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HOMELESS *in Europe*

Winter 2004

This edition of the **FEANTSA** magazine looks at strategies to prevent homelessness and indeed this has been the central theme of **FEANTSA**'s work in 2004. Prevention of homelessness is a vital issue and the natural extension of work to reintegrate and support homeless people. It is also a highly challenging issue, however. A preventative approach to combating homelessness presents problems for both policy makers and service providers. Firstly, it is a broad, multi-faceted approach and, as such, actually implementing it may seem daunting. Secondly, it is not an approach that lends itself to easy measurement and evaluation using indicators, as measuring something that has been prevented is clearly problematic. Nonetheless, prevention of homelessness is a crucial element in effectively combating homelessness. Cutting off the pathways into homelessness will help to reduce and eliminate it in the long-term.

As the understanding of homelessness as a complex phenomenon grows, it becomes clear that it cannot be considered in isolation from the societies in which it occurs. It is inextricably linked to social and economic developments and a viable strategy to combat homelessness must take this into account. Research carried out by the European Observatory on Homelessness has highlighted the way in which homelessness is created and sustained by evolutions in the employment and housing market, arising from globalisation, migration trends and polarisation of the labour market.¹ As an ever wider base of insecure, low-paid and often undeclared jobs comes into being and as the housing market becomes ever more commodified, we see the results translated into the growing number of vulnerable, excluded and homeless people across Europe. A further factor that complicates the problem of homelessness is the demographic evolution taking place in the EU states. As mortality and fertility rates drop, there is a Europe-wide change in the demands placed on health services and in dependency ratios. Household types have evolved to include many, more vulnerable households, such as older households, single parent households etc., which may be less able to compete on the housing market. The demographic trend has also been towards a society where social and family networks are not as strong or extended as in the past.

These developments have created a widespread vulnerability to homelessness among a wide swathe of the population in European states today. This is not to say, however, that individual problems do not have a causal effect on homelessness. It is often events in the individual's own life that are the final "trigger factor" that precipitate him/her into a situation of homelessness. These trigger factors are widely known: they include eviction, relationship breakdown, loss of employment, domestic violence, release from prison, care, or the armed forces and health problems, among others. The fact that experience has made such trigger factors identifiable means that a preventative approach can be built up around them and the risk situations that lead to them.

It was in the light of this complex and layered understanding of how homelessness is caused, that **FEANTSA** wanted to use the year 2004 to further its understanding of how to effectively prevent homelessness, resulting from the combination of these factors. The interplay between the macro economic and social factors and the "micro" factors in each individual situation must be taken into account. Clearly, it is necessary to move beyond consideration of the symptoms of the problem, to a structured assessment of the causes. With this in mind, one may consider prevention as a proactive attempt to cut off the pathways in to homelessness, based on the known causes and risk situations. A further overview of **FEANTSA**'s work on this theme in 2004 is offered in the brief report of **FEANTSA**'s conference on "Prevention strategies and the fight against homelessness" that took place in Budapest in October.

The other articles in this edition of the magazine highlight a variety of preventative approaches, often targeting different pathways into homelessness. They present the strengths and flaws of preventative models that have been tried in different European countries. In Belgium, our contributor Helen Blow of NGO Steunpunt Algemeen Welzijnswerk highlights the relationship between domestic violence and homelessness and the structures that have been put in place in Flanders to try and tackle this problem. Prevention of homelessness among young people leaving institutional care is the focus of the article contributed by Csilla Domosi of Hungary. She describes the work done to support young people in Budapest, who have been brought up in various public institutions, to support them in their transition to the labour market or while they pursue third level education and to equip them with the living and coping skills they need to manage independently. Dr. Maria-Luisa Marin Puig of Spain gives us the benefit of her long experience of working with the homeless in a health capacity. In her article she examines the way that health and homelessness interact and how combating certain health problems can help to prevent perpetuation of marginalisation.

Our contributors from the Czech Republic and Austria underline the importance of sustaining tenancies in order to prevent homelessness. Petr Janousek of the Czech Republic describes the prevention activities carried out by NGOs in the Czech Republic. These are strongly focused on helping people to avoid eviction, and the support provided can take the form of outreach, counselling, supported employment and even accommodation in supported housing ("training flats"). A strong programme to use early intervention to prevent evictions in Vienna has been put in place through the work of NGOs there. Its evolution and history is outlined by Alex Hrach and Stefan Ohmacht of Austrian umbrella organisation BAWO. Our contributors from Ireland and Luxembourg have chosen to give an overview of their national government strategies in relation to homelessness and how these encompass prevention. Noeleen Hartigan of Simon Communities of Ireland recognises that the Irish strategy on homelessness successfully identifies the areas of need to prevent homelessness, but stresses that there has been a failure to follow through in policy and financial terms. René Kneip of Caritas Luxemburg highlights a failure to recognise the macro social and economic factors that contribute to homelessness as one of the main reasons for the absence of a coordinated policy to prevent homelessness in Luxemburg. The overview of government policies in Luxemburg is completed by an in-depth examination of the preventative activities carried out by various NGOs on the ground in relation to different target groups including ex-prisoners, young people, drug addicts and the mentally ill.

FEANTSA would like to thank all of the contributors to this edition of the magazine. From the wide variety of contributions, we gain a good picture of many the strands that can make up a comprehensive approach to preventing homelessness. The success of many of the projects described is source of encouragement, though all contributors emphasize that much remains to be done and that more support is needed. The clear message, however, is that a strong emphasis on prevention must be at the heart of strategies seeking to effectively combat homelessness. •

FEANTSA welcomes your comments and questions. You can send them to: Dearbhal.Murphy@feantsa.org

¹ "The Changing Profiles of Homeless People: Macro Social Context and Recent Trends" (The European Observatory on Homelessness 2003 Pgs 4-5) http://www.feantsa.org/files/transnational_reports/EN_WG2.pdf



FEANTSA Conference on "Prevention Strategies and the Fight Against Homelessness"



In October of this year, FEANTSA held its annual thematic conference in Budapest on the issue of "Prevention Strategies and the Fight against Homelessness". FEANTSA's annual theme for 2004 was "Prevention of Homelessness" and this conference was a forum for bringing together and exchanging much of the information, practices and expertise gathered in the course of the year. The choice of theme reflected the belief within FEANTSA that a reactive approach is not sufficient to effectively combat homelessness. While the treatment of the immediate, pressing symptoms of the problem of homelessness, such as efforts to house and shelter rough sleepers and others who find themselves roofless or houseless, is absolutely vital; it will not suffice in order to eliminate the problem of homelessness in the long term. And, after all, elimination of homelessness must be the long-term goal of policy-makers across Europe. Homelessness was described by the European Commission as "the most extreme form of social exclusion and poverty in Europe," in the 2003 Joint Inclusion Report. It is an ongoing and shaming reflection of the fundamental shortcomings of social and other policies. It simply cannot be allowed to continue unchecked. Homelessness is a deep-rooted problem and it is increasingly clear that we cannot continue to paper over the cracks; we must get to grips with the underlying causes. Only then can we hope to prevent people from going through the terrible mental, physical and social ordeal that is the experience of homelessness.

In order to begin its exploration of the complex, multi-dimensional question of prevention of homelessness, FEANTSA asked its members to respond to a questionnaire on the prevention of homelessness in the then 15 EU Member States (please see our website, **prevention section**, for all national reports). A **European Report**, drafted by the secretariat, brought together these findings. A variety of projects, approaches and different levels of intervention were what emerged. Several elements that must be taken into consideration for prevention of homelessness were highlighted time and again in all countries:

- Sustaining tenancy is seen as a crucial factor;
- An adequate supply of affordable and social rented housing is also an essential factor;
- Good housing management can also be seen as another precondition to prevent homelessness;
- Services that provide support in establishing a suitable home: help, advice and support locating and establishing an appropriate home for independent living in the community;
- Support with daily living skills – help, advice and training in the day to day skills needed for living independently, such as budgeting or cooking are instrumental in helping people to maintain their tenancy;
- Support in accessing benefits, health and community care services – information, advice and help in claiming benefits or accessing community care or health services that a household needs in order to live independently;
- Recognition of risk factors that may trigger homelessness is a key step in the development of prevention policies and measures.¹

FEANTSA's members came together on the 7th of October in Budapest to consider these issues further. Some 140 delegates from 24 European countries were in attendance. It was co-organised with HAJSZOLT (the



Hungarian umbrella of organisations working with the homeless), the Hungarian Maltese Charity Service and the Salvation Army of Hungary. FEANTSA was honoured by the warm welcome and support from the Hungarian hosts. Such was the recognition of the importance of the conference and its theme, that the Hungarian Parliament building was made available to house the conference. The magnificent surroundings did their work well by drawing the interest of the press and the Hungarian media and raising public awareness of the crucial issue of prevention of homelessness. The conference



Katalin Szili, President of the Hungarian Parliament and Kinga Góncz, Minister for equal Opportunities.

was chaired by John Evans, former president of FEANTSA. FEANTSA was honoured to welcome Katalin Szili, President of the Hungarian Parliament and Kinga Góncz, Minister for equal Opportunities. Katalin Szili opened proceedings and spoke of the problem of homelessness in Hungary. As in many of the new member states, homelessness and inadequate, unacceptable housing conditions are a pressing and urgent problem, that relate to the transition of the housing market from the communist era. Conference delegates were also acutely aware of the problem, which is brought home directly to anyone who walks the streets of Budapest. The number, and dire circumstances, of the visible homeless in Budapest are an indicator of the scale of the problem.



Csaba Süto, President of HAJSZOLT, pointed out that prevention was a fairly new concept in Hungary. Currently in Hungary there exists debt prevention and other similar programmes, but no specific strategies aimed at preventing homelessness are actually in place. He referred to the Hungarian action plan on Homelessness, which covers various areas including developing pathways out of homelessness, but unfortunately does not focus on prevention; here he stressed that prevention does not seem to be given enough attention in Hungary.

¹ European Report on Prevention Strategies to Combat Homelessness, pg 6.

http://www.feantsa.org/files/prevention/prevention_october_2004.doc

It is important to prove that prevention can work, but it is hard to measure something that never occurs.

Minister Goncz presented the Hungarian government policies on homelessness. She started by a description of homelessness in Hungary, as being an urban phenomenon. Because homelessness often from results from housing evictions, new legislation will be introduced in Hungary in 2005 to reduce evictions with the support of a special state housing fund. She added that in Hungary homeless services were decentralised and all financed by the 3200 local authorities. In order to strengthen the capacity of these services, as well as improving the conditions of access to housing, the State has increased its subsidies in increasing access to housing loans. In the same direction, the EU has also provided substantial funds for setting up daily care units and employment services, which are also key in preventing people from being evicted.

Peter Gyori from the Shelter Foundation referred to the type of services available for homeless people in Hungary such as shelters, temporary accommodation, institutional homes. He drew attention to the forms of homelessness, which are not as visible as rough sleeping (but which are just as urgent) such as living in overcrowded conditions or poor quality housing conditions. NGOs can be important actors in the prevention of homelessness by looking at the risks of homelessness, but should not be fully responsible for this. Rather NGOs can feed into government initiatives. A new Ministry of equal opportunities, children, family and social affairs has just been set up. It is now up to the government to take measures to prevent homelessness.



Samara Jones (left) and Freek Spinnewijn (right).

Samara Jones presented the FEANTSA Prevention Report outlining different prevention policies throughout Europe. She highlighted the fact that prevention of homelessness is perceived differently in different countries. In some countries like France, Spain and Denmark, prevention of homelessness is pursued generally through the state's social protection system, which should provide access to rights essential to the prevention of social exclusion in general, and especially extreme forms of social exclusion like homelessness. However, other countries have prevention policies that target specific vulnerable groups at risk of homelessness, or prevention policies are taken in specific areas like health or housing. On the whole, prevention is a fairly new concept, which is increasingly developing in the EU15 and is just starting to develop in the ten new member States.

Freek Spinnewijn, Director of FEANTSA, gave a presentation on the role of the EU social inclusion strategy in preventing homelessness. The presentation was divided into four parts looking at: what the EU should be doing; what the EU is doing; why it is focusing on prevention of homelessness and the role of FEANTSA in the prevention of homelessness.

Much of the afternoon was given over to participation in the four workshops. These examined various different elements that can make up a successful prevention strategy. They were:

- Workshop one - Counselling and Mediation: Key methods for the prevention of Homelessness
- Workshop two - Pre-release and Prevention: What can Institutions do to Prevent Homelessness?
- Workshop three - Education: Skills, Timing, Target Groups
- Workshop four: - Role of NGOs and Public authorities: is Cooperation to Prevent Homelessness possible? Is it effective?

These workshops were lead by different FEANTSA member organisations and were lively forums for exchange and debate.

The final panel found themselves face to face with a problem that has made itself increasingly felt as discussions on prevention progressed throughout the day. It is important to prove that prevention can work, but it is hard to measure something that never occurs. A structured approach, based on objectives, indicators and evaluation has to be embraced in order to harness political will. There is a need for innovative thinking on how to move towards a preventive approach and how to measure the impact of such an approach. It was felt that the elaboration of a toolkit on implementing a preventive approach would be a vital tool for policy makers and NGOs alike.

The panel also examined the role of NGOs in prevention of homelessness. Difficulties such as the problem of adapting to prevention policies and a potential crisis in relation to the role of NGOs were highlighted. The question was raised as to whether it is less satisfying to deliver prevention than crisis management? Yet the inescapable conclusion was that NGOs have to acknowledge the structural challenges and causes of homelessness in their everyday work.

A full Conference Report will be made available on the FEANTSA website in the coming weeks. In the meantime the European Report on Prevention strategies to combat homelessness, the questionnaire on prevention, the National Reports and the conference documents and photographs can be found in the Prevention Section of the FEANTSA website. For further information, contact the FEANTSA secretariat: office@feantsa.org.

Preventing homelessness as a result of domestic violence in Flanders

By Helen Blow, *Steunpunt Algemeen Welzijnswerk*

WHAT IS PREVENTION?

In order to talk or write about prevention at all, we need to first define what we mean by 'prevention'. In the Flemish (that is, the Dutch-speaking, northern part of Belgium) homeless sector, we have agreed to use the following definition by Peter Goris: *'prevention includes all initiatives which purposefully and systematically anticipate problems so as to avoid risk factors'*.

It follows that when we talk of 'prevention' we are talking of 'initiatives' (steps, measures, actions, etc.) which purposefully (i.e. according to a plan with a clear goal, not a general policy) and systematically (this implies a concrete action plan) anticipate so as to avoid risk factors, which must therefore be defined, listed, quantified and ranked. While general policies may have a very positive effect, they are not considered 'prevention' according to this definition. For instance, a good, inclusive, high quality education system, that ensures high levels of literacy, low levels of drop-out and practical employable skills for all, will contribute to socio-economic status and this will have a knock on effect in avoiding a wide range of social problems, including poverty and homelessness.

However, by Goris' definition, we do not consider education policies in general to be preventive measures in avoiding homelessness. On the other hand, targeted training to improve literacy, raise skills and increase employability for those currently homeless or threatened by homelessness, *can* be a preventive measure, *if* it is part of a systematic and purposeful plan. In Goris' definition, planning, analysing risks and measuring results are key elements.

How useful is this definition and approach when applied to homelessness? Homelessness is a notoriously slippery concept, very hard to define, and indeed, the same applies to domestic violence. If resolving domestic violence or homelessness were matters of drawing up a plan, working through the action points and reaching the desired outcome of no more homelessness ever, no more domestic violence ever, then surely we would have gone through the motions by now. I believe that these problems are so entrenched in our social system that only long term, high quality preventive work to change the social and cultural fabric will be effective.

On the other hand, we need to get to work and do real, practical things to help the poor, the homeless and the victims of domestic violence. How are we going to find the best way of helping, if we don't try out different methodologies and measure for success? That brings us back to Goris' 'purposeful plans', 'initiatives' and 'avoiding risk factors'. We need them.

WHO SUFFERS DOMESTIC VIOLENCE? HOW IS IT RELATED TO HOMELESSNESS?

In this following paragraph, I would like to go through some data with you. How many men, women and children suffer from domestic violence? How many become homeless due to domestic violence? What is the specific profile of the victims? Does that point to things that can be tackled in an action plan?

Based on the report 'Verbindend Verbroken' (Van Menxel, Lescrauwaet, and Van Parijs, 2003) and on the on-going data collection on the homeless by the Steunpunt Algemeen Welzijnswerk, Gerard Van Menxel has identified following key risk factors for homelessness: youth (and a problematic family background for 40%), socio-economic position (the homeless have very low levels of educational attainment, lack income, are all too often unemployed and 60% have debts), health (75% of the homeless have health problems, mainly psychological and psychiatric, but one in three also has either a physical or mental handicap and one in four has a chronic or life threatening illness), a history of institutionalisation, and dependency on care. In addition, it is important, when considering domestic violence, to note that 34% of homeless women have left their partners and 85% of the women are accompanied by their children. One in three homeless persons in Flanders are women, and this includes the women in refuges for battered women, who are considered homeless and included in homelessness statistics. In fact, the women who are/have been victims of domestic violence are the majority of the female homeless. Van Menxel concludes that while it is good and necessary to work at avoiding homelessness by taking preventive measures on the housing side, it is not enough. Work is also needed on specific and/or increasing risk factors, through the provision of support around the time a person leaves an institution, help for victims of domestic violence, help with psychological and social needs, with substance abuse and psychiatric problems and tailored help for ethnic-cultural minorities. Prevention starts with the individual, but needs structural as well as individual solutions. Also, it is high time to involve the homeless themselves, to deploy their strengths, resources and skills to seek solutions which fit their requirements.

Next, let us consider to the legal situation. In 2001 the Belgian federal government developed a first National Action Plan against Violence. This includes a lot of important action points, one of which was a law that enables the police to bar an offender from the home for a limited period of time, thus ensuring that it is the offender and not the victim who has to find alternative accommodation (law dated 28th January 2003). This has proved hard to enforce. An older piece of legislation (1997) ensured that the police register domestic violence as such. Exactly how this is done is still the subject of debates and working groups, but registration has certainly improved.

A new Action Plan for 2004-2007 has been developed. Cooperation and integration of many governmental services at various levels (federal, regional and local) is sought and the (federal) Institute for the Equality of Men and Women (also called the Gender Institute) coordinates the Plan and ensures that the various actors are communicating.

SOME HANDS-ON PROJECTS

Within the Centres for General Welfare Work, who also run the majority of the reception centres for the homeless in Flanders, two projects have been subsidised by the federal government. There is a third project in Liège, the Wallonian part of the country, and in Brussels there are other projects, subsidised differently. The two

projects in Flanders that I will discuss here are each testing out a different methodology for combating domestic violence. They cover the provinces of Antwerp (referred to as 'Antwerp') and East-Flanders (comprising Ghent, Dendermonde, and Audenaerde).

The project in **Antwerp** focuses on the police, who try to fulfil their police tasks as well as possible. There is an awareness raising for frontline services. As victims are entitled to recognition, there is a registration of the facts, even when the victim chooses not to file a complaint. In addition there is therapy for the aggressor, and this is obligatory. Very often, this has to be combined with therapy for substance abuse or other problems. An information point on maltreatment of older persons has been set up (at a provincial level), a safety plan has been drawn up, and a project with the peace court has been started. Specifically the preventative steps for avoiding homelessness amongst those victims who wish to leave are: an offer of urgent accommodation (if needed), stabilisation and therapy, and a transition period (finding work, housing and organising independence). However, many victims do not want to leave home, they simply want the violence to stop. Therapy for both victim and aggressor can play an important role in this.

One project in **Ghent** works with GP's. A scenario was written up describing the problem and this included an analysis of the risk factors, advice and an address list of local services. In addition there are plans to set up specific training for GP's. Whenever the police intervenes in a case of domestic violence, they inform Victim Support (part of the General Welfare Work) who then contact the couple and offers mobile social assistance. If one or both partners agree, the domestic violence team is involved and they visit the couple (or family) within 24 hours and try to make a home visit within three days. Therapy/social assistance is offered but not made obligatory in any way.

The aims are to create a known but 'neutral' reception point, to facilitate an extensive cooperation between the people who pick up the first signs and a mobile and intensive offer of social assistance, and to increase the skills of GP's as an important first port of call, as they are trusted by their patients and are key members in an often impoverished social network.

The projects in **Ghent (Assenede-Evergem)**, **Audenaerde** and **Dendermonde** offer social assistance to those couples/families where the police has had to intervene because of violence. The police officer encourages both parties to accept an offer of help. He/she uses a folder and a referral form which the parties concerned fill in immediately. This form contains contact details and the signed consent that the social assistant may contact the couple/family. If the

form is not filled in immediately, the folder ensures that the individual or the couple/family can still contact the social services at a later stage. The services then contact them within three working days. The help offered can take on different forms: individual assistance for the offender, individual assistance for the victim, relationship counselling, family counselling, or a combination of the above. This assistance may be offered by a Centre for Social Welfare or by another specialised service, there is a good cooperation with the local centre for mental health. As the assistance is offered very soon after the crisis, the parties are often more prepared to do something about their situation. The approach is proactive and the threshold is kept as low as possible (free of charge, homevisits, language and method tailored to the client, etc) and the approach is geared to the whole family, even if not all family members participate. It is a particular concern to ensure that the impact of domestic violence on the children is recognised and that the children are given an opportunity to talk this through with an assistant.

After a few months the office of the public prosecutor asks the local police to check what has been done. The social assistant then reports – through the client – on the dates he/she contacted the couple/family in question. The actual content of the discussions between the assistant and the couple/family/individual concerned is strictly confidential. If the offender refuses any form of assistance, the public prosecutor can take measures, but the idea is to motivate the offender to accept help voluntarily. Only if all methods have failed can steering and corrective measures be taken.

CONCLUSION

I hope that the above descriptions of projects which are essentially testing out different methodologies are helpful to readers in other countries. The projects are born from the recognition that domestic violence is on the increase, and that it causes immense suffering to both the victim and the offender, and has a long term negative impact on children who witness this violence. The problems of children who themselves become victims of domestic violence are no less urgent, but they are the responsibility of other services. Apart from the immediate suffering caused by domestic violence it also has an impact in the form of homelessness. Any method that can resolve the problem without causing homelessness is therefore to be welcomed. However, we need to always make it very clear to the offenders that violence is unacceptable, and that assistance geared to both parties is no excuse for allowing violence to continue. The safety of all concerned remains a prime consideration, and this applies to victims and perpetrators of non-Flemish origins as much as it does to locals. ●

Prevention of Homelessness among Young Adults in Hungary



Some Thoughts about the After-Care System in Budapest

By Csilla Dömösi, Social Worker at the The After-Care Institute on Budakeszi út in Budapest

Since 1997, young adults in Hungary, who have been brought up and have attained majority in state care, can request so-called "after-care treatment" between the ages of 18 and 24 (or 25, if he/she takes part in the higher education as a regular student).

After-care treatment was given legal status in Hungary in 1997 when the new Child Protection Act was passed by the Parliament. There were some previous attempts to provide this type of care, but without a legal framework they were highly sporadic and concerned only a small number of people. Given that it was totally unregulated, after-care treatment prior to the Child Protection Act mostly included no more than accommodation and personal assistance.

LEGAL CONDITIONS OF THE AFTER-CARE SYSTEM

Rather than simply quoting the text of the law, this paper will seek to outline its essence and the implications that it has had. After-care treatment can be requested in cases where the young adult is attending school as a regular student; where his/her income is so low that he/she is incapable of independent living or if he/she is registered as unemployed. There is also one further case where after care may be requested, though it is very rare: when the young adult is waiting for a place in an institution on account of his/her permanent handicap.

In the case of the above, legally defined circumstances, the public guardianship authority issues a decision on after-care on the basis of request of the young adult, the declaration of the caregiver (this can be an institute or foster parents, and the documents testifying to the situation of the young adult.

The amendment of the law that was brought in as of January 1st 2003, has resulted in a considerable obstacle to the applications of certain young adults: no after-care treatment can be granted to a young adult, whose application is on the grounds of his/her low income, if the value of his/her property is more than the 40

times the minimum state pension payment. In present-day Hungary, this sum would only be sufficient to pay rent on a room for about 18 months, so it is still far from making a permanent solution possible! It is also worth noting that the child's monthly family support fee is accumulated in a separate bank account until he/she reaches majority, and this accumulated payment constitutes the monetary assets to be taken into consideration. Yet for young people who may be without coping skills and with little experience of managing on a daily basis, it is unrealistic to imagine that this sum of money will be an effective solution to their difficulties.

THE AFTER-CARE INSTITUTE ON BUDAKESZI ÚT IN BUDAPEST

After-care can be offered by a children's home, foster parents, or by a specialized after-care institution. The home in which I myself operate belongs to the latter category.

The material conditions of the After-Care Institute on Budakeszi út in Budapest are highly limited, and although we operate in a rather breathtaking environment, an old hunting lodge, I would still contend that the accommodation conditions are far from our professional expectations. Of course, in today's Hungary it would be unrealistic to expect that the young adults in our care be given a place in small individual apartments, but it is still important to emphasize that this would be the ideal way to help them to become independent and self-reliant. Our institution is an independent after-care home, operating in the framework of professional child protection, consequently, it is where the majority of my personal experiences with the after-care system come from. One sixth of the young adults receiving after-care treatment in Budapest live in this type of institution.

The types of services offered are based on the needs of those in the institution:

- Everybody is granted after-care assistance (support from social workers), food support and accommodation.

After-care treatment can be requested in cases where the young adult is attending school as a regular student; where his/her income is so low that he/she is incapable of independent living or if he/she is registered as unemployed.



Since the importance of education and good professional qualifications is continually on the increase in Hungary, we consider it one of our most vital tasks to help our young adults to reach a level of education more suitable to their needs and abilities.

- Those taking part in regular (day time) education are provided full accommodation (pocket money, clothing, sanitary goods, education materials and public transportation fees are also provided as part of this package).
- Those who do not study, but are in fact already at work, pay a symbolic rent for their accommodation.

ABOUT OUR "LODGERS"

Those who live in our institution are almost exclusively young adults who grew up in different children's homes - only a handful grew up with foster parents. The majority of them grew up in various institutes from a very early age, often in frequently changing locations. This is why their 'relational capital' is practically zero. Their acquaintances are mostly peers with a similar background. In general their life story has been defined by a long line of losses. In the course of early socialization, the development of the young personality is hindered by the lack and insecurity of the connection with others. Among the conditions in the children's home, lack of connection, lack of motivation (often total inability to be motivated) slow down and eventually halt development. The level of development is lower than that of the peers, educational achievements are far from the level of capabilities.

Through lack of awareness of these problems, children's homes often send children with good abilities to lower level secondary schools, resulting in further lack of motivation and poor professional qualifications that offer absolutely no chance of steady employment in the work market. Since the importance of education and good professional qualifications is continually on the increase in Hungary, we consider it one of our most vital tasks to help our young adults to reach a level of education more suitable to their needs and abilities. There are several factors that make reaching this aim difficult. Lack of money is only one of them. Another serious

problem is the lack of any flexibility in our schooling system. The young people are considered too old by all educational bodies and it is very hard to get them back into this system. The most important problem is of course the mental and psychological state of the young adults: their failure-avoiding behavior, their lack of vision and reality-based self-esteem - the fact that they do not feel able to take control of their own lives. We often feel that we are confronted with insurmountable obstacles when we expect adult behavior from "little children" of about 20. Yet, we have positive results, especially with those young ones who spend a long enough period with us.

ABOUT OUR COLLEAGUES

We can say we are lucky because we have no colleague who is without qualifications and has no diploma. Several of them have more than one, and - though not everybody has a degree in social work - we work in line with the professional norms of social workers. (It is very important because most of our lodgers came from institutions where they were given direct guidance from an early age, everything they needed was settled or decided without them.)

Every week we have a team discussion, so everybody is well-informed about the situations of the clients of other colleagues. The gender ratio of the staff is fifty-fifty, that is very rare in the rather "feminized" territory of social work.

Of course, the state of Hungarian accommodation system poses a major problem for us as well, because it is almost impossible that a lodger can move into secure circumstances when leaving us, upon entering into his/her 24th year. We could not get real help in this, either from our main source of funding, the Metropolitan Self-Government of Budapest, or from the districts. Of course, sometimes we witness real wonders, but we cannot build on them. Given the possibility though, most of our lodgers would be able to live a self-reliant and independent life. •

Preventing Health Problems Among Homeless People

Prevention of tuberculosis and alcoholism among homeless people in Barcelona

By Dr. M^a Luisa Marín Puig, *Associació RAUXA - Barcelona. Spain*

Such a large and complex issue is a real challenge for any health professional. The following article is just a personal reflection backed by fifteen years professionally devoted to the homeless.

Being in the street is per se a lack of health. The severe living conditions associated with homelessness – being without a home, deprived of significant relationships, forced to live in bad hygienic conditions and suffering from malnutrition - enhance this poor health and favour the development of multiple pathologies.

Some illnesses associated with homelessness are developed by the person long before they live in the street and these maybe the cause of loss of family, of employment and of social bonds, as well as of the serious organic and psychic consequences which lead them to absolute marginalisation. The paradigm of these illnesses is alcohol dependence, which is most frequent among chronic homeless people - approximately 50 to 60% suffer from it. These ill people are the most vulnerable and face the greatest difficulties overcoming their situation, since they need very structured, but at the same time flexible, specialised treatment in specialised centres.

The illnesses that generate and perpetuate the marginalisation should also be highlighted. First of all, there are mental illnesses caused by substance consumption, which include alcoholism and other drug dependencies. Another serious mental illness is psychosis (schizophrenia).

Infectious diseases such as tuberculosis, hepatitis B and C, as well as HIV are also very serious, both due to their severity and to their impact on the rest of the population. Also very frequent are **scabiosis** and **pediculosis** (that is scabies and lice infections), due to the lack of hygienic conditions. Other non-threatening pathologies include some dental and foot disorders, though if not duly treated these can become serious.

HOW CAN WE PREVENT ALL THESE DISORDERS? WHICH TYPE OF PREVENTION IS THE MOST ADEQUATE?

When talking of prevention, we can distinguish two kinds of measures:

- Non-specific or general measures: these are often related to respect of human rights and have to do with policies that favour or supply the necessary resources for enjoyment of rights.

- Specific or concrete measures: these are often directly related to a particular phenomenon, such as, for instance, a tuberculosis vaccination programme in the case of tuberculosis.

We can also classify the preventive sanitary actions at three different levels:

- Primary prevention, to avoid a specific, concrete illness or disorder.
- Secondary prevention, to try to get an early diagnosis in order to treat the disease accordingly.
- Tertiary prevention, to avoid the consequences derived from a disorder.

It is worth noting that in order to prioritise more efficient preventive actions, one must take into account certain factors which are used to analyse the pathology: frequency, seriousness, cause-effect (ie: a pathology that causes and/or perpetuates the marginal situation), whether or not it affects the rest of the population, etc....

This paper will now analyse two concrete examples, **alcohol dependence and tuberculosis**, both notable for their prevalence among homeless people. They are also factors in marginalisation and its perpetuation. Another reason to analyse these two diseases is because we deal with these two disorders in our daily practice and we can offer some practical solutions that have provided us very good results.

TUBERCULOSIS

Primary prevention: Measures include improved hygiene, adequate nutrition and treatment of associated illnesses, especially the immunodepressive ones. BCG immunisation (i.e.: immunisation against tuberculosis), since there are an increasing number of tuberculosis cases.

Secondary prevention: Measures include studies for early detection among homeless people when entering shelters or attending public canteens. Provision of radiology mobile units for street action.

(We succeeded in including screening for TB in the entry protocol at the public canteens in Barcelona).

Once the active tuberculosis is detected, specialised centres are needed in order to treat the patient to avoid contagion. The medication ought to be free and administered in accessible places or other medical teams can be set-up to ensure that patients take this medication for the required period.

Some illnesses associated with homelessness are developed by the person long before they live in the street.

Alcohol dependence is a bio-psycho-social disease, which causes people to gradually deteriorate.

Tertiary prevention: Measures include the provision of long-term centres for treatment-resistant cases or for those with special difficulties.

ALCOHOL DEPENDENCE

Alcohol dependence is a bio-psycho-social disease, which causes people to gradually deteriorate. There is about 4-12% of sufferers among the general population. It causes serious organic problems, psychological alterations and loss of social and professional relationships. If the patient is not duly treated he may end:

- in a lunatic asylum (mental hospital): a third of the people in psychiatric hospitals are patients suffering from an alcoholic dementia.
- in prison because of legal problems: 70% of domestic violence is associated with alcohol consumption.
- in the street, marginalized and excluded: between 50 and 60% of the homeless are alcohol dependent.
- in the cemetery due to organic complications or suicide.

Primary prevention:

Through Education

- Primary and Secondary school: through the school system information can be provided about this issue, as well as others related to health. It can be taught in relation to various subjects or through the creation of a new subject in the cases where it doesn't exist.
- In colleges and universities in medical and social degrees.
- Further education: specialised courses or masters.

Through Legislation:

- Advertising: forbidding all kinds of alcoholic drinks advertisements.
- Driving: zero tolerance.
- Labour regulations: zero tolerance in risk posts (breathalysers in the work site)
- Follow up of the risk population, such as the children of alcoholic people, and special interventions when needed.
- Counselling programmes in primary health sectors to reduce alcohol consumption.
- Research.

Secondary prevention:

- Detection at primary social care level and referral of patients to primary medical assistance.

- Detection, early diagnosis and referral of the patient to a specialist in alcohol abuse and dependence
- Treatment through specific medical and hospital resources, outpatients departments, therapeutic communities.
- Treatment of associated illnesses such as nicotine dependence that increase serious consequences such as cancer.

Tertiary prevention:

- To treat and palliate organic consequences and associated diseases.
- Introduction into mental hospitals of specific stimulation programmes to avoid progressive deterioration.

In prisons:

- Implementation of alternative prison sentences in specific treatment centres.
- Specific treatments in prison.
- Provision of resources and treatment when leaving prison to avoid the increase of homelessness.

SPECIFIC MEASURES WHEN WORKING WITH HOMELESS PEOPLE:

- Detection at street level of potential patients by means of out-reach teams. Low initial demand programmes can be used to decrease resistance, and where possible, motivation techniques to enhance alcoholism treatment acceptance can be offered.
- Specialised residential resources (therapeutic communities) for long term stays, where alcoholism treatment can be started through detoxification, getting people out of the habit, and rehabilitation, and also where it can be fostered, rebuilding the relationship with the family.
- Shared therapeutic flats for patients who are prepared to live together with other alcoholic friends, who have been previously treated in a therapeutic community.
- Specific training programmes for integrating the labour market.
- Fostering the coexistence with the family for a complete integration when the moment comes.
- Provide individual, shared state-subsidized flats for patients with special difficulties who have been discharged.
- Create residence for those patients who need special care or be taken charge of.

Rauxa Association (l'Associació Rauxa) has developed a programme of integral, treatment of alcoholism in Barcelona (Spain) which includes all the projects described above with good results.

See our web page: <http://webs.comb.es/rauxa> • e-mail: asrauxa@comb.es.

Dr. Rizal, 14 bajos. 08006 Barcelona. • Tel. 00 34 934156298 • Fax. 00 34 93 2372086.

Prevention of homelessness in the Czech republic

By Petr Janousek, *Chairman of Czech Homelessness Organisation "S.A.D."*



In the Czech Republic the term "prevention of homelessness" is almost unknown. A general lack of knowledge about homelessness is a reflection of the fact that homelessness is a state viewed very negatively by the public. The most common opinion about homelessness is that "it is his or /her own fault" and that "everybody should take care of himself/herself". There is not even a definition of the term 'homeless' in Czech law and so it is very hard to put in place any prevention programmes. Nonetheless, there are some activities taking place which can be considered as prevention of homelessness. There has been a lot of negative writing about the condition of homeless people in the Czech republic, the attitude of the general public and of the local, regional and state authorities and also about conditions in which service providers are working. The view advanced in this paper, however, will be a rather more positive one.

The tradition of this kind of social work in the Czech republic was broken by the communist regime in the years from 1950 – 1989 (for example The Salvation Army was banned from carrying out its work). However, from the very beginning of the year 1990, there was a new effort by different providers to start social services for the homeless in this country. Over the past 15 years, a relatively very good structure of work with homeless people has been built up and this even includes some prevention activities.

This paper will first look at a programme for the prevention of homelessness which is run by **NADEJE** – one of the service providers in the Czech republic. It is a useful example because it is one of the most complex programmes and it offers a very good picture of the homeless population, the trends, and the different working methods. Many other organizations are working in a very similar way or have put in place just parts of this scheme.

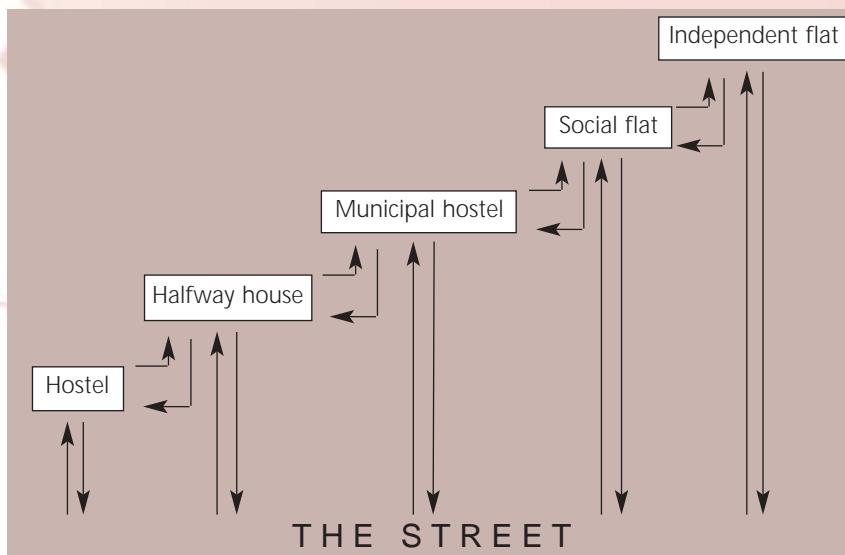
Usually these facilities are at the edge of a city district and quickly form social ghettos.

In the worst cases, families can be separated. The children go into child-care institutions, with little possibility of being returned to their parents. This creates a second generation of homelessness. The majority of these cases occur among Roma families.

There are approximately 20 000 young people, aged 18-19, living in the children's homes. About 1 000 young people in that age group leave the children's homes every year. About a quarter (250) of them are able to integrate into society. Three quarters of them are exposed to social exclusion; they often become victims of human traffickers and abuse, and stay on the streets as visible homeless.

Nadeje works with people who are still living in council flats but are in danger of being evicted. The most common indicator of the development of an insecure and vulnerable situation is the accumulation of rent arrears. Since merely a three-month delay on rent payments is sufficient reason to evict a tenant, this can be a very rapid process. The councils that own the flats are well informed about the rent payments. If the council is willing to co-operate, some of that information can be accessed. Together with the social department, Nadeje can identify a group of clients who are then contacted by a social worker from the organisation. This worker will try to form a relationship with the client, establish the reasons for failure to pay the rent and try to find solutions. Quite often that inability to pay the rent is a secondary effect of a problem rooted elsewhere.

In many cases, the council will select a building to house problematic tenants from ordinary council flats. A concentration of these people in one place causes a chain reaction of negative social phenomena. In addition to the total devastation of the building, an increase in crime is the main result. Nadeje works in this type of building in three different towns. The municipal office retains the authority to assign social flats, collect the rent payments and administer the rental contracts; Nadeje take care of providing supervision in the building and of cleaning the communal areas. To keep order in the house its workers co-operate with the local police. Nadeje's work with the clients is again based on developing a relationship. The workers therefore aim to create a friendly personal relationship with those they are assisting, to help them to find direction for their lives and to lead them to accept responsibility for themselves. For this purpose it provides various leisure activities for children and adults, counselling, help in dealing with authorities etc. The majority of the organisation's clients are Roma families and families with children. As a general rule, if a client is working on resolving his/her situation, accepts responsibility for it and is paying off his/her debts, he/she can be given a council flat. Otherwise the rental contract is not extended and those involved can end up on the street as homeless, or – if they are lucky – as clients of other institutions.



More and more people are becoming homeless through eviction from municipal flats due to rent arrears. These people simply have no other option for accommodation. Nor are they entitled to re-apply for housing in municipal flats.

In the best cases these people are moved to either:

- a "holobyt" - an empty room with concrete walls and floors and only cold water supply;
- a "portacabin" - as used by construction workers;
- a "barak" - a primitive building with bad sanitary conditions or similar to military accommodation - under sanitary regulations, this would not be approved accommodation.

Some towns (municipal councils) establish hostels for problematic tenants. They do not sign a rental contract here, but rather a so-called "accommodation contract". They must pay for accommodation beforehand, otherwise they have to face sanctions. Each family gets just one room, the sanitary facilities and kitchens are communal. There is usually just a solid fuel (wood or coal) heating system.



For some, the power supply has been disconnected. Nadeje also works with clients in municipal hostels in three towns, the work is again based on developing a relationship and the aims are the same as in the social flats. The majority of the organisation's client here are Roma families, alcoholics and lonely elderly people with no family ties. The social worker often mediates contact with local authorities where there can be communication, ethnic or personal barriers. If a client is actively working on his/her situation they can be given a social flat, otherwise they can end up on the street as homeless.

Nadeje takes active steps in contacting drug addicts, homeless people, people with HIV, young male prostitutes, mentally retarded people, underage pregnant girls etc. It often works with young people. The workers get in contact with people in squats, drug addicts' homes, unoccupied buildings, railway stations, discos etc. It would seem that general awareness of the organisation's services is increasing. It is successful in making primary contact with newcomers among the homeless and can provide help even before they settle on the streets. Nadeje makes contact with their place of origin (last known address), tries to establish the true situation, organises transport back and forth and provides contact with local counselling organisations.

The street work benefits from the very good position of the Prague centre, located in close proximity to the Central railway station, and from its ten-year tradition. Nadeje workers give clients the address for a follow-up contact. Some clients come into the centre immediately after arriving in Prague. Contact with clients is maintained even during their stay in hospital or during a prison sentence. The main difficulty is in recognising where their behaviour turns into a real problem. The borderline is very vague, rather subjective. Some people view homelessness, punk and other alternative lifestyles as a seasonal hobby. Others are perpetually homeless – their situation is fully dependent on the job market, especially in construction work. People who live by collecting scrap metals (for recycling) form a special group. They take care of themselves unless some unfortunate incident affects their life. They only seek help in the centre when they are ill.

One form of helping clients is supported employment where part of their wages is covered by the state employment office. The client must be registered by the office as unemployed. Nadeje is then responsible for the rest of the finances. The organisation's hostel clients take advantage of supported employment and it forms a logical pinnacle to the system of services. A client can join the programme after successfully maintaining a number of short-term jobs. The purpose is to motivate them to be active, instil working discipline, regularity, perseverance and a feeling of duty. The result is a feeling of self-worth. The clients mainly assist in construction work and do maintenance jobs according to their skills. They work on the construction of Nadeje's new centre in Prague or make things for use within the centres. Once they have learned positive working habits, their supported employment is terminated. The organisation then helps them to find a regular job and a place in a commercial hostel. Retired people, people close to retirement age and those qualified in seldom-required professions create a difficult group. Since these clients find few openings in the job market, their chances are very low.

The Salvation Army in the Czech republic is doing another type of work, which is also worth examining. This programme has already started but is still in the process of development. It is one of the areas that the Salvation Army wants to develop in the future.

The target group of this project are people with rent arrears and homeless people living in hostels. The project is also aimed at clients with permanent addresses in the district where the project will take in clients. It aims to be another step towards integrating people back into society. Firstly, the work will be done with those who are on the verge of becoming homeless through eviction. Secondly, help will be provided to those (men, women, mothers with children and families) who are already living in hostels and are ready to live an independent life with minimum support from a social worker. They will be accommodated in so-called "training flats", which are normal flats in the city. These flats are rented from the Municipal Authority by the Salvation Army and then sub-let to the clients with a permanent address in that particular district. Through training, the clients should be provided with skills and will therefore become more employable in normal working situation. After the clients have proved that they are ready for successful independent living, the lease of the flat will be transferred to them and the Salvation Army will be provided with another training flat. The aim is to maintain 20 training flats.

The project has been created in answer to a request by the local municipality. This project is split into 3 main areas:

- prevention of eviction (seeking the people threatened with eviction, providing consultations and support in their home environment);
- maintaining training flats – for the clients of the hostels, supported living with supervision from the social worker;
- training and education – learning work skills and gaining abilities to become more employable

creating work opportunities (public beneficial works) for the people living in the flats

This should lead to the reintegration of the clients back into society.

On the general theme of prevention of homelessness, there are a lot of other various programmes and projects, which can be mentioned here in passing: such as prison work, including alternative forms of punishment, supervised by several NGOs and combined with the provision of social support and assistance; halfway houses for those coming out of institutional care as young adults, as well as for adult homeless who have spent several years in different institutions and are affected by a syndrome of institutional dependency etc.

Finally, a new activity which is being developed now at the request of Ministry of Labour and Social Affairs in the Czech republic, should also be mentioned. Several different NGOs (Nadeje, Salvation Army, Caritas, Diakonia etc.) have come together, along with some Universities to prepare over the next two years a strategy to combat homelessness, which will be presented to the Ministry. This project will be financed by the Ministry and the strategy should be received as a governmental document in the future. It contains tasks like:

- elaboration of a definition of the notions of "homeless" and "homelessness"
- gathering statistics about the homeless population, as well as about the capacity of institutions and their use in all regions
- testing of new methods of work in pilot programmes (improved co-operation with labour offices, more social workers etc.)
- monitoring of homelessness and common database software for this work
- prevention - etc.

In conclusion, it must be acknowledged that there has been substantial progress in the Czech Republic and social work with homeless in the Czech Republic is reaching a very good level, even after the 40 year gap in such work. Of course there is a lot still to be done and a great many problems still to be solved, but the growing co-operation among NGOs, Universities and the Government gives good reason to be optimistic. •

Cutting off the Pathways into Homelessness: Prevention of Evictions in Austria

By **Alex Hrach** and **Stefan Ohmacht**, *BAWO*

FAWOS: Fachstelle für Wohnungssicherung

FAWOS: Centre for Secure Tenancy



Vienna covers a territory of 315 km² with 1.55 million inhabitants. It is a federal province as well as the capital of the Federal Republic of Austria. (Austria has 8.03 million inhabitants - which means nearly 20% of the Austrian residents live in the capital¹)

In Vienna there are 750,000 dwellings of two different kinds: the private market provides 530,000 apartments, including owner occupied housing, which have increased a lot since the 1990s; the 220,000 remaining dwellings are owned and operated by the municipality of Vienna². Almost half of the current housing stock dates back to the period before 1918. With approximately 220,000 apartments, the municipality of Vienna is currently one of the world's leading landlords. Old council housing in particular is cheap, affordable and is rented out for an unlimited period of time.

The private housing market offers both owner-occupied apartments and rental apartments for limited or unlimited contracts. The amount of rent depends on location, standard (category³), terms of tenancy and on what legislation was applied, as tenancy legislation has been "liberalised" several times since the 1980s. Thus the housing market in Vienna is highly segregated between different housing-stocks with different ownership and different applicable legislation. In the private market, rents have gone up due to changes in legislation, urban renewal and changes in the market. Thus persons who signed tenancy contracts several years ago continue enjoy relatively low cost of housing (and will avoid moving in order to retain these favourable conditions) while newcomers (including migrants) have to pay the higher rents of approx. 10 € per square metre, including utilities and VAT, but excluding energy supply.

AN INNOVATIVE IDEA FROM FAWOS TO COMBAT INCREASING HOMELESSNESS

The Situation before 1996:

Until the mid eighties, the municipality provided large hostels for the homeless, particularly in the wintertime. Some of these buildings were constructed before 1900 and most of them

were still of the housing standard of that century. During the 1980's the number of the homeless in Vienna sharply increased (estimated number: 5.000). The main factors for this phenomenon were: a drastic rise in the rents on the private housing market and increasing uncertainties in the labour market.

Additionally, more and more women and their children as well as persons with regular employment became homeless, paralleled by an increase in problems such as alcohol and drug abuse. The town council tried to cope with the growth in the number of homeless people by providing additional temporary shelters.

Before FAWOS started its work in 1996, two thirds of all scheduled evictions were actually carried out. Each year some 4,000 households (of families as well as of single persons) lost their apartments and had to look for a new home or seek refuge in a shelter. In Vienna alone, 20 000 cases concerning living space are brought before the court each year. Almost half of these cases result in a verdict allowing the landlord to apply for eviction and to have the tenant removed from the premises.

IDENTIFYING THE NEED

It was the social workers who rang the alarm bell in the beginning of the 1990's. The circumstances for successful re-integration / resettlement work were far from promising. Clients lived in shelters housing up to 400 persons, with perhaps 30 people in one sleeping hall. The social workers came to the following conclusion: control over the increasingly drastic situation and provision of a climate for the successful resettlement of clients could only be gained if pathways into homelessness could be drained by systematic preventive intervention, particularly in relation to the need for places in shelters and hostels. If the boat is leaking and the pumps are insufficient, the first thing to do is stop the water from entering the ship. Therefore, establishing "prevention" was the next logical step - avoiding eviction and homelessness of vulnerable populations.

The housing market in Vienna is highly segregated between different housing-stocks with different ownership and different applicable legislation.

¹ Numbers: 2001

² Homeless people organized as a group through the Vienna Streetpaper "Augustin" criticized sharply the City of Vienna's Housing Dept. Wiener Wohnen for inadequate administration i.e. the long periods of up to year after one tenant had left an apartment till another tenant actually moved in. By speeding up this process quite a number of additional apartments would be available the group stated in a panel discussion in September 2001.

³ Categories according to Tenancy Regulations: Cat. "A" for central heating, bath room (i.e. modern standards) down to Cat. "D" with water inside, but no toilet, no central heating, no bathroom (standard of 1920). The number of Cat. D apartments diminished due to urban renewal, but this also meant that the number of cheap apartments on the private market diminished.



CONCEPT EVOLUTION

At that time, the Austrian umbrella organisation BAWO⁴ was already organizing regular meetings with its member organisations, so-called "knots" (referring to the image of building a self-organizing network) for supporting the exchange of information and professional expertise as well as starting various political initiatives: i.e. proposing actions to the City government. In 1993, a workgroup started during such a "BAWO-knot" with the goal of laying down a working concept for effective prevention of evictions in Vienna, on the basis of the creation of a new, specialised service for prevention. Among the 25 or so members of the working group were experienced social workers, lawyers, judges, employees of Vienna's social welfare department - all long-time practitioners engaged in finding new solutions towards homelessness. The concept created by that workgroup was then addressed to the city's Vice-Mayor Ms. Grete Laska, also City Councillor for Social Affairs.

The reaction of the Vice-Mayor was very positive: she asked that a detailed concept and action plan on how to establish and run such a centre be elaborated. It turned out, however, that the proposed action, with planned annual costs of about € 200 000, were too high for the city. At that time, there was a strong danger that the concept would be dropped, forgotten and buried in a drawer of the Mayor's desk. Therefore, a part of the original working group including Renate U. Kitzman, today's manager of the centre, teamed up again in 1995 and re-designed the concept so as not to exceed an annual budget of about € 87.000. In addition a sponsor was found for the first step towards implementation: due to the research-based nature of the initial actions, funding could be obtained from the Housing Research Unit of the Housing Ministry⁵.

Two main objectives were aimed for:

- **In the short term:** to drain the pathways into homelessness and particularly to cut down the number of evicted individuals and families needing accommodation in municipal hostels as well as of non-profit service providers.
- **In the long term:** to decrease the number of homeless people in municipal hostels and reduce the number of hostels to an ideal of zero.

The project also set out research activities to cover the following questions: How many people are threatened by eviction? What is necessary to prevent evictions? Which resources are needed? Can a centre for prevention work with already existing resources and legal standards?

FAWOS'S PROJECT: PREVENTING EVICTIONS, AS A PATHWAY INTO HOMELESSNESS

The Austrian law governing tenancy comprises 2 articles, which places the courts under an obligation to inform the Municipality of Vienna about the verdicts on, and the dates of, evictions. FAWOS gets this information and is thus able to contact the people threatened by eviction. At this point in time, however, it is generally too late for effective preventive measures. The Court of Justice of the 20th municipal district and FAWOS came to an agreement for the Court to send information brochures of FAWOS to landlords, property management offices and to the tenants when the first summons are issued.

Outreach is an important part of the enterprise and several methods were initially used to contact people at risk. These included: letters to tenants facing summons; personal visits by FAWOS social workers at clients' homes, contacts through social organisations working at district level and through public awareness campaigns. From the first contact with families or people at risk, FAWOS clearly conveys the message that it is there to help people help themselves. (This outreaching work unfortunately has had to be decreased due to constraints on resources.) The counselling services provided by FAWOS focus on the following issues:

ESTABLISHING THE STATUS QUO

During a first meeting, the following issues need to be established:

- Does the tenant want to remain in the apartment? FAWOS offers advice only to those tenants who have no other home to go to and want to remain in their apartments. It is not in a position to provide apartments;
- Causes and reasons for the current threatening situation. No-one chooses to be in a threatening situation of his or her own accord. There is always a background story;
- Personal situation: number of persons living in the household, age of persons, etc.;
- Rental situation: stage of proceedings, type of tenancy agreement, etc.;
- Economic situation: employment situation, income, expenditures, debts, etc.;
- Individual solution strategies: what have the tenants undertaken to overcome the situation?
- Identifying possible perspectives

INFORMATION COUNSELLING

During the follow-up meetings, the following points are discussed:

- Social workers provide counselling on how to meet one's basic housing needs independently;
- New ways to overcome the crisis are developed based on individual situations.

⁴ BAWO ... Austrian Association of Service Providers for the Homeless – in German: Bundesarbeitsgemeinschaft Wohnungslosenhilfe – see <http://www.bawo.at/> for more information in German or <http://www.feantsa.org/Austria/> for more information in English

⁵ Housing affairs are now part of the BMWA ... Federal Ministry for Labour and Economic Affairs

- Information on the law governing tenancy and on how to avoid loss of one's home: (objections, agreements on instalment payments)
- In some cases tenants may file an action to have their rent assessed and thus avoid eviction. Time and again it has been found that the rents charged are far too high. In such cases, tenants may be refunded some of their rent, rather than be evicted;
- Information on tenant rights and the availability of benefits and assistance;
- In the case of divorces, for example, single mothers are informed how to claim maintenance payment. There is cooperation with the Youth Welfare Administration to support them in their endeavours;
- Drafting of an individual financial plan. This is particularly important, as often expenditures by far exceed income and priorities on what to spend money on need to be revised. Counselling and social support may help to increase people's income. In some cases, however, expenditures need to be curbed to the absolute minimum;
- Assistance in negotiations with landlords. Landlords tend to want to receive their money on time and are reluctant to incur any trouble with their tenants. Evictions are usually costly and take up valuable time. We help landlords receive their money. They have learnt that sensible counselling takes time, but that the chances for smooth relations with their tenants after counselling are high. If there is no way out and eviction is imminent we offer advice on how to postpone eviction. In many cases tenants desperately need time to find a new place to live;
- Tenants faced with problems, such as unemployment, debts, alcoholism) are referred to the relevant institutions (e.g. Administration for Youth Welfare, Administration for Social Affairs, (debt counselling, youth welfare, health care centres...), as we at FAWOS are not in a position to offer long-term counselling;
- In those cases where people are already being looked after by other departments we seek to co-operate rather than take over which would be counterproductive. We also provide financial support to cover rent in arrears should this become necessary.

CRISIS INTERVENTION

The primary task of FAWOS is to avoid loss of housing accommodation. In the event that eviction is imminent we offer all the necessary support. Along with counselling, this includes immediate and non-bureaucratic mediation with property management and authorities. Medium-term counselling is provided only where necessary to keep an apartment and where other counselling institutions are not in position to co-operate.

FINANCIAL SUPPORT

FAWOS is able to give financial support for covering rent arrears only in exceptional cases and in accordance with the principles of FAWOS of offering "help for self-help". The goal is to restore as quickly as possible a person's ability to take decisions concerning their personal life and to provide financial help once we are convinced that the home will not be threatened by eviction again. The forms of financial assistance include:

- Based on proof of payment of current rent, rent in arrears is credited to the tenant's account in monthly instalments;
- Half of the arrears are paid for by FAWOS, the rest is paid by the tenant
- Contingent liability for half of the arrears, where the tenant is expecting payment of a major sum of money following eviction.

The goal is to help the tenants in such a way that they never find themselves in a similar situation again. Only in very special cases are affordable flats, owned by the municipality of Vienna, provided to Austrian citizens and to citizens of the European Community.

Also, since 1998 FAWOS is responsible for private and association flats only: The Youth Welfare and the Social Welfare Offices of the City take care of tenants living in flats owned by the municipality.

A TRANSFERABLE MODEL?

The plan of FAWOS is applicable worldwide under certain circumstances. Everywhere, where people are in danger of losing their housing through statutory or other foreseeable circumstances, it is possible to work preventatively. Provision of information about those who are threatened by eviction is necessary, however. As regards personnel resources, qualified social workers, office workers, legal experts and interpreters are needed, as well as continuous training for better and more efficient assistance. As experiences in Austria show, most persons concerned lose their flats because of rent arrears. It is absolutely necessary, therefore, to assist with financial support. The possibility of placing another flat at their disposal does not prevent loss of the existing flat through eviction, but it would prevent them from living in homelessness, following eviction. Cooperation from landlords, property management, and lawyers is necessary in order to for the solution elaborated by the employees of a welfare centre together with the clients to be accepted.

A basic prerequisite is the political will of the regional and local governments concerned to fund systematic prevention, alongside funding for re-settlement of the homeless people in hostels and supervised housing. It is less expensive to prevent people from losing their flats than to re-integrate them or to accommodate them in a new flat after eviction. •

The goal is to help the tenants in such a way that they never find themselves in a similar situation again.

Vienna

The Homelessness Prevention Strategy in Ireland – An analysis of its fundamental flaws



By Noeleen Hartigan, *Social Policy and Research Coordinator, Simon Communities of Ireland*

ORIGINS OF THE STRATEGY

In 2000, following a doubling of the national homelessness figures, the Irish Government introduced 'Homelessness – An Integrated Strategy'. It represented the first national, strategic attempt to address the homelessness crisis. It sought to clarify statutory funding responsibilities and to embed a partnership approach to service provision across local statutory and voluntary service providers.

The Integrated Strategy was devised at a cross departmental level, involving seven Government departments and a number of national statutory agencies. While there was a process of public consultation, there was no role for voluntary service providers or indeed people experiencing homelessness in the implementation or monitoring of the plan.

The need for a preventative strategy was flagged in this plan, but no further action was forthcoming. Then shortly before the 2002 General Election, the Preventative Strategy was published. There was no consultation with service providers or service users in relation to the strategy.

FORMULATION

In the formulation of the Preventative Strategy, the Departments of Justice, Equality and Law Reform; Health and Children; and Education and Science each prepared strategies in relation to their area of responsibility and this was brought together in one overall Strategy by the original Cross Departmental Team that created the Integrated Strategy.

The strategy aimed specifically to prevent homelessness among patients leaving hospital and mental health care, adult prisoners and young offenders leaving custody, and young people leaving care.

While the initiative was welcome, the outcomes in the main have been very disappointing.

OUTCOMES

The first major criticism is that the Strategy, while outlining the need for procedural changes such as discharge policies, did not contain any commitments that would link these policy changes to actual services or housing options.

There were no financial commitments made in the Strategy or indeed any naming of the numbers of housing units that should be delivered or who was to deliver them. The exception was the Prison service, which was mandated to build and operate transitional housing units. Two years later discussions are still ongoing about resourcing this commitment.

Probably the most disappointing aspect of the Strategy was the lack of a comprehensive response to the needs of people with mental ill health who are homeless or at risk of homelessness. The main recommendation was the creation of hospital discharge policies and the nomination of discharge officers. It is not clear how comprehensively even this limited recommendation has been implemented.

WHAT NEXT?

While the Preventative Strategy seems to have had little impact, the shift towards prevention is certainly on the agenda in Ireland. The recently published homeless action plan for the Dublin region emphasises the move away from emergency provision. The priorities in the plan are:

- The provision of more housing, rather than beds; the development of strategies to prevent people from becoming homeless; the improvement of interventions where people do become homeless, when and where need arises; and the improvement of the collection, collation and accuracy of information available on homelessness and the impact of actions undertaken.¹
- As the policies of the Agency require the sign off of each of the local authorities in Dublin and given that substantially more than half the national homeless population is located in Dublin, this shift in focus is noteworthy.
- The Government have committed themselves to reviewing both the Integrated Strategy and the Preventative strategy and this process will begin in early 2005. The Government have assured us that people who are homeless and voluntary service providers will have their opinions taken on board during this review.

IN CONCLUSION:

Prior to the last General Election, An Taoiseach (the Prime Minister), writing in our magazine *Simon News*, stated that his party were:

"committed to ensuring that, amongst other measures, no person will leave State care without a post-release care plan and a definite address. The onus must be on the State to ensure that housing is available."

From central Government, we need leadership to turn this political commitment into proactive departmental policies. A commitment that all relevant Government policies will be homelessness proofed and that the prevention of homelessness is central to State policy is needed in order to make the Taoiseach's pledge a reality. •

¹ Making it Home, pg v.

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Prevention of Homelessness in the Grand Duchy of Luxembourg



By **René KNEIP**, *Vice President of FEANTSA, Caritas Luxembourg*

In Luxembourg there is no body responsible for putting in place a coordinated policy for the prevention of homelessness. Of course there are many reasons for this fact, but essentially it points to an ideological and philosophical perception of the phenomenon of homelessness as being the result of individual social and psychological issues, rather than the result of mechanisms of exclusion of a social and economic nature.

Another phenomenon that may explain the absence of a coordinated policy for the prevention of homelessness in Luxembourg is the lack of official statistics, both concerning those already in a situation of homelessness and those people who may be threatened by homelessness in the more or less immediate future. Harmonisation of the present data-collection systems among NGOs is the “*conditio sine qua non*” in order to gain an effective knowledge of the factors at play in Luxembourg and in order to develop policies that are likely to succeed in this area.

The present article is therefore based essentially on observation and on the direct knowledge provided by those working on the ground, as well as on observations and statements made by the research body CEPS/Insteat, which is a member of the European Observatory on Homelessness, and of the “Platform for Access to Housing for disadvantaged people” started by FEANTSA and Wunnegshëllef asbl.

A policy that seeks to make concrete progress towards the prevention of homelessness must, necessarily, target groups that are under a particular threat of homelessness. Yet, this is not the case in the Grand Duchy of Luxembourg and one might even go so far as to say that the lack of such political initiatives is responsible, to a great extent, for the emergence of the phenomenon of homelessness, which, in an economically wealthy country like Luxembourg, should no longer exist nowadays.

1) EXISTING POLICIES AND LEGISLATION THAT ALLOW PREVENTION OF HOMELESSNESS

For the purposes of the present article, the description will address just two policy areas, which may be considered as essential and of primary importance in relation to this issue.

1.1 *Guaranteed Minimum Income*

Since its introduction in 1986, guaranteed minimum income, and the legislation that has consequently been developed around it, have, without a doubt, allowed a large number of people regain access to housing and find a new social stability. Furthermore, linking the monetary remuneration with employment measures seems to be a determining measure, which allows the beneficiaries of the payment to maintain a certain professional activity and to continue to feel like full members of society.

We also are of the opinion that a further reduction of the age criteria from 25 to 18 years, dependent, naturally, on participation in activities geared towards integrating the labour market (as laid out in article 10(1) of the RMG law) is fundamental. It could help a great many young people to avoid the slide into homelessness and other related problems, such as drug addiction and petty crime.

1.2 *Social Housing*

Over the last few years, housing prices have gone up in a dramatic fashion. The consequences of this price evolution are many and are particularly serious for those on a low income. Unfortunately the policies of many public housing promoters and particularly of the Affordable Housing Fund have not had any real impact on this evolution. Although the Fund has constructed a substantial number of houses in the past few years, two out of three of these were intended for sale and only a tiny number of people on low-income were actually able to acquire such properties. As for the rental housing, these housing units are allocated according to very strict criteria and people that might be “risk tenants” are hardly accepted by the Fund, which does not consider these people as its target group and considers that NGOs should be responsible for housing them, though it does not make sufficient housing available to NGOs to meet the ever-increasing demand.

It may also be pointed out that disadvantaged people (disadvantaged from a financial, but also from a psycho-social point of view) have hardly benefited at all from housing policies in the last 10 to 15 years and it has become almost impossible for someone in such a situation

In Luxembourg there is no body responsible for putting in place a coordinated policy for the prevention of homelessness.



to rent housing that is both affordable and suitable. People in this situation find themselves increasingly forced to stay on in social institutions, where theoretically, they are only entitled to stay for a limited period. At the present time, more and more of these institutions are full to capacity and the waiting lists are getting longer. If these tendencies are not stopped, or should they continue to worsen in coming years, the whole social sector, and particularly the homeless sector, will feel the consequences. They will no longer be in a position to fulfil their primary function, that of working towards the social reintegration of excluded people.

We feel that the government ought to offer greater support to the development of "supported housing", on the one hand by greatly increasing the number of housing units made available to NGOs offering this type of service, and on the other by increasing the number of counselling and support jobs it funds through agreements established with these NGOs. Given the diversity of the target group and the complexity of the problems that they encounter, it is vital to develop support structures that are adapted to the specific needs of the different categories of clients and these should have personnel with confirmed experience of this type of work.

2. HELPING THE MOST VULNERABLE : THE ROLE OF NGOS

2.1. People "struck off the register" or people without legal abode

In Luxembourg, as in many countries, any resident who wishes to reside legally in the country has an obligation to register in the commune in which his/her place of residence is located. Although this is a right that all may exercise, if they fulfil the conditions, it is also a right that can be refused (or withdrawn – hence "struck off the register") from people in the following situations:

- People staying, in the long or medium term, in institutions such as prisons, clinics and therapeutic centres.
- People living on a permanent basis in campsites or holiday villages
- People who are being housed on a temporary basis by friends or family members, where the owner is not in agreement that the person be registered as officially residing there.
- Homeless people

The fact of being registered and having an official residence is, however, an essential condition for accessing many forms of social security, welfare and other rights, such as: guaranteed minimum income, unemployment payments, tax card (without which one is not employable), registration with the labour administration, voluntary adherence to a social security scheme etc.

Since guaranteed minimum income was introduced in 1986, the government, together with Caritas, has put a housing service in place, that allows people that have lost their registration in an official residence to regain their "legal existence" and those to retrieve access to guaranteed minimum income. As the service developed, the same practice has been adopted to help people get access to other social rights. Given that several hundred people use this service each year in order to recreate a "legal existence" in the country, we have chosen this housing service "Caritas Accueil Solidarité" as an example of good practice to effectively prevent homelessness in Luxembourg.

Nonetheless, there is growing awareness that this programme is a transitory measure and a nationally applicable solution needs to be found. In the face of the rapid worsening of the situation, policy-makers have reacted and have "begun to draw up a draft law that would lay out two categories of registration in every commune and which would give people, without sufficient resources to acquire a fixed residence, the possibility of being registered in this second category, with a contact address (that is the real address of a person where post and administrative documents may be sent, or in the case of a homeless person, the address of a social centre where they are regularly present)"¹.

2.2. Ex-prisoners

Luxembourg has two prisons. About one third of the incarcerated population is of Luxembourg nationality; it is estimated that about 80% of people in prison have some kind of substance abuse problem (medication, hard drugs).

In relation to the issue of homelessness, there are several major problems:

- *Support services for people in prison* are inadequate and *release from prison is hardly prepared at all*. All social workers can do is ensure that the administrative processing of the files is carried out and regular contact can only be organised in exceptional cases. Yet such support is fundamental, among others, for people serving a short sentence, for whom it is vital to retain good social links with life outside the prison, if they are to avoid returning to a total void on release.
- *Uncertain future legal and economic situation*: A standard check of the financial means at the disposal of the person is not carried out and a preventative application for guaranteed minimum income is dependent on registration in an official residence outside the prison.
- *Lack of a structure to house those released on parole*: The creation of a "parole house" would not only allow those concerned to progressively readapt to life outside the prison, but would also serve as a new official residence for all those who have lost their previous residence and help people avoid having to go through the experience of homelessness.

2.3. Drug addicts and people suffering from mental illness

For these two categories of people, the danger of becoming homeless is ever-present. They are at risk when their problem first manifests itself, but also even when they have gone through treatment to help them return to independent living outside the treatment centre or psychiatric clinic.

In relation to **drug addicts** and people at risk of becoming dependent on drugs, the measures to ensure that they don't become homeless cross over to a great extent with the structures which are intended to prevent homelessness among young people age 16 to 25 (outlined below). As well as the services made available to the person himself or herself, it is just as important to provide psycho-social help to parents and families of addicts and to support them in their efforts to deal with crisis situations and to offer a stable home to people who are at risk. In this context, the phenomenon of "majoring out" seems to us to be particularly important and the slide into full addiction may be avoided if the young person at risk is in a stable and supportive environment.

In our opinion it is also important to put in place more liberal policies in this area, providing, among other things, for the decriminalization of users and the putting in place of substitution programmes and even programmes of controlled distribution of heroin. As experience in other countries has shown, measures of this kind can substantially reduce secondary effects of drug use, relating to the illegal drugs trade, such as prostitution and petty crime, but also homelessness.

It is also a matter of some urgency to substantially reinforce the measures for supporting and reintegrating people who have successfully managed to overcome a drugs habit and gone through residential therapy. At present there are two "post therapy" projects that offer supported housing for people in this situation. Unfortunately, this is not sufficient to meet the needs in this area and many people are forced, for want of other alternatives, to return to a homeless shelter at the end of the long and costly residential treatment that they have successfully followed. In such a case scenario, it is rare for people to be able to make a fresh start, without any relapse.

In this context, we would like to draw attention to the work of the asbl Centre Emmanuel and their project "Maison Schweich", which has allowed a certain number of people to find stability over the last three years. An innovative element of this project is the "early warning system" that has been put in place within this group of five people, with the help of text message technology. Through this system, which operates on a 24-hour basis, only three people out of sixteen have experienced a relapse in the two and a half years that the project has been operating.

Following the reforms carried out in the psychiatry sector in Luxembourg in the 80's and 90's



in the twentieth century, the number of beds, (known as "long-term" beds), was drastically cut and the principle of short term stays became generalised. Due to the lack of an adequate number of alternatives, many patients move back and forth between the psychiatric clinics and accommodation for homeless people and are known as "swing-door patients." They are considered to be "chronic" clients. Thus the staff of the Ulysse Shelter (night shelter for homeless people) estimate that about one third of their users is permanently made up of people suffering from chronic mental illness.

2.4. Young people and homelessness

In this category, one finds both young minors from the ages of 15 to 18 and young adults aged 18 to 25. These are school children, apprentices, university students, both from Luxembourg and abroad, but also young unemployed people who have no right to any kind of social welfare payment. Often these young people come from various institutions, though increasingly they are also young people from broken homes.

The main difficulties that they encounter are due to insufficient or irregular income, especially in the case of students or apprentices, as well as a strong desire for an independent life, but with very little experience of living independently. Their economic situation tends to be very precarious, as they are often in transition between education and work.

For those over eighteen, there are different types of housing offered in combination with adapted support services. Children's homes offer various formulas to their young people. Some institutions also offer more flexible solutions to young minors, who already more mature and more capable of living independently.

In order to meet the housing needs of disadvantaged young people, the Wunnengshëllef / Feantsa platform has put forward a certain number of measures which would respond to the various difficulties they may encounter :

- Harmonise and adapt to their needs the various financial support available to students, school children and apprentices
- Respond to the specific housing needs of these young people by increasing the number of community and individual housing units.
- Respond to the specific support needs of these young people by organizing support services to be offered in combination with this housing, in cooperation with schools, local social services and NGOs.

2.5. Refugees and immigrants

Over the past century, immigration to Luxembourg has been very high, much of it organised by the government for economic reasons (construction, iron and steel industry). At the end of the 70s, a certain number of residential centres for immigrants were created, run by the Government Commission on Foreigners, of the Ministry for the Family and intended to be a reception point from the moment of arrival. Various NGOs (Caritas, ASTI, etc.) also have specific services with qualified staff, specialised in the area of assisting immigrants.

For this reason, there has never been a large number of immigrants or refugees among the homeless population. In fact, a few years ago the government asked that immigrants and refugees no longer be accepted in these homelessness structures, except for a weekend or a night and that immigrants be referred to Ministries and organisations who are competent in this area. However, access to centres for immigrants is limited to just those people who have an official residence permit or who have begun the legal process for obtaining such a status (eg asylum request). All other people are not given access to these housing structures and are thus, de facto, homeless.

¹ Evaluation of the NAPInclusion 2001-2003 – Ministry for the Family