

Lars Benjaminsen & Ivan Christensen (2007)

Hjemløshed i Danmark 2007: National kortlægning. SFI: 07: 22. (Homelessness in Denmark 2007: national survey).

København: SFI – Det Nationale Forskningscenter for Velfærd, pp. 159 EUR 22.

This report presents the results of the first national survey on homelessness in Denmark, commissioned by the Minister of Social Affairs at the end of 2006 and carried out by the Danish National Centre for Social Research during week six of 2007.

Benjamin and Christensen begin their report with a theoretical discussion, including different ways of defining and explaining homelessness. A point of departure is taken in current Danish research with description of three overarching ways of defining homelessness as identified by Järvinen¹. The first definition is based on the use of institutions and services intended for the homeless. This definition is criticised because it does not separate the phenomenon of homelessness from the persons of the homeless, so that homelessness becomes defined as an individual characteristic rather than a living situation. Secondly, homelessness is defined by reference to standard of living; in relation to poverty or to a minimum housing standard for instance. This type of definition is criticised on the basis that it reflects a normative view of what constitutes a 'home' and what the majority of the population considers to be a 'good, decent life'. Thirdly, homelessness is defined as a 'lifestyle' (street children, bag people (*posefolk*) or beggars). These definitions of homelessness as living outside (the so-called) normal society also become normative; the homeless embody norms and values that differ from those of the majority population.

Benjaminsen and Christensen stress both the necessity of drawing up a definition that it is possible to use operationally in quantitative empirical studies, and the importance of defining homelessness as a complex phenomenon of interacting factors on different levels. The discussion of definitions is in line with the theoretical understanding of homelessness which the authors argue is to be understood as an

¹ Järvinen, M. (1992): Hjemløshetsforskning i Norden. I Järvinen, M. and Tigerstedt, C. (eds.) Hjemløshet I Norden. Helsingfors: NAD-publikation nr 22.

outcome of interacting social processes on different levels. They present a table of different risk factors that cause and maintain homelessness, identified on structural, institutional, interpersonal and individual levels.

A thorough description of the method and empirical definition applied in the survey is provided; it is partly based on the ETHOS classification developed by FEANTSA and partly on definitions used in Swedish and Norwegian surveys. In the Danish definition, a person is homeless if he/she does not have a dwelling or room (owned or rented), but depends on temporary accommodation, or lives temporarily and without a contract with family or friends. People with no place to stay on the following night are also defined as homeless. This definition has been operationalised in seven situations. Informants for the survey were emergency shelters/temporary accommodation (§ 100 *botilbud*), non-custodial care, prisons, detention centres, municipal social service authorities, community homes, treatment homes for addicts, psychiatric clinics, police, outreach activities for homeless persons, voluntary organisations, self-help groups, reception centres and drop-in centres.

The survey identified 5,253 persons who were in a situation of homelessness during week six of 2007, which amounts to 0.1% of the Danish population. Of these, 552 persons (11%) were rough sleepers (persons sleeping on the streets or in stairwells); 2,269 people (43%) were sleeping in emergency shelters and the like; while a further 20% were sleeping in the homes of friends/acquaintances or family. The authors assume this number to be underestimated since persons in this category do not always come into contact with the social services. A majority of the homeless persons (80%) are men.

About half of the homeless population in Denmark is of the age group thirty to forty-nine but a relatively large proportion is made up of younger people. About a quarter of the homeless are between eighteen and twenty-nine years of age; half of the homeless population had been homeless for less than one year, while a quarter had been homeless for more than two years. There is some over-representation of long-term homelessness among the rough sleepers. A quarter of the homeless had an immigrant background, which is a clear over-representation when compared to the share of immigrants in the entire Danish population (9%). In the survey 115 children, the majority of whom were staying with their parents at family institutions, were reported as being homeless,

The majority of the homeless exist on social assistance or early retirement pensions, with about half of the homeless population receiving financial social support. Almost one-tenth, mostly younger people in urban areas, had an income from paid labour. More than one-third of homeless persons were registered in the Copenhagen area, while another 22% registered in suburban municipalities. The capital also had the highest share of rough-sleepers.

Questions were asked about health status as well as alcohol- and drug-addiction. The informants reported that 30% of their clientele (and 36% of rough sleepers) suffer from some type of mental illness; the informants were not asked to specify the type of complaint, which means that it does not have to be a diagnosed condition. Almost one-quarter (24%) of the homeless are reported to suffer from one or more somatic complaints. In both reported mental illness and somatic illness there was a high level of non-response. A high proportion of the homeless (69%) were reported to have problems with the abuse of alcohol and/or drugs, but the proportions differ between the particular groups, with the highest among the rough-sleepers. One-fifth of the homeless were reported as 'double diagnoses' (such as alcohol and/or drug addicts also suffering from some mental illness or somatic complaint).

A question was included on the cause of a person's homelessness. The authors comment that the answers to this question do not give a complete picture of the complex causality between structural and individual factors that may lie behind a situation of homelessness. Furthermore, since the informants are not the homeless persons themselves, the responses merely reflect the perceptions of the informants. In addition, nothing is said about the homeless person's background. Addiction to alcohol or drugs is the highest ranked reason given for homelessness (33% and 31% respectively). Mental illness is given as a reason for 20% of the homeless. Structural reasons, such as unemployment and housing shortage, score lower (16% and 11% respectively). A further 17% were homeless because of eviction.

In their concluding section, Benjamin and Christensen summarise the most important findings and comment on conditions that need to be addressed along with the need for social interventions. They stress the importance of looking at a combination of individual and structural explanations to grasp the complexity of homelessness.

The large proportion of relatively young persons (almost one-quarter are under the age of thirty) indicates that there is a continuous inflow to the group. The authors emphasise that it is important to pay further attention to the factors behind this development. Another conclusion is that besides the need for housing, a large proportion of the homeless population, are in need of different kinds of treatment and support for alcohol and drug abuse, as well as for mental illness and/or somatic complaints, and that in dealing with the problems of homelessness there must be a combination of treatment, social support and housing support.

This survey, with its relatively wide definition of homelessness, gives a broader picture of the state of homelessness on a national level than studies which focus only on users of institutions for the homeless. The adaptation to (parts of) the

ETHOS definition also makes it possible to make some international comparisons. At the same time, as Benjaminsen and Christensen point out, this type of survey is afflicted by a number of limitations and uncertainties.

For one, causal relations are hardly captured in this type of cross-sectional study, even though a hint of the complexity of homelessness is given. Another uncertainty stems from the methods used in this type of survey. People with frequent contacts with social services are more easily reported than persons moving around and staying temporarily with relatives and friends. This affects the estimated shares of persons with different kinds of social problems².

Finally, homelessness is a politicised field of interest with actors (such as social authorities, voluntary organizations and politicians) struggling over definitions, explanations and solutions. Actors and informants working in the field of homelessness can have different interests in how the problem is estimated and described. On the one hand, local politicians wish to present a successful outcome against homelessness, while on the other hand voluntary organisations have an interest in emphasising the necessity of their work. Another outcome is that local and national definitions and counts may vary to a considerable extent³.

Marie Nordfeldt

*Ersta Sköndal University College
Stockholm*

² This view is further developed by Hertting, N. (2000) Hemlösa i Västeruropa. In: Runquist, W. & Swärd, H. (eds.) Hemlöshet. En antologi om olika perspektiv & förklaringsmodeller. Stockholm: Carlssons.

³ This discussion is based on Löfstrand, C. (2005) Hemlöshetens politik – lokal policy och praktik. Doctoral Dissertation, Malmö: Égalité. Hansen Löfstrand, C. and Nordfeldt M. (2007) Inledning. In Hansen Löfstrand, C. and Nordfeldt M. (eds.) *Bostadslös! Lokal politik och praktik*. Malmö: Gleerups.