FEANTSA, the European Federation of National Organisations Working with the Homeless is an umbrella of not-for-profit organisations which participate in or contribute to the fight against homelessness in Europe. It is the only major European network that focuses on homelessness at the European level.
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1. Introduction

Social innovation is an increasingly central area of policy and research in the context of the Europe 2020 strategy. This guide makes the case that homelessness is an important thematic priority for social innovation, and suggests areas of focus where social innovation can support the fight against homelessness in the EU. It argues that homeless service providers can be key actors in social innovation and makes recommendations as to how the sector can best be supported in developing, testing and scaling up innovations in order to combat homelessness and thus contribute towards progress on the objectives of the Europe 2020 strategy.

2. What is social innovation?

Historically, innovation has mainly been understood in relation to economic processes. Joseph Schumpeter defined innovation as “creative destruction” of old patterns of production, driven by entrepreneurs. In recent years, there has been a growing academic interest in innovation in relation to quality of social policies and practices. The topic of social innovation has emerged within this framework. There is no agreed EU definition of social innovation. The term is used to describe a range of overlapping concepts. However, consensus on the meaning of social innovation is emerging in line with increased policy attention and a growing literature. Broadly speaking, social innovations are “new ideas that work in meeting social goals”. The notion of novelty within social innovation merits particular attention. Innovation does not necessarily mean inventing completely new products, services or concepts. It may involve applying existing ideas in new contexts, overcoming sectoral boundaries or combining existing ideas in new ways. Improvement is an essential component of social innovation. Successful social innovations must meet social needs more effectively than pre-existing alternatives.

Social innovation describes the entire process by which new responses to social needs are developed in order to deliver better social outcomes. This process is composed of four main elements:

1. Identification of new/unmet/inadequately met social needs
2. Development of new solutions in response to these social needs;
3. Evaluation of the effectiveness of new solutions in meeting social needs;
4. Scaling up of effective social innovations

It is important to note that the stages are not always consecutive and there are multiple feedback loops between them.

BEPA has identified three complementary fields addressed by social innovation:

1. Social needs of vulnerable groups that are currently not (fully) addressed;
2. Societal challenges in which the boundary between “social” and “economic” blurs;
3. The need to reform society in the direction of a more participative arena where empowerment and learning are sources and outcomes of well-being.

The first area is the most obviously relevant to homelessness. Clearly, a person living in a situation of homelessness or housing exclusion has unmet housing needs. Often they will also have unmet or inadequately met needs relating to their employment, social and health situation.
As well as its social outcomes, social innovation is often defined as involving social processes:

“Social innovations are innovations that are social both in their ends and in their means...new ideas (products, services and models) that simultaneously meet social needs (more effectively than alternatives) and create new social relationships or collaborations. In other words they are innovations that are both good for society and enhance society’s capacity to act.”

For FEANTSA, this is an important secondary element of social innovation. New social relationships and collaborations are a central dimension of many successful innovations relating to homelessness. Responding in an integrated fashion to the needs of homeless people often requires innovating in order to overcome sectoral boundaries. However, the primary objective of social innovation in the area of homelessness should be responding to the needs of people facing homelessness.

Social policy experimentation is a specific tool that allows testing of policy interventions on a relatively small population in order to evaluate efficacy before deciding whether the intervention should be scaled up. Social policy experimentations thus require the design of a potentially policy-relevant intervention and a methodology for measuring its actual efficacy. In order to demonstrate efficacy, social experimentations must compare impact between a test population (who benefit from the experimental intervention) and a control group (who do not). Randomized control trials whereby participants are randomly assigned to the intervention are regarded as the “gold standard” for constructing a valid comparison group. Non-experimental or quasi-experimental methods can also be used if appropriate to the policy intervention. They offer a less rigorous but less complex and time-consuming way to test impact. Social policy experimentation has considerable potential to strengthen homelessness policies in Europe. By testing policies on small scale, it allows policy makers to ensure that their investments in homelessness are effective.

### 3. EU social innovation agenda

The Europe 2020 agenda, which was agreed by Member States at the June 2010 European Council, sets out the EU’s strategy for “smart, sustainable and inclusive growth” over the period 2010-2020. Social innovation is a major concern within this new strategic framework.

The strategy sets five headline targets in employment, Research & Development (R&D)/innovation, climate change, education and poverty. These include a target to reduce the number of people living in poverty by 20 million and a target to invest 3% of the EU’s GDP (public and private combined) in R&D/innovation.

In addition to the headline targets, a number of flagship initiatives have been introduced to support delivery in key policy areas. Social innovation is central to the European Platform against Poverty and Social Exclusion (EPAP) flagship, which commits to “design and implement programmes to promote social innovation for the most vulnerable". Social innovation is also promoted through the “Innovation Union” flagship, which aims to improve conditions and access to finance for this purpose.

Horizon 2020, the EU framework programme for research and innovation, commits to addressing societal challenges, including making progress towards ‘inclusive, innovative, secure societies”. In this context, it will integrate funding for social innovation with support for research and technological development. Máire Geoghegan-Quinn, Commissioner for Research, Innovation and Science, has stated that “innovation must go much wider than research, science and business. We need it to flourish not just in our laboratories and boardrooms, but also in our schools and community centres, our hospitals and care homes. It can help meet the unmet needs in society”.

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5 Social Innovation eXchange (SIX) & the Young Foundation (2010), Study on Social Innovation, A paper prepared for the Bureau of European Policy Advisors, European Union/The Young Foundation
7 COM/2010/0758 final
The Commission has also launched a pilot called Social Innovation Europe to provide expertise and a networked “virtual hub” for social entrepreneurs, the public and third sectors. The Commission will also support a substantial research programme on public sector and social innovation, looking at issues such as measurement and evaluation, financing and addressing barriers to scaling up and development.

The PROGRESS programme, which is the financial instrument supporting the development and coordination of EU policy in employment, social inclusion and social protection, working conditions, anti-discrimination and gender equality, currently provides funding to for social experimentation projects to test innovations in social policy.

On the 6th October 2011, the Commission adopted a draft legislative package on cohesion policy for the period 2014-2020. This includes proposals for new regulations on the European Social Fund (ESF) and European Regional Development Fund (ERDF) as well as a new EU Programme for Social Change and Innovation (EUPSCI). The EUPSCI will promote evidence-based social change and innovation. It will support policy coordination, sharing of best practices, capacity-building and testing of innovative policies through social policy experimentation. The EUPSCI will support the scaling up of the most successful measures. It is proposed that the ESF will be used for this purpose, as well as for capacity building for social innovation. Social innovation is also one of the proposed investment priorities of the ERDF, including innovative actions in the area of sustainable urban development.

The EU’s Social Business Initiative seeks to create a favorable climate for social innovation through social enterprise. The Commission uses the term ‘social business’ to describe enterprises:

• whose primary objective is to achieve social impact (rather than to generate profit);
• which operate in the market through the production of goods and services in an entrepreneurial and innovative way;
• which use surpluses mainly to achieve these social goals;
• and which are managed by social entrepreneurs in an accountable and transparent way.

The Social Business Initiative provides a short-term action plan to stimulate the creation, development and growth of social businesses. It will be supported financially through the EUPSCI programme, particularly through microcredit. A European regulatory framework for social investment funds is proposed to support the initiative. Social enterprise is also an investment priority in the legislative proposals for the EU’s structural funds 2014-2020. A range of measures will be implemented to promote visibility of social businesses and to support mutual learning and capacity building. In addition, the Social Business Initiative seeks to improve the legal environment for social businesses.

Overall, this policy context creates significant opportunities to support anti-poverty policies through social innovation, including in the area of homelessness.

4. Homelessness within the EU social innovation agenda

Homelessness is an established issue within the EU’s anti-poverty strategy. From 2000-2010, homelessness emerged as a thematic priority within the framework of the EU’s Social Open Method of Co-ordination (OMC). The Social Affairs ministers of the Member States made renewed calls for concerted EU action on homelessness in March 2009 and again in March 2010, with the adoption of the Joint Report on Social Protection and Inclusion. The 2010 Joint Report emphasized the need for integrated national strategies to tackle homelessness, and put forward some of the key elements that these strategies should contain. In its 2012 work programme, the Social Protection Committee has committed to ongoing work on homelessness.

In the framework of the EPAP, homelessness is identified as “one of the most extreme forms of poverty and deprivation, which has increased in recent years.” Furthermore, the list of key initiatives that the Commission has committed to implementing in this new framework includes a number of specific actions on homelessness, including a commitment...
to “identify methods and means to best continue the work initiated on homelessness and housing exclusion, taking into account the outcome of the consensus conference of December 2010".

The European Consensus Conference on Homelessness was an official event of the 2010 Belgian Presidency of the Council of the European Union, and was co-organised with the European Commission and FEANTSA. An independent jury drew conclusions on six key questions on the basis of expert evidence. The consensus conference marked a milestone in EU-level policy co-ordination on the issue of homelessness and has provided a basis for moving towards a more strategic approach. The jury concluded that “there is considerable scope for social innovation in the area of homelessness”.

On the 14 September 2011, the European Parliament adopted a Resolution calling for an EU homelessness strategy. The aim of such a strategy would be to support and coordinate the development of national homelessness strategies. One of the key demands was a call for “a specific focus on ‘housing-led’ approaches under the social innovation strand of the European Platform against Poverty and Social Exclusion in order to strengthen the evidence base on effective combinations of housing and floating support for formerly homeless people and inform evidence-based practice and policy development.”

Homelessness is a particularly pertinent issue in the context of the current economic and financial crisis. Housing and related services emerge as one area which has been particularly adversely affected by the economic and financial crisis. This is reflected in increases in evictions, homelessness, growth in waiting lists for social housing and increased indebtedness in relation to key utilities such as heat and water. The 2012 Annual Growth Survey confirms that homelessness has increased in some Member States as a result of the crisis. Some Member States such as Greece and Spain are experiencing rapid increases in levels of homelessness.

The importance of homelessness as a social policy challenge is well-reflected by the National Reform Programmes (NRPs). These programmes outline Member States’ commitments to deliver on the Europe 2020 strategy and its targets in relation to 10 guidelines on economic and employment policies. More than half of the national governments of the EU have included targeted measures on homelessness within their NRP. These countries include Belgium, Bulgaria, Czech Republic, Finland, France, Greece, Hungary, Luxembourg, Malta, the Netherlands, Poland, Romania, Slovenia, Spain, Sweden, and the UK.

There is a growing evidence base about effective strategies to combat homelessness, which has been supported by the Social OMC and the EPAP. The Housing First model is one example – evidence about its effectiveness in the USA and other countries has led to mounting interest in Europe with testing and implementation taking place in several EU contexts. The EU policy framework has supported this e.g. through peer reviews, the activities of FEANTSA, the European Observatory on Homelessness, mutual learning and exchange, the European Consensus Conference on Homelessness and a social experimentation project. The existing evidence about effective policy and practice can be built upon in order to develop policy interventions that can be tested and, if effective, scaled up.

It is clear that genuine progress can be made on homelessness, even in challenging contexts. A number of countries in Europe have made sustained progress on the issue by implementing targeted policies e.g. Scotland, Finland, the German region of North-Rhine-Westphalia. Knowing that successful policies can be developed and maintained, the European Union should use the social innovation agenda to add value and support this process in Member States in order to make a decisive impact on extreme poverty.

Homelessness has unacceptable human implications and is a violation of fundamental rights. Managing homelessness is also very costly to society. There is growing evidence that tackling homelessness, as well as responding to social needs, can generate cost offsets and even cost savings in some instances. This is a compelling argument for policy makers to use social innovation to inform evidence-based policy making and generate effective homelessness policies.
Homelessness is a key policy issue in terms of delivering on the EU’s poverty target. It is also a critical area of social policy in terms of responding to the crisis. It represents a persistent societal challenge for Europe as a whole - a visible failure in the EU’s fight against poverty and a denial of fundamental human rights. Homelessness is therefore an area where social innovation, supported by the EU policy framework, can and should deliver better policy outcomes.

5. Key principals for social innovation in homelessness

For each phase of the social innovation process, a number of key principals must be taken into account in order to have a genuine impact on homelessness.

Stage 1: Identification of new/unmet/inadequately met social needs

**Stakeholder involvement**

- A range of stakeholders should be involved in identifying new/unmet/inadequately met social needs. These include homeless service providers, people with experience of homelessness, researchers and policymakers at EU, national, regional and local level. Consultation of stakeholders regarding the identification of needs should ideally take place in the framework of an integrated homelessness strategy. There is a danger that “innovation” can actually perpetuate exclusion if needs are misdiagnosed or oversimplified because the link to existing knowledge and expertise is missing.

- Homeless service providers have a particularly valuable role to play in the identification of unmet needs. They have a privileged understanding of the emergence of new needs (e.g. growth of youth or migrant homelessness in numerous contexts as a result of the crisis). They are also well placed to identify gaps in existing provision.

- The effective involvement of stakeholders in the identification of needs supports accountability by helping to ensure that financial resources allocated by the European institutions and local, national and regional authorities to promote social innovation are best used and help make real progress towards ending homelessness and fighting poverty.

**Evidence-based approach**

- The identification of needs should be firmly embedded in a good understanding of homelessness. This must be supported through monitoring and reporting on the extent and profile of homelessness using appropriate indicators, as well as ongoing research and analysis into the causes of and solutions to homelessness.

Stage 2: Development of new solutions in response social needs

**Support for innovation within the homeless sector**

- Policymakers should recognise the potential of the homeless service sector to contribute to broad policy change by supporting a bottom-up process whereby effective ideas are proven to work and are scaled up. Social innovation is likely to be most successful when there is a close involvement of those actors with strong understanding of the social needs to be addressed. There is a strong tradition of innovation in the homeless sector and this must be fully capitalised upon to deliver effective homelessness policy.

**Respect for the rights and human dignity of homeless people**

- Social innovation in the area of homelessness must respect the rights and human dignity of homeless people.

**Built-in space for risk**

- An innovation cannot be a guaranteed success from the outset – there is an element of risk involved. Linking innovation to existing knowledge and understanding limits risk, as does thorough evaluation before scaling up of new approaches. However, the possibility of taking risks and working creatively to meet the social needs of users is an important element of the effectiveness of homeless services. This type of flexible, creative working allows the homeless sector to develop useful innovation. The regulatory and financial context in which homeless service providers operate must enable these processes and therefore create space for the failure of some new approaches.
Stage 3: Evaluation of the effectiveness of new solutions

Thorough evaluation and robust evidence of effectiveness

- Social policy experimentations should be used to support policy development in the area of homelessness. Key actors in social experiments include public authorities, homeless service providers, evaluators, and partners in neighbouring sectors (e.g. health, housing, employment). They should be involved in designing, implementing and evaluating policy experiments as well as in building consensus on the methodology, the ethical framework and the indicators applied.

- Where possible and justifiable in terms of costs and time, innovative homelessness interventions should be evaluated through randomized control trials (RCT) or other rigorous experimental methods such as regression discontinuity. These methodologies will deliver the most robust evidence about effectiveness. In circumstances where RCT is not suitable (e.g. the programme is low-risk because there is already extensive evidence of effectiveness, and it is not very expensive to implement) non-experimental and quasi-experimental evaluation methods may be more appropriate. Soft evaluation techniques such as peer reviews, pilot projects and observational methodologies such as cohort studies are also be useful tools in this context and should be considered.

Appropriate indicators of effectiveness

- Social policy experimentations must define appropriate indicators to measure the effectiveness of innovative interventions. All stakeholders, including homeless service providers should be involved in this in order to ensure that the needs of people experiencing homelessness are fully taken account of.

- The primary consideration for assessing innovative homelessness interventions must be:

  - **Empowerment of beneficiaries.** Empowerment refers to enhancement of the capacity to make informed choices and transform these choices into desired outcomes.

  Measuring effectiveness on this basis involves the development of indicators to measure improvements in a range of areas including health and well-being, residential stability, progress towards independent living, employability, social inclusion, and experiences of choice, control and inclusion. Where homeless services have experience in developing innovative ways to measure effectiveness, this experience should be built upon to define appropriate outcome measurement to evaluate social innovations.

- Sustainability is also an important criteria for assessing homelessness interventions. Cost-effectiveness is one dimension of the sustainability of homeless policies. Policy budgets are finite and must be used accountably. However, cost must only be considered as an evaluation indicator alongside quality of life and empowerment related outcomes. Innovations which reduce costs but do not respond to the identified needs of beneficiaries cannot be considered successful social innovations.

Stage 4: Scaling up effective social innovation

Recognition of homeless service providers as key levers in social change

- In order for effective solutions to be scaled up, homeless service providers must be involved. As the actors that actually deliver homeless services, they have the capacity to reach beneficiaries and thus mainstream change. In order for them to play this role, they must be involved in the innovation process from the outset and be convinced on the basis of robust evidence of the value of innovative policy change. They must be able to access resources to support scaling-up, including through the EU’s structural funds.

- Once innovations have been scaled up, homeless service providers also have a valuable role to play in terms of ongoing learning, evolution and refinement. This is an important element for policymakers to recognise as innovation is always an ongoing process with space for strengthening of effective policy and practice.
6. Thematic areas of focus for social innovation and homelessness

The following section presents suggested areas of focus for social innovation across the following thematic priorities within homeless policy:

• Data Collection
• Employment
• Health
• Housing
• Migration
• Participation

The aim is to provide a non-exhaustive list that highlights potentially policy-relevant approaches and key areas where innovation is required. Policymakers and other stakeholders are invited to use this as a reference to inform priority-setting regarding interventions which could be further developed, tested and scaled up in order to strengthen homeless policies. Some of the innovations presented are quite established in specific contexts and could be usefully transferred or adapted to other contexts and scaled up. Others are relatively undeveloped in the homeless sector but could help provide better responses to the needs of homeless people or people facing homelessness.

Data Collection

Measuring service outcomes

The social innovation agenda demands close attention to the measurement of outcomes of homeless services and policies. There is a need for effective tools to measure and report on the extent to which interventions meet the social needs that they seek address. Inappropriate indicators can fail to capture certain outcomes of homeless interventions. For example, they may focus simply on whether or not an end outcome has been achieved rather than what progress towards the outcome has been made. FEANTSA’s membership has experience of innovating in this area and a number of effective tools for measuring outcomes have been developed. The further development, testing and scaling up of effective innovations in this area has great potential to strengthen homeless policies.

Case-study: The Homeless Outcomes Star, UK

The original Outcomes Star for Homelessness was developed in London by Triangle Consulting over a period of three years of working with homelessness organizations (London Housing Foundation, St Mungo’s and Thames Reach). It is a tool that provides evidence of progress and thus supports key-work.

In order to create the tool, the stages that homeless people go through as they work towards a range of outcomes were modeled and described. 10 scales were developed, each with 10 steps presented in a star shape. The scales are conceptualized in terms of a ‘journey of change’. They cover 10 areas of life: motivation and taking responsibility; self-care and living skills; managing money and personal administration; social networks and relationships; drug and alcohol misuse; physical health; emotional and mental health; meaningful use of time; managing tenancy and accommodation and offending.

The information is recorded on a star form which provides a visual snapshot of the shape of the person’s life at present. Successive readings can then show progress visually to the client and be recorded numerically for service level analysis. The tool is used by approximately 25 organizations in the UK. A study by homeless service umbrella Homeless Link found that all 25 reported improvements in key-work as a result of using the star.

For more information on the see [www.homelessoutcomes.org.uk/About_the_Outcomes_Star.aspx](http://www.homelessoutcomes.org.uk/About_the_Outcomes_Star.aspx)

Case Study: The Self-Sufficiency Matrix, the Netherlands
The Amsterdam Public Health Service has developed a Self-Sufficiency Matrix (SSM-D) tool to measure the self-sufficiency of vulnerable people, including homeless people, at intake and over time. Eleven areas of daily life (income, day-time activity, housing, mental health, physical health, family relationships, addiction, general daily skills, social network, social participation, judiciary) are given a self-sufficiency rating. This provides a quick, easy, standardised and reliable insight into the daily functioning of a client. The SSM-D tool is used by service providers for determining care needs and defining support. It is also used by policymakers and researchers as a tool for policy evaluation.

The matrix has already generated interest and exchange between European cities. The G4-USER Academic Collaborative Centre, a Public Mental Health alliance between Public Health Services and universities of the 4 major cities in the Netherlands, is currently developing a pilot project that will gather SSM data from different sources in a joint databank for analysis. The pilot will look at international comparisons of the characteristics and development of the target group and of promising interventions. The project is carried out in collaboration with the European Metropolitan network Institute (EMI).

Measuring homelessness
Effective homelessness policies demand a sound understanding of the extent and nature of homelessness. Innovative partnerships and working methods that cut across sectoral boundaries can greatly enhance capacity to collect data on homelessness and in turn to develop effective homeless policies. Innovation in this area may also involve developing the use of information technologies, including effective database systems. The EU policy framework has supported mutual learning and transnational exchange on homelessness data collection. The new social innovation framework should be used to build upon this work and support Member States to strengthen their capacity to measure homelessness in order to develop and maintain effective policies, using inspiration from those contexts where data collection is well established.

Case Study: Dublin Region Homeless Executive (DRHE), Ireland
The DRHE has developed a number of innovative practices to monitor homelessness. In terms of partnership, in 2011 they collaborated for the first time with the Central Statistics Office and homeless service providers in order to integrate a count of rough sleepers and the 2011 Census. This meant that for the first time people experiencing homelessness were included in the census. A dedicated thematic report on homelessness will be produced by the Central Statistics Office on homelessness in 2012. This is a significant development with considerable potential to strengthen the evidence-base informing homeless policy.

The DRHE has also developed a database called Pathways Accommodation and Support System (PASS) which can track the pathways of service users into, through and out of the homeless service system over time. The system can provide 'real time' information in terms of homeless presentation and bed occupancy across the Dublin region. This allows enhanced “live” collation of information on presentation to homeless services and service occupancy. The database is able to flag up when someone has been in homeless emergency accommodation for longer than 6 months. This is in line with the Government’s strategy to end long-term homelessness and limit stays in emergency accommodation by facilitating move-on to permanent solutions. The system thus helps to strengthen the link between policy and practice and to support progress towards policy objectives.

See Mutual Progress on Homelessness Through Advancing and Strengthening Information Systems project: http://www.trp.dundee.ac.uk/research/mpphasis/index.html
Employment

Social business

Social business has a long tradition in the homeless sector and there are numerous examples throughout Europe. Many of these social businesses focus on employability i.e. the capacity of an individual to progress towards employment, stay in employment or change employment. Work integration social enterprises (WISE) that generate employment and work experience opportunities for homeless people exist in a variety of European countries.

The social innovation agenda and specifically the EU’s Social Business Initiative should create opportunities to better understand the role and impact of social business in combating homelessness. It would be useful to evaluate the outcomes of different types of social business for different groups of homeless people. One important issue in this area is the question of “creaming”. There is concern amongst homeless service providers that social businesses can struggle to deliver for clients with the most complex needs because they are not profitable and thus compromise the economic aims of such structures. It would be useful to develop the evidence-base on this issue and to test innovative approaches that target this specific group. Mutual learning and exchange, as well as access to structural funds and microfinance, should be promoted in order to scale up effective models.

Innovative collaboration for employability

Collaboration with “atypical” partners is an innovative trend in creating employment and training opportunities for homeless people. This is an area of particular interest in relation to the EU strategy for Corporate Social Responsibility (CSR) which seeks to improve companies’ contribution to society’s well-being.

Case-Study: Work in Stations, EU Project

This is a pilot project on professional integration in and around European stations. It is financed by the European Globalisation Adjustment Fund (EGF). It aims to promote innovative forms of cooperation for work integration of socially excluded people around train stations in European capitals (Rome, Brussels and France). It has been developed with the notion that stations are both places where homeless and socially excluded people gather and important economic centres. The project brings together three stakeholders: railways companies, public employment agencies for the most disadvantaged and social service providers. These stakeholders are working together to define how cooperation can help homeless people to find a job in an environment that they are familiar with. The outcomes will be the creation of a network for this purpose, an analysis of what is possible in 3 local contexts and mutual learning and transnational exchange at EU-level.

Case-study: Piazza Grande, Italy

In Italy, Piazza Grande is a ‘type B’-cooperative. This means that it seeks to integrate disadvantaged people into the labour market. It provides employment opportunities for homeless people in a range of areas. These include a well known street newsguide ‘Piazza Grande’, a bicycle workshop and a tailoring workshop.

The role of work integration social enterprises (WISE)


See FEANTSA briefing paper: Supported employment for people experiencing homelessness


See FEANTSA Employment Starter Kit: How to Develop Employability Initiatives in Homelessness Services


COM(2011) 681 final
The EU’s social innovation framework could help develop the evidence-base on the effectiveness of this type of collaboration and to define criteria for success in terms of meeting the social needs of homeless people. The dissemination of good practice and support to scale-up effective approaches, as well as evidence about the limits of this type of intervention, is required.

**Case-Study: Pret à Manger Simon Hargraves Apprenticeship Scheme, UK**

Pret à manger is a UK sandwich retailer. In the framework of CSR, it has established The Pret Foundation Trust (PFT) which aims to alleviate poverty in the UK, focusing on homelessness in particular. The PFT is funded by donations from sales, donations from customers and fund-raising activities. Under the Simon Hargraves apprenticeship scheme, organizations working with homeless people and ex-offenders can refer service users to participate in a three month paid work placement at one of the chain’s branches. Pret à Manger selects participants in the programme who receive training and mentoring to support them in the placement. Participants receive a normal salary for the work they do. Travel and clothes costs are also covered. The PFT covers the £3,500 cost of putting an apprentice through the three-month scheme. Since the scheme began in 2008, it has provided placements for 70 people, and 85 per cent have remained at the firm as permanent employees. In 2011, nine charities were involved in the partnership: the Cardinal Hume Centre; Lyric; Shelter From the Storm; St George’s Crypt; St Mary-le-Bow; St Mungo’s; the 999 Club; the Astell Foundation; and Working Chance.

For more information see: [www.pret.com/pret_foundation_trust/pret_apprentices/introduction.htm](http://www.pret.com/pret_foundation_trust/pret_apprentices/introduction.htm)

**Health**

**Peer-working**

Peer-working is an innovative practice whereby people who have experience of homelessness are involved in supporting people who are currently homeless to address poor physical and mental health and drug and alcohol dependence. There are examples of peers working to tackle a broad range of health issues. Peers have a unique understanding of both the realities of homelessness and the barriers faced when accessing care. They also work within a more equal power dynamic than professional health workers. For these reasons, there is growing awareness that they can play a key role in improving health outcomes for homeless people. Being a peer worker can also provide professional experience, training and employability gains, personal satisfaction and self-confidence for people who have moved on from homelessness.

**Case Study, Find and Treat TB Peer Educator Project, UK**

London has the highest TB rates among Western European capitals. Rates are highest among hard to reach populations, including homeless people. Barriers to effective TB control for this group include delayed diagnoses, high levels of infectivity and drug resistance, immunosuppression, poor living conditions and poor treatment adherence leading to onward transmission and outbreaks. Homeless people experience poor access to health care and may delay seeking treatment because TB symptoms are concealed by lifestyle factors. TB in homeless persons therefore more frequently progresses to advanced and infectious forms of disease before it is diagnosed.

Barriers to treatment can be mitigated by the use of mobile screening. The implementation of a London Mobile X-ray Unit (MXU) has improved identification levels. However, there has been an ongoing problem that a high proportion of cases referred to local tuberculosis services for confirmation of diagnosis and treatment do not engage successfully with follow up care. In response to this issue, the Department of Health established Find & Treat; a pan-London health and social care project that works alongside the MXU and frontline services to tackle TB in hard-to-reach groups. Find & Treat introduced the TB Peer Educators project in January 2008. The project recruits, trains and supports former TB patients with experience of homelessness and/or drug and alcohol use to
work as peer educators. Their status as peers who have had similar experiences allows them to effectively support understanding of the importance of screening, of diagnosis and of adherence to treatment amongst hard-to-reach groups.

Over a 24 month period 10,190 hard-to-reach clients were reached at 332 screening sessions by Find and Treat. This led to 78 hospital referrals and 20 cases of active TB being diagnosed. A comparison of 39 screening sessions supported by a peer educator compared to 39 screening sessions at the same venues without a peer educator demonstrated that peer educators engender an average 20% increased screening uptake.

For more information see: www.findandtreat.com

There is a need to develop and collate the evidence surrounding the benefits of peer working to support health outcomes for homeless people. This includes developing robust theoretical frameworks to underpin evaluations of effectiveness. Successful models should be scaled up through appropriate channels.

One challenge for peer working is maintaining the right balance between the capacity to act as a peer and the promotion of professionalism. This could be a useful area of focus in terms of testing and refining peer working models.

Another interesting dimension of this type of innovation is the potential reduction in health service costs that arise from peer workers’ supporting homeless people to use healthcare effectively. For example, expensive accident and emergency admissions can be reduced due to upstream engagement with primary healthcare services to better manage health problems.

Lastly, whilst peer-working has been mostly developed to help respond to health needs, it can also play a valuable role in terms of social support for people moving on from homelessness and its potential in this sense merits further attention in EU contexts.

**Innovative use of communication technologies**

Innovating with communication technologies to respond to the unmet health needs of people who are homeless is a growing area of practice that could be better understood by policymakers and practitioners. Mobile phones, email and other communication tools such as Skype and social media could support better health outcomes for homeless people.

Many homeless people use mobile phones and there is growing interest amongst health workers in how this can be capitalised upon to improve access to information and services. Mobile phones could potentially be used by health care providers to disseminate information to homeless people, to enhance communication between homeless people and service providers, and to increase access to prevention, intervention, and aftercare services. Mobile phone technology can also be used to collect data about homelessness and to engage the general public in outreach services and the identification of health emergencies amongst homeless people.

E-health tools may also have potential to support responses to the health needs of homeless people. One example is psychiatric telemedicine through Skype, allowing patients to speak to a psychiatrist through videoconferencing for free. At the moment, there is little evidence of effectiveness of this type of technology for homeless people in Europe. There are however local and grassroots innovations in this area.

The social innovation agenda could help evaluate the innovative use of communication technologies in meeting the health needs of homeless people. Like peer-working, the innovative use of communication technologies could also be developed to needs beyond health.

**Cross-sectoral and mobile working**

Working in partnerships across sectors and breaking out of traditional service settings are important innovations to overcome barriers of access to health services for homeless people. Cross-sectoral working involves bringing together professionals from the different areas where homeless people have needs (e.g. health, social and housing sectors) in order to deliver holistic care.

It is increasingly recognised that hospital admission and discharge are key moments in homeless pathways. Too often, homeless people are discharged back to homelessness and the opportunity to facilitate a sustainable engagement with services and an exit from homelessness is lost. One innovation that could be tested is the integration of social work into accident and emergency settings. This would provide a point of engagement for homeless people in crisis and could lead to improved outcomes upon discharge. A range of innovations, including protocols and modes of cooperation regarding admissions and discharge procedures are possible and best practice should be developed and shared in this area.

Overall, there is much scope for social innovation to support the development, testing and dissemination of effective responses to the health needs of homeless people.

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**Case-study, Assertive Community Treatment, New York**

One example of cross-sectoral working in the homeless sector is the Assertive Community Treatment (ACT) model used in the framework of the Pathways Housing First service model, developed in New York but increasingly implemented in Europe. The model provides immediate access to mainstream housing for homeless people who have spent long periods in homeless shelters and/or on the street and who have complex needs including severe mental illness and problematic drug and alcohol use. A support package is provided to re-housed people, which includes an ACT team. The ACT team is composed of a team leader who coordinates the services provided, a part-time psychiatrist, a part time doctor or nurse-practitioner and a full time nurse. They work alongside a qualified social worker, usually with specialist knowledge of mental health, and specialists in supported employment and drug and alcohol treatment as well as an administrative assistant and a peer worker. The ACT team provides intensive support, typically with a ratio of one staff member to seven service users. It is a mobile team, so provides support to the person at home or in another agreed meeting place. Using this model, Pathways Housing First has been able to deliver unprecedented levels of success in terms of stably housing homeless people with very high support needs.

For more information see: [www.pathwaystohousing.org](http://www.pathwaystohousing.org)

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**Case-study, Street Nurses, Brussels, Belgium**

Les Infermières de la Rue provides nursing care to improve health and hygiene amongst rough sleepers and people staying in shelters in Brussels. They aim to decentralize health care and bring it directly to homeless people in order to tackle barriers to access and engagement. They work with homeless people to promote self-esteem and recognition of health and hygiene issues. They raise awareness about health and social services, provide treatment if needed and create a link to mainstream health services. They engage with homeless people in such a way as to foster self-esteem and willingness to tackle health needs. In addition they provide training on health issues to professionals working with homeless people. The organization aims to create a network that can monitor and support homeless people by engaging relevant actors around the person, including medical and social staff, cleaners, shop security personnel and others.

For more information see: [www.infirmiersderue.be](http://www.infirmiersderue.be)

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28 Homeless Link and St Mungo’s (2011) Improving Hospital Admission and Discharge for People who are Homeless, London
Housing:
The European Consensus Conference on Homelessness established housing as an important area for social innovation on homelessness:

“There is considerable scope for social innovation in the area of homelessness. The jury suggests that this approach could be used to further explore and develop ‘housing-led’ approaches to ending homelessness and calls in particular for testing of the ‘Housing First’ service model in European contexts.”

Housing-led describes policies and practices that see permanent housing solutions as the first response to situations of homelessness. As well as housing, they involve support to sustain housing and live independently. Housing-led solutions may also focus on prevention of housing loss to avoid homelessness occurring in the first place. The EU’s social innovation agenda should support the development and implementation of effective housing-led approaches.

Housing First
The Housing First model operates differently to “staircase” or “continuum of care” services, which are the dominant type of homeless service in Europe and which consider stable housing as the end goal in the reintegration process. In staircase services homeless people, particularly those with complex support needs, move through various stages in different residential services before becoming “ready” for housing. The Housing First model is innovative because it immediately provides homeless people with secure housing. It also ‘separates’ housing and support, meaning that homeless people are immediately given secure housing without being required to participate in any preparatory process. In addition, homeless people live in the housing provided by a Housing First service with very few conditions regarding their engagement with support services. Housing First services do provide substantial support services. However, engagement with support is not a condition for accessing or maintaining housing. Nonetheless, such support is offered in an assertive and consistent fashion.

Considerable progress has been made in recent years in terms of the development, testing and scaling-up of Housing First in different contexts internationally. The innovation process can be considered to be at different stages in these different contexts. For example, in the US, Housing First can be considered as a mature social innovation. It has been developed, broadly evaluated, proven to be effective and scaled-up and mainstreamed as an important element of homeless policy.

Case-study: Housing First as a mature social innovation in the USA
In the USA, the Housing First approach was originally developed by homeless service providers to meet the housing and support needs of the long-term homeless with mental illness and co-occurring substance abuse. During the 1990s, it was increasingly apparent that the needs of these people were not being adequately met by existing provision. Housing First was therefore pioneered by the organization Pathways in New York. The Pathways model demonstrated high degrees of success in both housing and supporting long-term homeless people with multiple and complex needs directly from the street or shelter. The model therefore attracted considerable interest and was replicated and adapted. It attracted attention from policymakers and the research community. Subsequent testing and evaluation has generated a body of evidence demonstrating that it can generate improved outcomes for beneficiaries in a number of areas, most notably residential stability.

Evaluation has also shown that Housing First services can be very cost effective. Being housed in a Housing First programme leads to considerable reductions in the use of expensive emergency services (e.g. accident and emergency departments, ambulances, psychiatric hospitals, criminal justice system, shelters etc). This engenders savings, which can offset or even exceed the costs of providing Housing First. Pathways refers to this as “doing more with less”.

As an evidence-based practice, Housing First has been broadly supported by the Federal government and mainstreamed into homeless policy in the USA, notably with the introduction of the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009. The current phase is one of ongoing implementation, evaluation, adaptation to different target groups within the homeless population and transfer to other policy contexts.

30 See www.hudrehre.info/hearth/
At European-level, Housing First is currently being developed and tested. Housing First Europe is a Social Experimentation project funded in the framework of the PROGRESS programme of the European Commission. It is at present evaluating Housing First projects in 5 test sites across Europe (Glasgow, Amsterdam, Copenhagen, Budapest and Lisbon). The project includes a mutual learning strand which brings together different stakeholders to exchange on Housing First in the EU and beyond. It will deliver conclusions in 2013 and these will lead to greater clarity on the effectiveness of the approach, as well as its essential elements. In addition, a major social experimentation based on the Pathways Housing First model is also being implemented in France.

The programme was launched by the Minister for Sport and Health and the Secretary of State for Housing in 2010, following recommendations made in a report on health and access to treatment for homeless people. It is carried out in collaboration with service providers and a research team. The overall objective is to test the Housing First approach before deciding whether and how to roll it out more generally for the target group.

For more information see: [www.developpement-durable.gouv.fr/Programme-Chez-Soi-d-abord.html](http://www.developpement-durable.gouv.fr/Programme-Chez-Soi-d-abord.html)

In some EU contexts, Housing First is no longer being developed and tested but is a well-established element of homeless policy. Finland has mainstreamed the Housing First approach in its national homeless strategy. The strategy aims to eliminate long-term homelessness by 2015 and uses Housing First as a mainstream organizing principal for housing and support services. The first phase of the programme was implemented between 2008 and 2011. It delivered 1697 new dwellings in supported housing for homeless people – exceeding the target set. A second phase has been launched for the period 2012-2015. The Finnish experience has proved highly influential in Europe.

As Housing First has been transferred, adapted and scaled up, several different service forms have appeared. These services all share a similar philosophy but are actually quite diverse. The three main groups of Housing First service are:

- **Pathways Housing First (PHF)**

  PHF works with long-term homeless people with complex needs including severe mental illness and problematic drug and alcohol use. It provides independent housing with security of tenure immediately or as soon as possible. This is accompanied by an intensive package of floating support (see ACT team above). Housing is provided through the mainstream rental market or through social housing.

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31 See [www.servicestyrelsen.dk/housingfirsteurope](http://www.servicestyrelsen.dk/housingfirsteurope)
• **Communal Housing First (CHF)**
  CHF is similar to PHF except that the housing offer consists of apartments or single rooms with security of tenure provided in buildings reserved for formerly homeless people. The unit has often been specifically modified or designed for this purpose. Support and medical services may be provided on-site or close by rather than uniquely through floating services.

• **Housing First ‘Light’ services (HFL)**
  HFL is delivered by using ordinary private rented or social housing and a team of mobile support workers. It provides independent housing with security of tenure immediately or as soon as possible. It may also be used to sustain tenancies and prevent homelessness occurring for people who are considered to be at-risk. HFL provides low-level mobile support services designed to help promote housing stability. It does not directly provide the more intense forms of health services provided by PHF. Instead, a service brokerage model is used to provide connections to mainstream services. The target group of HFL is broader than PHF or CHF and includes people with much lighter support needs. Housing First Light describes a broad range of services, some of which predate and have developed quite independently of the Housing First model but which are underpinned by a similar philosophy.\(^3^3\)

The EU social innovation agenda should continue to support the development and evaluation of different forms of Housing First. The evidence about the effectiveness of Housing First is strongest in the area of promoting housing stability and in relation to its cost-effectiveness for the part of the homeless population with the most complex support needs. A clearer picture is required about how Housing First is able to meet broader social and health needs and how it can be implemented for other groups of homeless people. The EU should support the scaling up of effective approaches through both the ERDF (for infrastructure) and the ESF (for support).

There are useful examples of the structural funds being used to scale up Housing First. For example, the Brittany Region in France has integrated into its Operational Programme a 2 million Euro envelope for housing interventions for marginalized communities, including homeless people. These housing interventions must be compatible with the Housing First approach and must be part of integrated approach to inclusion.\(^3^4\) Such experiences should be shared and reviewed at EU level in the context of ongoing mutual learning and exchange. The forthcoming legislative package on the structural funds for the period 2014-2020 must maintain the possibility of this type of action and build on the successes of the current period.\(^3^5\)

### Preventing loss of housing

Targeted prevention of homelessness involves intervention at moments in a person’s housing pathway when they risk becoming homeless. Key moments of risk include:

- discharge from an institution (e.g. hospital, prison, or state child care);
- family breakdown;
- eviction or foreclosure.

Targeted prevention has been an area of considerable innovation as understanding of people’s pathways into homelessness has evolved. For example, homeless and housing providers have developed a range of innovative services to intervene when tenants are threatened with eviction. Early intervention to prevent housing loss avoids the experience of homelessness for the individual or household, as well as the associated public expenditure.

**Case-study, Centre for Secure Tenancy, Austria**

FAWOS prevents evictions in Vienna through housing advice and financial assistance to tenants. The aim is to avert evictions for households facing an immediate risk. The service is provided by People’s Aid Vienna and the Municipality of Vienna and was created in 1996. The frontline staff are social workers and legal experts. One of the goals of the intervention is to reduce the pressure on homeless services in the city and to avert the costs incurred for the local authority if people become homeless and stay in hostels for long periods of time. Since 2000 a system has been in place whereby the local courts inform FAWOS automatically at the beginning of an eviction procedure. FAWOS is then able to contact the tenants concerned and offer legal and budgeting advice, mediation with landlords, assistance in drawing up a repayment plan and financial aid.

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As well as rent, energy costs are an important part of overall housing costs. Rising energy prices can place households under pressure and play a role in the loss of housing. If electricity is cut off due to arrears, housing may become uninhabitable. Innovation can contribute to tackling this and thus help prevent homelessness. For example, a project by the unemployment service Moerser Arbeitslosenzentrum e.V in Wesel, North-Rhine-Westphalia has developed an early warning system for energy debts, which is combined with enhanced cooperation between tenants, landlords, energy companies and social service providers in order to facilitate early intervention.

In the context of the crisis, there is also heightened interest in some Member States such as Spain and Ireland regarding targeted measures to support homeowners facing mortgage arrears and foreclosure proceedings that can result in homelessness. This could be a useful focus for innovation in those countries engaged in financial assistance packages in the context of the crisis, which see large increases in homelessness amongst the middle class. Some innovations have been developed and their transferability could be evaluated.

A range of targeted prevention measures have been developed across Europe and internationally. The EU’s social innovation agenda could support evaluation methodologies for targeted prevention of homelessness. One challenge is to demonstrate the cost implications of preventing homelessness. Social experimentation could be very valuable in this respect. There is a need to analyze existing practices in order to identify what works in the following areas:

- identifying people at risk of homelessness,
- providing housing advice and tenancy support to these people;
- providing targeted financial support to avert homelessness.

Working methods in supported housing

Permanent housing solutions for vulnerable people necessitate a successful integration of housing and support. Working methods in this area are therefore an area of growing importance in homeless policy. This is framed by the influence of the Housing First approach and the broader deinstitutionalization agenda that involves a shift from institutional to community-based services. How best to organize adequate and flexible support to vulnerable people in their home is a major challenge for policymakers and other stakeholders.

Of course, innovation is already taking place in this context. A number of evidence-based practices are well established in certain contexts. The Assertive Community Treatment (ACT) method described earlier is one example. Another is Critical Time Intervention. Critical time intervention (CTI) is an empirically supported psychosocial intervention, intended to reduce the risk of homelessness by enhancing continuity of support for individuals with severe mental illness during the transition from institutions to community living.
Such models need to be further tested in European contexts to improve understanding of the effectiveness of different forms and combinations of housing and social support for different groups. Knowledge needs to be better shared in order to support transfer and scale up of effective measures. Cross-sector exchange with supported housing providers for elderly and disabled persons would also be of added value. The structural funds should support scaling up of effective working methods in supported housing.

Lastly, homeless people with different levels of need require different types of support. A key area for future innovation is to develop or refine needs assessment tools and translate this into adapted support.

**Making housing available**

The availability of affordable, accessible housing of adequate quality is a precondition for ending homelessness. Innovation in this area is therefore important to delivering effective policies.

Innovation is required to increase the accessibility for homeless people of existing affordable housing options. Although the availability and quality of social housing varies considerably, it is often the most important source of affordable, adequate housing. However, a number of barriers have been identified that prevent homeless people accessing social housing. Allocation systems for social housing do not necessarily prioritize homelessness, or particular forms of homelessness as a criterion for allocation. Some homeless people, including those with a history of rent arrears or nuisance behaviour, a criminal record, or particular support needs can have problems accessing social housing. Developing innovative modes of cooperation between social housing providers, homeless services and public authorities can overcome this problem.

The private rented sector can also play a role in tackling homelessness. Whilst private rental markets are unlikely to provide enough adequate and affordable housing to tackle homelessness on their own, they can be an important source of housing. Innovative practice can help to “socialize” the private rental sector so that it can provide access for homeless people to affordable, housing of adequate quality. One example is the Social Rental Agency (SRA) model. This is well developed in a number of contexts, notably Belgium and France. It provides an innovative response to the lack of affordable decent housing available to homeless people. It should be further explored as part of homeless policies in other European contexts.

**Case-study, Dublin Social Housing Nominations Protocol, Ireland**

In early 2012, a new nominations protocol was agreed between the four Dublin Local Authorities and members of the Irish Council for Social Housing (ICSH). The aim is to maximize the number of social housing units available to homeless households in the Dublin region. Procedures and timeframes have been adopted to provide clarity and consistency for all parties and it is hoped that these will improve efficiency in the process therefore reducing administrative costs. The protocol aims to reduce the number of empty social housing units and ensure timely nominations and allocations with a view to reducing time applicants spend on the waiting list. The protocol ensures that there is clear and consistent information available to applicants regarding the nominations process to housing associations. It applies to all new lets and re-lets and will be reviewed after six months.

**Case-study, the SRA model, Belgium**

In Belgium, SRAs lease dwellings from private landlords, typically for periods of 9 years, in order to sublet them at an affordable rent to tenants with low-incomes that face difficulties accessing housing through other means. SRAs guarantee payment of rent and maintenance of the physical quality of the housing in order to incentivise landlords. They negotiate over rents and are able to offer lower than market rates because the landlord’s revenue is guaranteed over a long time period, because they offer a complete property management service and because they can subsidise and carry out renovations. Having started out as grassroots social innovations, SRAs are now an established policy tool in Belgium.

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37 Place, N, Teller, N, Quilgars, D (2011), *Social Housing Allocation and Homelessness*, EOH Comparative Studies on Homelessness 4, December 2011, No. 1

38 See forthcoming FEANTSA Good Practice Guide on SRAs
As well as increasing accessibility of existing affordable housing to homeless people, social innovation can play a role in increasing the overall supply of affordable housing. Having a sufficient level of affordable rental housing plays a key role in stabilizing housing markets and should therefore be a priority for housing policy. The housing bubbles that developed in countries such as Spain and Ireland have had a macroeconomic impact within the Eurozone. The EU’s new economic surveillance measures highlight the need to have policies in place that prevent such bubbles. Financing, developing and maintaining affordable rental housing should therefore be a key focus of the EU’s social innovation agenda.

One innovative development to increase the permanent housing options available to homeless people is the transformation of shelters and hostels into supported housing units. This has happened on a large scale in Finland, in line with the strategy to eliminate long-term homelessness between 2008 and 2015. Shelter accommodation is being abolished in Finland and replaced with permanent supported housing solutions. This objective has been underpinned by a critique of hostel and shelter accommodation due to lack of privacy, insecurity associated with a temporary solution, low levels of professional support and the fact that many users experience a “revolving door” with no exit from homelessness. It has also been influenced by the evidence that permanent housing solutions are most cost-effective than temporary hostels when ancillary costs such as use of hospital services are taken into account. The oldest hostel in Helsinki, a 236 bed institution which was run by Salvation Army closed its door in February 2011. It is currently being renovated into a supported housing unit with 80 independent flats. The EU’s social innovation agenda could build upon this type of experience in order to develop best practices and scale-up effective approaches to transformation, with support from the structural funds, particularly the ERDF.

A further innovation that can increase the affordable housing pool available to homeless people is activation of vacant buildings. Bringing vacant buildings into use can incur numerous spin-off benefits including urban renewal.

Case-study: Conversion of a church into supported housing units, Münster, Germany

In Münster, a conversion project has started in 2012 which makes innovative use of a former church by transforming it into a housing project with annexes creating 34 new flats for singles and couples and a number of new office rooms. 8-12 apartments will be allocated to single homeless people aged 60+. The project, carried out by a municipal housing company in cooperation with the organisation Förderverein für Wohnhilfen, is converting the church into adapted independent flats and communal spaces. The service users have been involved in the design of the apartments, which are barrier-free in order to respond to the health needs of the target group. Support will be provided to the residents in order to facilitate independent living. This includes legal support, the coordination of outpatient care and nursing services and the overall process of managing the tenancies and social integration. The project seeks to promote and share the knowledge gained through its implementation within the social and housing policy communities, with a view to stimulating and informing further permanent housing projects for disadvantaged groups.

This innovative approach not only provides a response to homelessness but contributes to managing a new problem of empty and unfinished developments. Innovative partnerships could play a role in activating suitable vacant properties in diverse European contexts e.g. working with retailers to generate above-shop housing, working with the church to activate empty buildings/unused land and working with large companies that have important real estate portfolios such as railway companies. It is important to note that the notion that there is an ample supply of surplus housing to meet unmet housing needs is somewhat oversimplistic. Whilst some vacant properties can be used to house homeless people, their location and profile is not always appropriate. The challenge is therefore to activate the right kind of buildings in the right locations in line with housing need. In the wake of the collapse of the housing bubble
and the financial crisis in Ireland there have also been some attempts to mobilise vacant housing. Via the National Asset Management Agency (NAMA), social housing companies have taken on some unfinished estates and vacant properties as well as undeveloped land. This is being developed as social housing, including for homeless people.

A model which is gaining increasing attention as a potential means of generating affordable housing is the community land trust (CLT). Originally developed in the US in the 1970s, this is a mechanism for delivering affordable housing that empowers local communities and provides democratic management of community assets. Formed as non-profit voluntary-led organizations, CLTs acquire and manage land with the intention of holding it in trust and developing affordable housing and other community amenities. It could be useful to develop and evaluate CLTs as a means to provide housing solutions for homeless people.

**Migration:**

Immigrants, particularly recent immigrants, are a significant and in many countries, increasing proportion of the clients of homeless services.

**Responding to new needs**

Homeless policies and services need to innovate in order to respond to new needs relating to the changing profiles of homeless populations. One area of particular relevance to the EU is the capacity to provide adequate responses to EU citizens who, having exercised their right to free movement, become homeless. The needs of this group can be poorly met by existing policies and services, and therefore should be an ongoing area of focus for social innovation. It is arguable that the EU, because of its promotion of free movement, has particular responsibility in this area. There are numerous examples of homeless services that have developed innovative responses to the needs of this target group, which should be further evaluated and disseminated.

**Case-study, Stockholm Crossroads project, Sweden**

The Crossroads project, run by the City Mission NGO addresses social exclusion and homelessness among EU migrants. It is a three-year project co-financed by the European Social Fund, the National Public Employment Service and Stockholm City, working with the City Mission and Salvation Army. The aim of the project is to provide responses to the needs of a growing number of homeless EU citizens in the city. Opened in March 2011 in central Stockholm, it provides free information, training courses, discussion groups and counseling services as well as basic facilities such as seating areas, meals, showers and laundry facilities. Information and advice services focus on legal issues, housing, employment and training. In addition, when service users wish to return to their country of origin, the centre supports this.

Whilst the centre is not a new type of homeless service, it is innovative in that has been specifically tailored to respond to the unmet needs of homeless EU migrants in Stockholm. There is a particular focus on taking account of and adapting to service users’ cultural backgrounds. Interpretation is provided and the project creates opportunities to improve both Swedish and English. The service has a flexible, needs-based approach. For example, it has become clear that few users wish to return to their country of origin. The project has therefore increased its emphasis on improving the conditions for clients in Stockholm. The project is a good example of cross-sectoral working, with a range of services brought together in a one-stop-shop.

40 See: http://nws.eurocities.eu/MediaShell/media/Stockholm.pdf
41 See: http://www-old.eurocities.eu/Case%20Study_Stockholm.pdf
As demonstrated by the case-study above, innovation in this area is often about adapting existing modes of service delivery to new target groups. This can require innovative partnership and cross-sectoral working, as well as a range of measures to tailor services.

One innovation that is advanced by some organizations working with homeless EU migrants is “reconnection”. The aim of reconnection services is to assist homeless EU citizens to return to their countries of origin. Reconnection services are well developed in London, and have been rolled out to other parts of England.

The organisation Thames Reach runs a “supported return” service in London called the London Reconnection Project. It assists vulnerable rough sleepers from Central and Eastern Europe to return to their home countries of Poland, Slovakia, Czech Republic, Lithuania, Latvia, Estonia, Romania, Bulgaria, Slovenia and Hungary. Thames Reach offers advice about return, as well as information on support services upon return. It is funded by central government. Barka UK, which was established in 2007, works with local authorities in London and other parts of England to assist rough sleepers to return to Poland and other countries in Central and Eastern Europe. Barka is also active in Dublin and Copenhagen. It is originally a Polish homeless service and supports connection with services, and/or family and informal support networks upon return. It can refer people onto its own services in Poland. The organization achieves its objectives by carrying out outreach work in the UK as well as running day centres where advice is offered regarding reconnection. It can also be involved in administrative steps such as obtaining a passport and organising transportation.

Voluntary return can provide positive outcomes for some homeless people, particularly if they are unable to find employment and are ineligible for benefits. However, there is currently a lack of clarity at EU level about the extent to which reconnection services actually enable vulnerable rough sleepers to make fully informed choices. Beyond whether or not people return, there is a lack of evidence about the outcomes of these programmes. It is therefore unclear how effective and of what quality the support services that people return to are. The EU’s social innovation agenda could provide information of this type through more thorough analysis of reconnection services, taking into account improvement in quality of life and empowerment of homeless people. This would be of considerable added value given the growing interest of policymakers in this type of service.

Participation

Participation refers to the effective involvement of people experiencing homelessness in service provision, as well as in decision making processes affecting services. It is an increasingly important focus of homeless services and policies. There is a shift away from notions of homeless people as passive consumers of services towards a view that they are key stakeholders whose views are of central importance. Participation can strengthen policies and services by using the unique insight of homeless people to inform effective design and delivery. Participation can also help create an empowering environment. Empowerment of homeless people is one of the central outcomes of participation. The development, testing and sharing of effective methods to promote empowerment and participation has considerable potential to enhance homeless policies and services.

Working methods to promote participation in services and policies

Meaningful participation requires working methods that facilitate the input of service users into policies and services which affect them. This is an area where homeless services have innovated considerably.
Case study, Shared Solutions, UK

Scottish Homelessness Involvement and Empowerment Network (SHIEN) is facilitated by Glasgow Homelessness Network (GHN), and works across Scotland to create a culture of innovation and improvement in participation. It builds the capacity of services and service users for effective participation by developing and sharing tools, knowledge and resources. Shared Solutions is a tool developed for SHEIN.

Shared Solutions is a collaborative process for events that has been used in a range of local and national homelessness policy processes in Scotland. It brings together key stakeholders in homelessness (service users, service planners, managers, frontline staff, and policy makers) as equals in the process of identifying potential solutions to key issues. Shared solutions events take place across 5 local communities in Glasgow on a 6 monthly basis, and are a key element of local policy-making. They also take place at national level.

Participants attending Shared Solutions events are assigned to round tables that contain a mix of perspectives and experiences. Through a tool called ‘open space technology’, participants are invited to air all issues and challenges in an unprescribed, broad and far-reaching fashion. Priorities from across each of the roundtable discussion groups are agreed and collated into a single list. Anonymous vote casting determines the substantive discussion sessions for the day from this list. It would be useful to increase the evidence-base regarding effective participation strategies and to support the transfer of effective policies.

Anonymous vote casting determines the substantive discussion sessions for the day from this list. At this second stage, participants are asked to be solutions-focused in their discussions. This process, interspersed with entertainment, ensures that the agenda is inclusive, energetic and fully determined by stakeholders. Shared Solutions events are not one-offs but part of an ongoing policy process. The methodology is a useful example of how to integrate the views of people with experience of homelessness alongside those of other stakeholders, within a meaningful context.

Personal empowerment and choice

Empowerment involves strengthening the capacity to make informed choices and transform these choices into desired outcomes. Structural engagement in the design and delivery of services and policies, as described above, is one way of engendering empowerment. It tends to involve homeless service users as a group. Homeless people can also be personally empowered (or not) by the extent to which they have choices about their own life, their engagement with services and their route out of homelessness. Personal empowerment as a means to improving outcomes for homeless people is an important and growing issue and a range of innovations have emerged in this area.

Case-study, Personalised Budgets, UK

Personalised budgets are one way of giving homeless people freedom and choice. This approach has been trialled in a number of contexts. One personalised budget pilot project working with long-term, entrenched rough sleepers in the City of London has been delivered by the organisation Broadway. The project was funded and supported by the City of London Corporation and Communities and Local Government (CLG) as part of their strategy to end rough sleeping. It was evaluated by the Rowntree Foundation in 2010, thirteen months into its operation. Fifteen long-term rough sleepers were offered a personalised budget of £3000 plus flexible, personalised support from a project co-ordinator. By the time of the evaluation, the majority were in accommodation or making plans to move into accommodation.

The rough sleepers were targeted because they were evaluated as being the hardest to reach using standard methods. They had been sleeping rough for between four and forty-five years. Participants were asked what they wanted to help them get off the streets. The co-ordinator provided individualised support which was structured around a clear action plan, specifying how money would be spent and the actions required of the co-ordinator, the person with the personalised budget, and others.

At an early stage, the budget facilitated people’s engagement with the project co-ordinator. This allowed for building of trust. In a second phase, the budget helped people to make the decision to move into accommodation. For example, they could buy items they wanted to make the move more comfortable and desirable. At later stages, the budget was used to help people to sustain accommodation – for example, by paying off small arrears or by buying gas, electricity or food when there were problems receiving benefits. The budget was also able to help people with future plans, for example by paying for courses.

A key factor of success of the project was the personalized service offered by the project coordinator. The target group had a history of non-engagement with conventional outreach teams, so a number of innovative approaches were introduced to differentiate the programme. These involved the rough sleeper determining the meeting place, one-on-one work with more time spent with each individual than is usual for outreach work, as well as the discussion and priorities being set by the service user.

For more information see: www.jrf.org.uk/publications/support-rough-sleepers-london

Homeless policies and services require innovation to empower service users and thus enhance their capacity to move on from homelessness. As demonstrated by the personalised budgets approach, this can deliver positive outcomes for groups of homeless people whose needs are not well met by existing provision. In this case, it concerned entrenched rough sleepers who can represent significant costs for public authorities. Personalised approaches such as the personal budgets programme should be more thoroughly evaluated in the context of the EU’s social innovation agenda. A social experimentation programme to robustly evaluate the impact of personalised budgets would be a useful initiative.
7. Recommendations

In order to support the fight against homelessness, and progress towards the EU’s headline target of reducing by 20 million the number of people living in poverty, FEANTSA makes the following recommendations on social innovation:

1. Progress on homelessness should be enhanced by the emerging EU policy framework on social innovation. Policymakers and other stakeholders at EU level and within Member States should consider homelessness as a key area of focus for social innovation. The thematic priorities presented by FEANTSA in this document should provide a reference in this context.

2. At EU level, all relevant policy instruments should enable the delivery of added value in the area of homelessness and enhance ongoing EU policy support and coordination on the issue:

   • The EUPSCI programme must support policy coordination, sharing of best practices, capacity-building, testing of innovative policies through social policy experimentation and scaling up of effective measures to tackle homelessness.
   • The Horizon 2020 programme should support research into innovative solutions to homelessness and feed into the ongoing development of evidence about homelessness in the in order to inform effective solutions.
   • The Social Business initiative should support the development and maintenance of innovative programmes to support those furthest from the labour market, including homeless people.
   • The Social Innovation Europe pilot should use the expertise of all stakeholders in the fight against homelessness and support exchange and mutual learning.
   • Current and future cohesion policy should provide an enabling framework that allows Member States to use the structural funds to scale up effective solutions to homelessness. This should include the possibility for Member States to use of the ERDF to provide social and health infrastructure, including housing and to use the ESF to promote social inclusion. The draft legislative package on Cohesion Policy 2014-2020, adopted by the European Commission on 6 October 2011 provides such an enabling framework. This possibility is also open in the current financing period (until 2013). Transnational learning and mutual exchange regarding effective use of the funds to fight homelessness through innovation should be developed to support Member States.
   • The Social Inclusion OMC and the European Platform against Poverty should continue to support policy coordination, mutual learning and transnational exchange on homelessness including social innovation, for example by organising peer reviews of innovative policies.

3. At national, regional and local level policymakers should plan how to support social innovation in the fight against homelessness, including make use of the instruments listed above. The key principals outlined in this document and summarised in the table below should be taken into account at the different stages of the social innovation process.
4. At national and regional level, possibilities to use the current and future structural funds to scale up effective innovations in the area of homelessness must be taken up. In the current funding period, the possibility has existed since May 2010 to use up to 3% of ERDF funding for housing interventions for marginalised communities (including the homeless) within the framework of integrated approaches. This possibility should be fully exploited for investment in innovative approaches such as Housing First and other housing-led solutions. The European Social Fund (ESF) can be used to promote active inclusion of people furthest away from the labour market, including homeless people. This can support innovation in the area of employment and homelessness. As regards the future structural funds, the Partnership Contracts to be agreed between Member States and the European Commission defining the priority areas for funding, must allow for the scaling up of effective innovations in the area of homelessness.

5. Public authorities, alongside other stakeholders in the fight against homelessness, should develop proposals for social experimentation projects to test potentially policy-relevant approaches to homelessness in the framework of the PROGRESS programme and the EUPSCI. In this context, policymakers should build on the experience and expertise of homeless service providers as innovators.

6. Homeless service providers should be supported by an appropriate financial and regulatory framework which allows them to innovate. This should include the possibility to EU funding including through the EUPSCI and structural funds. Policymakers should recognise and capitalise on the innovation of homeless service providers.

7. The European Parliament has adopted a Resolution calling for enhanced policy support and coordination on homelessness in the form of an integrated EU homelessness strategy. FEANTSA supports this call and recommends that supporting social innovation in the area of homelessness should be a central objective of this strategy. Social innovation is often hampered by insufficient knowledge of social needs; fragmentation of efforts and resources; poor diffusion; limited scale-up of good practices and weak evaluation. Focusing on social innovation in homelessness within the context of an integrated strategy would help overcome these problems by providing a strategic framework with a long-term perspective where resources could be usefully concentrated in consultation with stakeholders.

8. The Joint Report on Social Protection and Social Inclusion 2010 called on Member States to develop integrated national strategies to combat homelessness. This was also a recommendation of the European Consensus Conference on Homelessness. Furthermore, the support of integrated strategies at national level is the overarching objective of the EU homelessness strategy proposed by the European Parliament. At national level, social innovation in homelessness should be supported within the framework of an overall national strategy. This will facilitate involvement of stakeholders, maximise impact, minimise duplication and ensure added value for resources invested.
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To that effect, PROGRESS purports at:

- providing analysis and policy advice on employment, social solidarity and gender equality policy areas;
- monitoring and reporting on the implementation of EU legislation and policies in employment, social solidarity and gender equality policy areas;
- promoting policy transfer, learning and support among Member States on EU objectives and priorities; and
- relaying the views of the stakeholders and society at large.

For more information see:
http://ec.europa.eu/employment_social/progress/index_en.html

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