodation were accommodation centres. The stay in these centres was of limited duration (the centres were closed in 2004). However, the quality of housing varied radically from one Accommodation Centre to the next. The majority of Centres were in poor condition:

- The Centre’s buildings in Postojna and Kozina were unsuitable for living;
- Four Centres (Ilirska Bistrica, Kozina, Postojna and Maribor) were located in former military buildings (with separate rooms and common bathrooms) and therefore are unsuitable for families and long-term stays. (source, Mandič et al. 2004)

For the asylum seekers the available accommodation is asylum. There is only one Asylum in Slovenia, located in Ljubljana (Vič), with a 203-bed capacity. The sectors are divided for different groups: family section, single men, young

persons, single women section and a section for people with special needs (source: <http://www.mnz.si/si/13331.php>). In cases of increased number of asylum seekers additional capacities can be used in the Accommodation Centres. Another option is private renting sector, where state offers rent subsidies. However, these are not sufficient to cover private rent.

The number of refugees and asylum seekers is a data that can be gathered from the competent public authority. Source for this report was research done about this issue in 2004 (Mandič et al. 2004.).

Institutional release

The average number of prisoners in 2004 was 1.131 persons. At that the fluctuation was very high, as the number of newcomers was 3.817 and the number of those leaving was 3.802 (Source: Uprava za izvrševanje kazenskih sankcij, Yearly report 2004). In the last years the number of people in post penal situation has been fairly stable, around 1100 people (according to the Centres of Social Work, source: Trbanc et al. 2003). Homelessness is reported problem for many of them. There are no NGOs that would specialise in helping this specific group of people. There is also no specific accommodation available to them.

Homelessness can also occur after longer hospitalisation. The lack of hospital beds sometimes means discharging patients that are not really capable to ensure their own care. Often the move to a sheltered accommodation such as retirement home is necessary (however, also here the problems can arise, as there are not enough places available in retirement homes). The size of the problem is hard to estimate, as there is no data on this subject. However, Human rights ombudsman does mention this problem as very pressing in his 2003 report. In cases of mental health problems the issue is addressed in the following section. The number of patients, hospital beds and the fluctuation of

patients is given in the table below, which can give as some estimations of the problem.

Table 1: Data on hospitals in Slovenia

	1995	1999	2003
Hospitals and maternity hospitals¹⁾	24	26	28 ²⁾
<i>Beds</i>	11411	10959	9895
<i>Admitted patients</i>	310991	328819	337352
<i>Outpatients treated</i>	311136	329258	338069
General and clinical hospitals⁶⁾	13	15	16
<i>Beds</i>	9374	9278	8317
<i>Admitted patients</i>	278569	302822	311503
<i>Outpatients treated</i>	278592	303140	312167
Maternity hospitals⁷⁾	2	2	2
<i>Beds</i>	151	151	133
<i>Admitted patients</i>	7804	7505	8117
<i>Outpatients treated</i>	7814	7510	8088
Hospitals for pulmonary diseases⁸⁾	3	2	2
<i>Beds</i>	541	196	178
<i>Admitted patients</i>	10400	4507	4831
<i>Outpatients treated</i>	10388	4560	4853
Hospitals for mental diseases	4	4	4
<i>Beds</i>	805	804	777
<i>Admitted patients</i>	5006	4938	4574
<i>Outpatients treated</i>	4999	4934	4613
Rehabilitation centres	1	1	1
<i>Beds</i>	200	200	200
<i>Admitted patients</i>	1879	2193	1979
<i>Outpatients treated</i>	1875	2179	2004
Orthopedic hospitals⁹⁾	2	2	2
<i>Beds</i>	340	330	290
<i>Admitted patients</i>	7333	6854	6348
<i>Outpatients treated</i>	7468	6935	6344

Source: SURS, 2004 (Statistical yearbook 2004).

Supported accommodation

One of the ways of solving housing problems of specific groups – like people with mental health problems, is supported accommodation. In the beginning of the nineties the housing communities have started to be popular way of accommodating adults. In Slovenia this is provided by some NGOs (like Altra,

Šent, Ozara). In 1999 approximately 40-45 people lived in 8 housing communities (Flaker 1999, 54). According to later research (Flaker 2000) there were 23 such groups, 10 of them specialised for adults with mental health problems. In total there were 96 people in this type of accommodation.

The housing communities were intended to be temporary housing solution, but they often become permanent (source: Interview with NGO Altra). Altra has one dwelling for temporary accommodation (for approximately one year), and two flatlets. However, the need is estimated to be much greater. In the interview⁶, they estimated that approximately 5 000 dwellings will be needed for this group (due to the dehospitalisation trend), and they estimated that in 2000 around 175 people (with mental health problem) had unsolved housing problem.

The funding of housing communities comes from the government and the municipality of Ljubljana. The Ministry does not fund special cases where individual housing is needed, however Municipality of Ljubljana is more flexible in this regard.

There are also NGOs that deal specifically with people with handicaps, mobility problems, like for example the NGO Sonček. The NGO Sonček has housing communities in 5 Slovenian cities (Ljubljana, Maribor, Dravograd, koper and Murska Sobota). It established the first non profit housing organisation (Flaker 2000).

The source for information on these issues are NGOs' working in this field, which give estimates of the extent of the problem, but they do not observe it in a more systematic and exact manner. There is no government statistic that would cover this problematic.

⁶ The interview with the NGO Altra was carried out for the project: SENDI, Richard, MANDIČ, Srna, ČERNIČ MALI, Barbara, BOŠKIČ, Ružica, FILIPOVIČ, Maša. *Stanovanjska politika kot generator in blažilec socialnih problemov : končno poročilo*. Ljubljana: Urbanistični inštitut Republike Slovenije, 2002.

Shelters for people with experience of (domestic) violence

Housing problems are very often linked with domestic violence. For acute situations there are safe houses in Slovenia in all major cities: Celje, Krško, Ljubljana, Ljutomer, Maribor, Novo mesto, Slovenj Gradec, Velenje, Tržič. Leskošek and Boškić (2004) report of ten shelters and six maternity homes in their research. However, maternal homes are not explicitly established for the issue of domestic violence, therefore when talking about this problem they are left out. According to the latest data of the social chamber⁷ we have safe houses with the capacity of 153 beds. The stay is limited to 3 months, which can be prolonged to 1 year, and they are intended for women with children suffering from any kind of violence. The accommodations are rooms, there are no cases where accommodation would mean a larger unit (a small appartement or similar). The shelters accept also women that do not have Slovenian citizenship, however they do not accept women who misuse drugs and alcohol and those who have been using psychiatric services. (Leskošek, Boškić, 2004).

There is a lack of data on this issue, so the needs for perhaps the bigger number of these shelters is very hard to estimate. The source of data is gathered by Social chamber of Slovenia and (academic) research done on this issue, mainly through qualitative research in the centres.

In addition to the shelters the specific status of maternity homes should be mentioned; there are seven of them (according to social chamber⁸). These are similar to shelters and in public perception they are often not distinguished. However, the maternity homes are not intended for women experiencing domestic violence but are intended for women with children that are socially and economically vulnerable, for solving their housing situation. The stay is

⁷ http://pelikan.karitas.si/povezave/socialna_zgibanka.htm. Accessed on 5/10/2005

⁸ http://pelikan.karitas.si/povezave/socialna_zgibanka.htm. Accessed on 5/10/2005

limited to one year and can be extended to two years. Their capacity is 129 beds.

Teenagers accommodation

In Slovenia young are still more often observed through other problems – like family conflicts and similar, while homelessness or housing problems in general are neglected. This means that not their housing situation is seen as the factor that needs improvement, but more often the youth is seen as problematic. There are many facilities in these circumstances (correctional facilities for young and similar). Consequently, there are very few accommodation options for teenagers in Slovenia. Centres for social work have the ability to place young in housing groups⁹ (only for weekdays¹⁰), educational establishment or foster care (only for children less than 7 years old). First two options are only for the young with behavioural and personality problems. The centres report that in majority of cases young have other problems and the housing problem is of secondary nature. If there is only a housing problem the most probable solution is foster care. (Leskošek 2000).

Temporary solution is one Emergency centre for young (Krizni center za mlade). Emergency centre for the young offers emergency housing for young for the period of maximum 3 weeks. It can offer accommodation for 6-7 young people, maximum 18 years old. Important to note here is that the condition for the acceptance is Slovenian citizenship.

We do not have data on the extent of the problem or trends in this area. However, the young drug misusers are cited as the new group of homelessness whose number is increasing. As an illustration, the number of occurrences

⁹ Housing groups are usually organised in the frame of Centres for young (Mladinski zavodi) and are under jurisdiction of Ministry of education and sports.

¹⁰ The housing groups usually have a house rule that children must go home during the weekends.

young (less than 18) running away from home has been falling in the last few years, from 167 in 1999, to 92 in 2001 (source: Police data, www.policija.si).

The source of data is predominantly (academic) research on this issue and NGO data.

Insecure housing

Living temporarily with friends or family without choice

There are no data on living temporarily with friends or family without choice. There are data on adult children still living at home, which indicates a potentially problematic housing situation. However, this is also a part of the (post)modern life style trend - that children leave their homes very late in life, so it is hard to know whether it is voluntary or involuntary (probably partly both).

According to the Census 2002 there are 78852 households with a child between 25 and 29 years old. This means that approximately 80 000 young people still live with their parents, which can be in a high share due to inability to move (therefore involuntary). According to some estimates (ŠOU Ljubljana) there are even more, namely 205.000 young (25-35 years old) whose housing situation is unsolved. According to pan-european survey (European quality of life survey) in 2003 45% of men and 39% of women aged 18-34 still lived with their parents (without a partner and children). This share is much higher than the EU 15 average (33% for men and 25% for women).

This problem is not recognised by the policy makers. It is however linked to the problem of young families (having conditions to create a new household), which are often cited in policies and programmes as a specific vulnerable

group. The data on real hidden homelessness of people living with friends or family for shorter periods is not available.

Living in dwelling without a standard legal (sub)tenancy (excludes squatting)

In Slovenia the rented sector is very small. Only 9% of households live in a rented dwelling (source: Census, Statistical office 2002). At that 6,5% is public rented housing (social and nonprofit housing), and only 1,2% private (and 1% subtenants).

The legal tenant contract is very important, as it is a condition for getting a rent subsidy from the state (provided by the Centres for Social Work). We do not have an estimation of the problem of unregistered tenancy, however, we feel that the problem is very present in our private renting market, which is highly unregulated. According to data in Ljubljana (Mandic et al, 1993) there were approximately 20% of illegal renters in the private sector (in Černič Mali 2000). Unfortunately, we do not have a more recent data. However, we do not have any reason to believe that this share has decreased. A group that is often in a position of being a tenant without legal contract are students, also immigrants.

Re-possession orders (owned housing) and legal orders enforced (rented housing)

We do not have data on re-possession orders and similar issues. There are cases of illegal evictions. Often illegal eviction problem is linked to the tenants that live in denationalised housing, where in many cases the owners do not wish to rent their dwelling and therefore often try to force their tenants to move with illegal means. The Council for the protection of tenants (interview with S.

Mandič in 2002)¹¹ reported of two cases of eviction of tenants, which were not legal. The most vulnerable group here seem to be the older people.

The problem was quite present is a specific group - the renters in the dwellings of Yugoslav army, whose status was specific and were at beginning threatened with eviction. Approximately 2000 households were involved (Mandič 2004). Helsinški monitor¹² mentions in their statement no. 1 in 1998 that approximately 1200 people were threatened with eviction, however not many were actually realised, also due to strong public pressure. Along with people living in former military flats also under threat of eviction were/are, according to Helsinški monitor, families of workers residing in former workers homes, families residing in housekeepers flats, federal postmen and customs officers flats. (statement no 3, 1999)¹³

Also in the interviews with Human rights Ombudsman office the evictions were stressed, but were not linked with any particular population group. The exception is the already mentioned case of army dwellings¹⁴. Some individual cases were also mentioned in the 2003 report of Human rights ombudsman.

According to the Director of the Housing fund in Ljubljana they have had approximately 50-60 evictions in 2005 (in Ljubljana). The number of evictions is getting higher due to the fact that some court processes have come to an end (after several years). The evictions are mainly due to illegal use of the

¹¹ The interview was carried out for the project: SENDI, Richard, MANDIČ, Srna, ČERNIČ MALI, Barbara, BOŠKIČ, Ružica, FILIPOVIČ, Maša. *Stanovanjska politika kot generator in blažilec socialnih problemov : končno poročilo*. Ljubljana: Urbanistični inštitut Republike Slovenije, 2002.

¹² NGO, statements available on:

<http://meltingpot.fortunecity.com/iceland/363/page4.html>

¹³ statements available on:

<http://meltingpot.fortunecity.com/iceland/363/page4.html>

¹⁴ The interview was carried out for the project: SENDI, Richard, MANDIČ, Srna, ČERNIČ MALI, Barbara, BOŠKIČ, Ružica, FILIPOVIČ, Maša. *Stanovanjska politika kot generator in blažilec socialnih problemov : končno poročilo*. Ljubljana: Urbanistični inštitut Republike Slovenije, 2002.

dwellings, sometimes also due to rent arrears¹⁵. Also, the municipality tries to prevent homelessness as a result of eviction (with emergency abodes).

Living under threat of violence from partner or family (police recorded incidents)

During the past few years the number of ascertained cases of domestic violence has been rising (according to the Slovenian Centres of Social Work). Yet, this growth might be more due to the increased consciousness, knowledge and recognition of the problem than actual growth of violence. Professionals believe that annually approximately 1 300 women experience violence at home. Non-governmental organisations working in this area claim that the level of domestic violence in Slovenian society is high. It was estimated that every fifth women is battered at home and every seventh is raped. (Trbanc et al. 2003).

According to the police data, there were 4169 legal offences with elements of violence in the family in the period 2000 to 30.6. 2002, among which the most often are: threat to safety (also with a dangerous object), light body injury, maltreatment, neglect of young, violence, sexual assault of young (less than 15 years old). (source: www.policija.si).

Inadequate housing

Mobile home

In Slovenia we do not have cases of people living in a mobile home or caravan (perhaps with some individual exceptions that we could not be aware of). Cases of shanty towns can be found. The Director of Ljubljana Housing fund reports about one in the municipal ownership (Tomačevska-Koželjeva), where

¹⁵ Source: Informal conversation with the Director of the Housing fund, Ljubljana, May 2005.

approximately 96 families live¹⁶. The municipality is trying to solve the issue. There might also be others, however it is not a very widespread phenomenon (exceptions are the cases of Roma illegal settlements that could be sometimes labelled shanty towns – see below).

Illegal occupation of a site

The issue of the legal occupation of a site is very present in Slovenia. It is predominantly linked to the Roma problem.

There are 3246 Roma in Slovenia, according to the last population census (2002). However, many feel that the number is underestimated. The estimates range from 6500 to 7000 Roma (Zavratnik Zimic 2000), and also to 10000 Roma (ECRI report 2003).

Horvat (1997) classified the living conditions of Roma in Slovenia into three groups:

- Roma reaching a “high standard of living”.
- Roma with a “lower standard of living”. These are Roma living in condensed Roma settlements, which are settlements of one or two-room houses, made of brick or wood.
- Roma with the “lowest standard of living”. They live in isolated settlements located at the border of village communities. Their huts are dark, damp, and unhygienic, without toilets and bathrooms.

According to the RS Governmental Commission for Assistance to the Roma, 2nd session, September 2003, these two last groups are the most numerous: the majority of Roma live in settlements, isolated from the Slovene population and in poor conditions, in substandard or below the minimum housing standards at the margins of populated areas. The data indicate that:

¹⁶ Source: Informal conversation with the Director of the Housing fund, Ljubljana, may 2005.

- 30% of Roma live in built houses of which half were built without the necessary permits;
- Only 12% live in apartments;
- The remainder (58%) live in makeshift housing – barracks, containers, trailers etc. (source: Mandič et al. 2004)

The majority of Roma settlements were (or still are) illegal. In the past (before 1990) the land was national and usually owned by a municipality, which tolerated their presence. With the processes of denationalisation, much of the land was returned to original owners, which caused conflicts with the owners and the Roma. The state tried to solve these issues in some cases by legalising the settlements and in others by finding other sites.

The sources of data are NGOs and representative organisations of the Roma people. Also the Population census can supply basic information on the Roma population.

An issue that is similar to illegal occupation of a site is illegal building. The latter is a quite spread phenomenon in Slovenia, however, we currently could not get any data on that. It is linked with enlarging or building a house without building permits, or building it on farming land or even in national parks. It is often linked also to the Roma building illegally on the municipal or private sites (which are often illegally occupied).

Dwellings unfit for habitation

The problem in Slovenia is that there is no clear definition of adequate housing and in different contexts different criteria are used. In the 1991 Housing law the adequate dwelling was defined as a dwelling, that has, along with living room, kitchen, sanitary facilities and corridors also enough rooms to satisfy the housing need of the household. A bedrooms suffices for 2 persons, cabinet for

1 person.¹⁷ In the Housing law (UL, 19/6/2003) the adequate dwelling is defined as dwelling that was built in accordance with the minimal technical conditions for building and has been licensed for use. Except in the case of flatlet, the living and the sleeping place must be separated.

According to the Population Census 2002 5% of households still live without a bathroom in the dwelling, the same share lives without a toilet, 1% lives without a kitchen. As inadequate dwelling we can also place living in a basement, where 1,5% of Slovenian households live (see the exact numbers in the table below).

Table 2: Characteristics of dwellings

	Households	
	Number	Share
Bathroom in the dwelling	678950	
Yes	643934	94,84%
no	35016	5,16%
Toilet in the dwelling		
Yes	646029	95,15%
no	32921	4,85%
Kitchen in the dwelling		
Yes	669837	98,66%
no	9113	1,34%
Location of the dwelling		
Basement	10471	1,54%
other	668479	98,46%

Source: Population census 2002 (www.stat.si)

As homeless in the wider sense we could also classify people living in **occupied business premises** (such as shops, offices, rooms in hotels, hospitals and old people's homes where households live which are not users of services of these homes, etc.) and people occupying **provisional premises** (which are according to statistical definitions huts, garages, basements, wagons, trailers,

¹⁷ (<http://www.gv-center.si/Stanovanjski%20zakon.pdf>)

tents, etc.). Under these two categories according to the Census 2002 there are 1194 dwellings occupied by 3068 persons.

Extreme overcrowding

Overcrowding is one of the important indicators of unsuitable dwelling. There are no national standards of overcrowding in Slovenia. For the renters of non-profit dwellings there exists a normative on the appropriate size of the dwelling according to the size of the household (see the table below). However, no difference is made according to composition of household - husband and wife and mother and a grown up child both count as a two person household with the same space needs, although these are obviously different.

Table 3: Size standards of non-profit dwellings

Number of persons in household	Size of the dwelling (in m ²)
1	20 to 30
2	30 to 45
3	45 to 55
4	55 to 65
5	65 to 75
6	75 to 85

If we use the criteria less than one room per person as the indicator of overcrowding, 34% of households or 231798 households live in such conditions (according to the Population census 2002). However, this is an overestimation (children are counted as one person, there is no weight system used for larger families....).

There is a trend of improvement in this area, as the average size of the dwelling has increased from 68,5 to 76,8 m² from the year 1991 to 2002, while the average size of households has decreased from 3 to 2,8 members (source: Population census 1991 and 2002).

The table below represents the households by the number of members by number of rooms in the dwelling.

Table 4: Households by size of dwelling

Number of rooms	total	Households by number of members				
		1	2	3	4	5+
Special room	0,2	0,6	0,1	0,1	0,0	0,0
1	11,7	27,7	11,8	7,3	4,8	3,1
2	30,6	38,1	38,5	29,6	23,7	16,3
3	32,2	22,6	32,1	38,0	36,1	31,6
4	15,6	7,2	11,5	16,2	22,7	24,1
5+	9,7	3,7	5,8	8,9	12,6	24,8

Source: SURS popis 2002 (www.stat.si)

Note: special room is defined as living space, without bathroom or kitchen, less than 6m² large. One room includes flatlet.

Squatting

There are cases of squatting in Slovenia, however they are quite rare. There is no available data on the number of the occurrences. There was a squat in Ljubljana – in cukrarna, which has received widespread media attention, but the young that resided there were marked as deviant and their behaviour linked to drugs, alcohol. Their situation was not discussed in the context of homelessness (Leskošek 2000). Similar was a situation with a squat Avtonomna cona Molotov, in a building owned by Slovenia Railway company. AC Molotov got a widespread media attention, and was likewise linked with drugs and different deviant behaviour. At first it had public support, but after a while this was lost. It was evicted in 2003. (source: www.squat.net)

Appendix

Table 5: Recipients of social welfare services

	1990	1995	1999	2000	2001	2002	2003
Children and youth							
Deprived of a normal family life	32116	27962	19287	19050	18226	17306	14397
From financially handicapped families	10028	...	20619	22907	24434	23228	24847
Physically disturbed	1478	1071	1244	1250	1240	1552	1003
Mentally disturbed	6245	4594	3671	3779	3213	3351	2213
Behaviourally and personally disturbed	7038	6403	7106	6308	6158	7155	5310
Adults							
Persons with financial problems	15704	31425	46691	48160	56460	70512	67410
With problems of old age (over 60)	14998	8345	8553	8444	8376	8246	7493
Disabled persons	10994	7895	8224	8031	7884	7696	8166
Behaviourally and personally disturbed	10020	5274	5501	5104	5438	5668	5548
Other adults with problems in family and/or partnership relations	9647	7821	5135	5002	4375	4262	3676

Source: www.stat.si, statistical yearbook 2004

Table 6: Public social welfare institutions

	1990	1995	1998	1999	2000	2001	2002
Institutions							
Institutions for training moderately and seriously handicapped children and youth	3	5	5	5	5	5	8
Old people's homes and combined social welfare institutions	53	47	48	49	49	55	58
Special social welfare institutions	3	6	7	7	7	7	7
Centres for protection and training	...	39	44	44	40	43	44
People in care							
Institutions for training moderately and	370	794	805	808	821	808	802

seriously handicapped children and youth							
Old people's homes and combined social welfare institutions	11260	10757	11645	11832	11905	12346	13051
Special social welfare institutions	1003	1602	1685	1679	1690	1713	1706
Centres for protection and training	...	1427	1880	1947	1976	2158	2265

Source: www.stat.si, statistical yearbook 2003

Table 7: Ownership structure

Households		
Owner, coowner	558203	82,2%
Renter in nonprofit sector	42208	6,2%
Renter in profit sector	7904	1,2%
Renter in social sector	2000	0,3%
Renter of business dwelling	2827	0,4%
subtenant	7015	1,0%
user	55734	8,2%
other	3059	0,5%

Source: Population census 2002

Table 8: Data on hospitals in Slovenia

	1995	1999	2000	2001	2002	2003
Hospitals and maternity hospitals¹⁾	24	26	27	28 ²⁾	28 ²⁾	28 ²⁾
<i>Beds</i>	11411	10959	10745	10286	10147	9895
<i>Admitted patients</i>	310991	328819	332601	330302	327029	337352
<i>Outpatients treated</i>	311136	329258	332595	330754	329212	338069
<i>Hospitalization days (1000)^{3/4)}</i>	3308	3021	2904	2769	2675	2526
<i>Physicians and dental physicians</i>	2254 ⁵⁾	2371	2413	2486	2579	2697
<i>State registered nurses</i>		...	...	...	865	1120
<i>Medical staff with high and secondary school education</i>	8732	9010	8990	8997	8651	8610
<i>Medical staff with elementary education</i>	216	218	241	446	432	510
<i>Other medical staff</i>	175	280	412	771	444	634
General and clinical hospitals⁶⁾	13	15	16	16	16	16
<i>Beds</i>	9374	9278	9110	8690	8560	8317
<i>Admitted patients</i>	278569	302822	305678	304543	301465	311503
<i>Outpatients treated</i>	278592	303140	305630	304882	303563	312167
<i>Hospitalization days (1000)^{3/4)}</i>	2652	2494	2383	2279	2204	2103
<i>Physicians and dental physicians</i>	2057	2207	2247	2315	2408	2525
<i>State registered nurses</i>	...	...	...	...	836	1071

<i>Medical staff with high and secondary school education</i>	7623	8155	8164	8160	7852	7842
<i>Medical staff with elementary education</i>	175	180	197	346	338	417
<i>Other medical staff</i>	160	248	352	689	364	529
Maternity hospitals⁷⁾	2	2	2	2	2	2
<i>Beds</i>	151	151	133	133	133	133
<i>Admitted patients</i>	7804	7505	7779	7462	7649	8117
<i>Outpatients treated</i>	7814	7510	7760	7479	7662	8088
<i>Hospitalization days (1000)³⁾</i>	39	36	36	32	29	30
<i>Physicians</i>	23	22	22	23	22	21
<i>State registered nurses</i>	...	...	...	...	5	11
<i>Medical staff with high and secondary school education</i>	95	92	91	97	90	83
<i>Medical staff with elementary education</i>	-	-	-	-	-	-
<i>Other medical staff</i>	3	2	3	2	1	3
Hospitals for pulmonary diseases⁸⁾	3	2	2	2	2	2
<i>Beds</i>	541	196	196	181	180	178
<i>Admitted patients</i>	10400	4507	4820	5056	4697	4831
<i>Outpatients treated</i>	10388	4560	4797	5080	4667	4853
<i>Hospitalization days (1000)³⁾</i>	154	62	60	59	57	60
<i>Physicians</i>	70	21	22	25	24	23
<i>State registered nurses</i>	...	...	...	...	5	11
<i>Medical staff with high and secondary school education</i>	301	130	126	135	133	123
<i>Medical staff with elementary education</i>	1	1	1	1	1	1
<i>Other medical staff</i>	2	2	5	4	1	6
Hospitals for mental diseases	4	4	4	4	4	4
<i>Beds</i>	805	804	790	777	777	777
<i>Admitted patients</i>	5006	4938	5104	5152	5342	4574
<i>Outpatients treated</i>	4999	4934	5116	5204	5361	4613
Rehabilitation centres	1	1	1	1	1	1
<i>Beds</i>	200	200	200	200	200	200
<i>Admitted patients</i>	1879	2193	2346	2263	2020	1979
<i>Outpatients treated</i>	1875	2179	2424	2237	2092	2004
<i>Hospitalization days (1000)³⁾</i>	68	69	72	63	64	61
<i>Physicians</i>	21	27	26	26	27	28
<i>State registered nurses</i>	...	...	...	...	6	10
<i>Medical staff with high and secondary school education</i>	154	159	142	133	118	119
<i>Medical staff with elementary education</i>	26	28	29	30	29	30
<i>Other medical staff</i>	4	11	35	47	59	71
Orthopedic hospitals⁹⁾	2	2	2	2	2	2
<i>Beds</i>	340	330	316	305	297	290
<i>Admitted patients</i>	7333	6854	6874	5826	5856	6348
<i>Outpatients treated</i>	7468	6935	6868	5872	5867	6344

<i>Hospitalization days (1000)³⁾</i>	111	90	85	72	64	59
<i>Physicians</i>	30	35	35	37	37	39
<i>State registered nurses</i>	...	...	...	...	2	2
<i>Medical staff with high and secondary school education</i>	188	196	190	189	190	187
<i>Medical staff with elementary education</i>	-	-	5	5	5	5
<i>Other medical staff</i>	-	2	2	4	3	5

2) All data were sent by only 27 hospitals.

3) Excluding daily and long daily treatment..

4). In 2003, excluding Surgical Sanatorium Rožna dolina in Ljubljana.

5) Trainees are also included..

6) The data on children's hospital
Stara Gora near Nova Gorica are added to
the data on general hospitals

7) Excluding obstetric departments in general hospitals.

Source: SURS (www.stat.si), Statistical yearbook 2004

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