

European Observatory on Homelessness

# European Journal of Homelessness

Volume 16, No. 1\_ 2022



Co-funded by the  
European Union

## **EUROPEAN JOURNAL OF HOMELESSNESS**

### **Journal Philosophy**

The European Journal of Homelessness provides a critical analysis of policy and practice on homelessness in Europe for policy makers, practitioners, researchers and academics. The aim is to stimulate debate on homelessness and housing exclusion at the European level and to facilitate the development of a stronger evidential base for policy development and innovation. The journal seeks to give international exposure to significant national, regional and local developments and to provide a forum for comparative analysis of policy and practice in preventing and tackling homelessness in Europe. The journal also assesses the lessons for Europe, which can be derived from policy, practice and research from elsewhere.

### **Editorial Team**

Eoin O'Sullivan, School of Social Work and Social Policy, University of Dublin, Trinity College, Ireland (Lead Editor)

Volker Busch-Geertsema, GISS (Association for Innovative Social Research and Social Planning), Bremen, Germany (Coordinator of European Observatory on Homelessness)

Mike Allen, Focus Ireland, Dublin, Ireland

Isabel Baptista, Independent Researcher, Lisbon, Portugal

Lars Benjaminsen, VIVE – the Danish Center for Social Science Research, Copenhagen, Denmark

Nicholas Pleace, Centre for Housing Policy, University of York, UK

Nóra Teller, Metropolitan Research Institute, Budapest, Hungary

### *Editorial Assistant*

Courtney Marsh, University of Ghent, Belgium

## **Contributors**

Alice Bowen  
National Addiction Centre  
King's College London, UK  
Alice.m.bowen@kcl.ac.uk

Dennis P. Culhane  
University of Pennsylvania, USA  
culhane@upenn.edu

Harm Deleu  
Odisee University of Applied Science, Belgium and  
University of Antwerp, Netherlands  
harm.deleu@odisee.be

Joe Doherty  
University of St. Andrews, Scotland  
jd@st-andrews.ac.uk

Ronald Drummond  
Washington University School of Medicine  
USA  
rrdrummond@wustl.edu

Brendan O'Flaherty  
Department of Economics  
Columbia University in the City of New York  
USA  
bo2@columbia.edu

Siobhan Garrigan  
School of Religion, Theology, and Peace Studies  
Trinity College Dublin, Republic of Ireland  
garrigs@tcd.ie

Hiroshi Goto,  
Rikkyo University, Japan  
h\_goto@rikkyo.ac.jp

Laura Hermann  
National Addiction Centre  
King's College London, UK  
Laura.hermann@kcl.ac.uk

Vicky Hung  
Washington University School of Medicine  
USA

František Kalvas  
Department of Sociology  
University of West Bohemia  
Czech Republic  
kalvas@kss.zcu.cz

Nikos Kourachanis  
Panteion University of Social and Political Sciences  
Athens, Greece  
n.kourachanis@gmail.com

Nikol Kubátová  
Department of Sociology  
University of West Bohemia  
Czech Republic  
nkubatov@kss.zcu.cz

Landon Kuester  
National Addiction Centre  
King's College London, UK  
landon.kuester@kcl.ac.uk

Matthew D. Marr  
Florida International University, USA  
mmarr@fiu.edu

Nicola Metrebian  
National Addiction Centre  
King's College London, UK  
Nicola.metrebian@kcl.ac.uk

Joanne Neale  
National Addiction Centre  
King's College London, UK  
joanne.neale@kcl.ac.uk

Caryn Nicolson  
Frontline Fife, Scotland

Briege Nugent  
University of Salford, UK  
briegenugentresearch@gmail.com

Stephen Parkin  
National Addiction Centre  
King's College London, UK  
stephen.parkin@kcl.ac.uk

Cameron Parsell  
School of Social Science  
The University of Queensland  
Australia  
c.parsell@uq.edu.au

Stefanie Plage  
School of Social Science  
The University of Queensland  
Australia  
s.plage@uq.edu.au

Emmert Roberts  
National Addiction Centre  
King's College London, UK  
emmert.roberts@kcl.ac.uk

Deborah Robson  
National Addiction Centre  
King's College London, UK  
deborah.j.robson@kcl.ac.uk

Juan Manuel Rodilla  
St. John of God, Valencia, Spain  
juanmanuel.rodilla@val.ohsjd.es

Nadia Rondino  
St. John of God, Valencia, Spain  
nadielena@hotmail.it

Mieke Schrooten  
Odisee University of Applied Science, Belgium and  
University of Antwerp, Netherlands  
mieke.schrooten@odisee.be

John Strang  
National Addiction Centre  
King's College London, UK  
john.strang@kcl.ac.uk

Rebecca Thys  
VIVES University of Applied Sciences, Belgium

Quinn Tyminski  
Washington University School of Medicine  
USA  
tyminskiq@wustl.edu

Jan Váně  
Department of Sociology  
University of West Bohemia  
Czech Republic  
vanejan@kss.zcu.cz

### **International Advisory Committee of the European Journal of Homelessness**

Professor Isobel Anderson (University of Stirling), UK  
Professor Tim Aubry (University of Ottawa), Canada  
Professor Pedro José Cabrera (Comillas Pontifical University of Madrid), Spain  
Professor Jochen Clasen (University of Edinburgh), UK  
Professor Dennis P. Culhane (University of Pennsylvania), USA  
Professor Pascal De Decker (KU Leuven), Belgium  
Professor Emeritus Joe Doherty (University of St Andrews), UK  
Dr. Evelyn Dyb (Norwegian Institute for Urban and Regional Research), Norway  
Mr. Bill Edgar (European Housing Research Ltd), UK  
Professor Suzanne Fitzpatrick (Heriot-Watt University, Edinburgh), UK  
Professor Paul Flatau (Murdoch University), Australia  
Professor Stephen Gaetz (York University), Canada  
Professor Susanne Gerull (Alice Salomon Hochschule Berlin), Germany  
Professor József Hegedüs (Metropolitan Research Institute Budapest), Hungary  
Professor Guy Johnson (RMIT University, Melbourne), Australia  
Professor Marcus Knutagård (Lund University), Sweden  
Professor Claire Lévy-Vroelant (Université Paris 8 -Vincennes – Saint-Denis), France  
Dr. Pete Mackie (Cardiff University), Wales  
Professor Thomas Maloutas (Harokopio University, Athens), Greece  
Dr. Magdalena Mostowska (University of Warsaw), Poland  
Professor Ingrid Sahlin (Lund University), Sweden  
Professor Marybeth Shinn (Vanderbilt University), USA  
Dr. Svetlana Stephenson (London Metropolitan University), UK  
Professor Jack Tsai (Yale University) USA  
Professor Antonio Tosi (Politecnico University of Milan), Italy  
Professor Judith Wolf (UMC St Radboud, Nijmegen), The Netherlands

### **Consultative Committee of the European Journal of Homelessness**

Alexander Machatschke, Austria	Alessandro Pezzoni, Italy
Danny Lescauwaet, Belgium	Aida Karčiauskienė, Lithuania
Robert Krejčí, Czech Republic	Andreas Vogt, Luxembourg
Bo Heide-Jochimsen, Denmark	Jakub Wilczek, Poland
Sanna Tiivola, Finland	Ana Martins, Portugal
Jean Michel David, France	Nicoletta Gontariu Secrieru, Romania
Werena Rosenke, Germany	Bojan Kuljanac, Slovenia
Lazaros Petromelidis, Greece	Arturo Coego, Spain
Istvan Dandéc, Hungary	Kjell Larsson, Sweden
Wayne Stanley, Ireland	Jules Van Dam, The Netherlands
	Matthew Downie, UK

---

# Content

---

## Articles

---

### **Brendan O’Flaherty**

Why It Won’t Ever Be 2019 Again:

Guessing How COVID Will Change Homelessness 13

### **Stefanie Plage and Cameron Parsell**

Access to Health for People Experiencing Homelessness 29

### **Joanne Neale, Stephen Parkin, Alice Bowen, Laura Hermann, Landon Kuester, Nicola Metrebian, Emmert Roberts, Deborah Robson and John Strang**

Information and Communication Technology (ICT) Use Amongst People  
Who Were Housed in Emergency Hotel Accommodation During  
the COVID-19 Pandemic: Lessons from a Policy Initiative 53

### **Hiroshi Goto, Dennis P. Culhane and Matthew D. Marr**

Why Street Homelessness Has Decreased in Japan:  
A Comparison of Public Assistance in Japan and the US 81

### **Harm Deleu, Rebecca Thys and Mieke Schrooten**

The Role of Non-profit Organisations in the Support  
of People Experiencing Homelessness in Brussels 101



## Research Notes

---

### **Briege Nugent, Caryn Nicolson and Joe Doherty**

Not Just a 'Youth Problem': LGBT+ Experiences  
of Homelessness Across the Life Course in Fife, Scotland 129

### **Jan Váně and František Kalvas**

Peace Polls as a Source of Inspiration for Homelessness Research 145

### **Quinn Tyminski, Vicky Hung, and Ronald Drummond**

Visual Research Methodologies for Homelessness:  
A Synthesis of the Literature 159

### **Nikos Kourachanis**

Implementing Refugee Integration Policies in a Transit Country:  
The HELIOS Project in Greece 177

### **Nadia Rondino and Juan Manuel Rodilla**

Longitudinal Study of the Homeless Population in Valencia 197

## Review Symposium

---

### **Manuel Mejido Costoya (Ed.) (2021)**

Land of Stark Contrasts:  
Faith-Based Responses to Homelessness in the United States 213

## Book Review

---

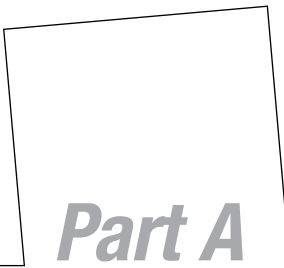
### **Jan Váně a František Kalvas (2021)**

Homelessness: Probes to Excluded Environments 229





# Articles





---

# Why It Won't Ever Be 2019 Again: Guessing How COVID Will Change Homelessness

---

Brendan O'Flaherty

Department of Economics, Columbia University in the City of New York

➤ **Abstract** *Some of the changes that were adopted because of the pandemic will outlast the pandemic. Most notably, houses will be used for more purposes. This will probably increase the price of housing and so induce an increase in homelessness if policies do not respond appropriately. The rules of thumb and ways of thinking that worked pre-COVID will probably not work post-COVID.*

➤ **Keywords** *post-COVID, Homelessness, Land Value*

## Introduction

---

We all know now that the volume of homelessness in a society depends not so much on the volume of pathologies in that society but on how the society is organised and how it works, especially how housing markets work. It follows that if a society changes, homelessness will change too. Since January 2020, all of our societies have changed immensely. Some of those changes are probably temporary, but others are probably not. Toothpaste does not go back into the tube after you stop squeezing it. Some of these long-lasting changes affect us in some of the most fundamental ways possible: what we think we can do with our lives, what we think about other people, and what we think other people think about people and the world around them. So, housing and homelessness will change too. This article explores what those changes are likely to be and how we should react. I'm not a prophet or a fortune-teller. I don't play the stock market or bet on football games. I'm probably wrong. But we need to start thinking about the long-term implications of COVID for housing and homelessness now, rather than wait for someone to receive a divine revelation.

## Changes in Capabilities

---

Recurrent outbreaks of respiratory illness are likely to continue for a decade or more after the main pandemic. Schroeder et al. (2021) found that the probability of influenza outbreaks and influenza mortality were elevated for more than a decade in the US and Britain following the epidemics of 1890-91 and 1918-19. Even if it ends soon, the pandemic will probably induce some long-term changes in people's bodies and minds. Long COVID, for instance, may leave a large number of people with reduced capabilities for the rest of their lives, and the losses in learning that children have experienced at key points in their development may turn out to be irreversible. But it is probably too early to tell. Damage *in utero* is also possible. Children who were *in utero* during the 1918-19 pandemic in the US had "reduced educational attainment, increased rates of physical disability, lower income, lower socioeconomic status, and higher transfer payments" in the 1960-1980 censuses (Almond, 2006, p.672). There is no comparable evidence for COVID, but of course it is early. If any of these trends develop, they are likely to show up among the next generation of homeless people.

## Changes in What we Use Housing For

---

For me, it seems that the most profound changes that the pandemic has wrought are to what we use things for. As an individual, for instance, I don't want a computer just to have it or to be known as a computer owner. I want it because of what I think I can do with it, and I want to do those things not just to do them, but because of what the doing of them means for my life and the lives of those I care about. We often think of these relationships between things and purposes as stable and settled—chairs are for sitting on and shoes are for wearing on your feet—but in fact they are not. Consider my slide rule. A long time ago, I used it for making calculations quickly and accurately. Today, I keep it for sentimental reasons and to start conversations. The pandemic has shaken up many of these relationships between objects and purposes very quickly. For people who care about homelessness, the most important relationships shaken up are those with housing. The uses of housing have never been stable. Two hundred years ago a lot of people thought of houses as places to keep pigs and chickens, not microwaves and Pelotons. The shake-ups we are experiencing now are big and fast.

Housing has always served many purposes. When I taught housing economics, I usually started by spending 15 minutes going over a long list that had mainly been stable for years. Defining homelessness is hard because the list is so long and because people disagree about which items on the list are more important. One of the beauties of the ETHOS typology is that it enumerates quite a few of the reasons

why people used to want homes. For many people (not necessarily all), the pandemic has added to the list of reasons to want housing. In this section, I consider a dozen of them.

Start with the use of houses as workplaces, since this expanded use has seen the most attention, both scholarly and popular. Before the pandemic, almost everyone did some work at home, even if it was as little as getting dressed for work or thinking about work problems. During the pandemic, working from home (WFH) skyrocketed, but as a temporary expedient. But this expedient is no longer temporary; ending the pandemic will not completely reverse this process. The toothpaste does not go back into the tube when the pandemic stops squeezing. How the pandemic changed WFH forever is a story whose main features I will repeat many times and so I want to go into some detail now. The temporary expedient induced three permanent changes.

First, many people invested in skills and equipment needed to work at home. Everyone learned Zoom and chat, of course, but people also upgraded their connectivity, purchased headphones and cameras, changed around their lighting and background, and bought new computers.

Second, innovation occurred, and quality improved greatly. Before the pandemic, remote meeting and working technology was a technological backwater, without even reasonable security protocols. Hardly anybody used it, and companies invested little in improving it. Companies invested little in improving it because hardly anybody used it. That all changed with the pandemic. The technology for remote work is much better today than it was before the pandemic—and a lot better than it would have been absent the pandemic.

Third, the problems of transition and coordination were eliminated because everybody moved at the same time --- they had no choice. Without the pandemic, ‘first-mover disadvantage’ might have kept the world from learning about remote work forever. Before the pandemic, a lone worker or even a lone firm that decided to work remotely would be taking a big risk: they would have to invest in the technology, but if no one else followed, they would have no one to have remote meetings with, and they would probably be labelled as a shirker. The same problem exists still in decisions of victims of serial sexual harassers—the first woman to come forward is likely to be vilified and discredited unless other women come forward pretty quickly (Ayres and Unkovic, 2012). The pandemic eliminated first-mover disadvantage because everybody moved at the same time, and nobody ever has to worry about being the first mover again.

What happened next is also a common story—WFH turned out to not be bad in all dimensions for all people. The big advantage is that it reduces commuting costs and time—clothing costs, too. Some workers appreciate the flexibility. Remote work appears to be more egalitarian: polls find that women and people of colour tend to favor remote work more than others (Pelta, 2021; Tulshyan, 2021; Wong, 2021). And a lot of work can get done at home—more than most people probably thought. Remote work is not perfect for every purpose (dentists and butchers, for instance, cannot work from home), and it is pretty poor even for many purposes with which it is being used now (Zoom calls for mass firings are an outstanding example). What is important is that WFH is good for some people and for some purposes, and the investments and the coordinated move have made it much easier to use going forward.

Barrero et al. (2021) estimate that about 20% of workers will continue with WFH, and that many people will work from home one or two days a week, and that is only during normal times. Even people who say that they will return to the office are not all going to push their way in when blizzards or hurricanes hit, or tornadoes are forecast. People who go to the office when they are sick will be treated as pariahs, not as heroes. So even those who will think of themselves as full-time office workers will need space and equipment at home to handle bad weather, emergencies, and illnesses. This demand for being able to work at home has implications for housing markets. Pre-pandemic, workers who worked from home needed more space at home and had bigger houses than similar workers who did not (Stanton and Tiwari, 2021). Post pandemic, people will spend more time working from home than they did pre-pandemic, and so they will want (and be willing to pay for) bigger houses to work in. These changes will probably increase productivity. Barrero et al. (2021) estimate a 5% increase in productivity from WFH, but Behrens et al. (2021) raise questions about all of these gains.

WFH is not the only area where this dynamic will play out. I can think of 11 other similar stories.

1. *Epidemiological safety*. This has long been a reason to want a house, but it had so faded from public consciousness before the pandemic that neither ETHOS nor I included it in our lists. At the start of the pandemic, we were all taught to hunker down at home with a small number of people whom we trusted. Post pandemic, this reason will fade in immediate importance, but as Schroeder et al. (2021) point out, more than the usual number of outbreaks will probably continue for decades. Since many people will worry about future pandemics even if they do not occur, houses will continue to be a form of epidemiological insurance.
2. *Schools for children*. Brick and mortar schools will of course reopen, but it will not be 2019 again. At the very least there will be no snow days when all learning stops, and the weather bar required to move classes online will be a lot lower



than the bar that used to be required to declare a snow day. Some classes will be offered only online because brick and mortar schools will not have reasonable numbers. Why can't high schools teach Urdu, now, for instance, if a virtual class can be gathered from several brick-and-mortar schools? There will be some great teaching available online, and some parents will want to take advantage of it even if schools do not. Some students do better online. Finally, kids with the flu will not be allowed in many schools—why should they be? These advantages of remote learning may not be enough to make up for the chaotic losses that current cohorts of schoolchildren suffered in the pandemic, but they may make schooling better for future cohorts.

3. *Schools for adults.* The advantages for adults of going to school at home are going to continue. Getting to a community college after work to learn coding or prepare for an accounting exam is a trying experience for many. Many institutions learned how to give these courses online during the pandemic, and that knowledge will not disappear. Larger classes can be assembled if students do not have to travel. A lot more adults will be able to pick up new skills when they can do so at their own pace in their own place. This should increase productivity.
4. *Entertainment centers.* Movie theaters? Maybe some of them will survive. But still many people will want to watch movies at home, especially in bad weather, and many more first-run movies will be available for viewing at home. The equipment is there now, in many cases, and so is the knowledge of how to use it. Movies will continue to be made for home consumption. Other forms of entertainment will continue at home too. There will be in-person concerts, but some people will still want to watch some livestreamed concerts, for instance. Family reunions, weddings, funerals, and wakes will probably continue mainly to be in person, but for some people at some times—especially those with family dispersed around the globe—the opportunity to mark these events remotely will be very appealing now that the stigma attached to online has been reduced. It will not seem strange any longer to have an online wedding, guests will understand how to log in and how to celebrate, and wedding planners now have skill and experience in planning these events.
5. *Exercise areas.* The equipment is there, and will not go away, and many people are used to Pelotons and Zumba over the internet. Trainers now know how to conduct their sessions online and how to get paid for them. The old ways will not disappear—you cannot recreate a hard-core gym at home—but the new ways will not disappear either.

6. *Civic, religious, and political forums.* Almost all civic, religious, and political life went online during the pandemic, and now that many organisations and members have the skills and equipment it will not all return. *Robert's Rules*, for instance, came out with a new edition that includes rules for electronic meetings. The absence of rules made holding formal meetings online challenging before the pandemic, but after the pandemic those rules will not disappear. During the pandemic, many organisations had surprising successes. The Biden campaign and transition, for instance, was conducted almost entirely online, and it was successful in ways that no one had anticipated. The Newark History Society had in-person meetings before COVID with 50-80 people in attendance; online meetings during COVID have often had 200 or more people attending. Some states in the US are now requiring local governments to continue providing remote access to their meetings, and groups in other states are campaigning for such a requirement (Best Best and Krieger, 2021; Rode, 2021).
7. *Health care.* Telehealth did not make as much progress during the pandemic as many other online endeavors, but it made some, and they will not be reversed. The rules in many nations were changed to permit telehealth, at least for the emergency, some physicians have developed skill, and new uses (for instance, rural households) continue to be found.
8. *Delivery destinations.* Many people turned to deliveries to replace brick and mortar retail experiences, and a large structure was developed to facilitate deliveries initiated online, while some brick-and-mortar operations have gone out of business. Many people have found that they like deliveries, and getting your groceries delivered is no longer considered decadent in some communities. Deliveries need destinations, and homes are the destinations. Single family homes need porches, and apartment buildings need storage space.
9. *Warehouses.* Many people stockpiled at the start of the pandemic. Sudden shifts in demand and sudden interruptions to supply caused shortages or anticipated shortages, and so stockpiling was not an irrational response then. Recent months have seen further shortages. It is easier to stockpile if you can get stuff delivered and do not have to schlepp it yourself. Stockpiling requires a place to store, and homes supplied the place to store. The experience of the past two years has taught many people to be wary of future shortages, and so does climate change—the anticipation of extreme weather often triggers stockpiling and shortages, and climate change is increasing the frequency of extreme weather. Many people will want more room to stockpile.
10. *Nursing homes.* At least a quarter of the Americans who died from COVID up to November 2021 were residents of nursing homes (Long Term Care COVID Tracker, 2021). About 0.4% of Americans are residents of nursing homes

(Koerber and Wilson, 2021). Most of us realise today that it is not a great idea to put the oldest, sickest, frailest citizens into a congregate care setting where they can all get the same disease at the same time or cannot be rapidly evacuated. So, nursing homes are going to shrink, if not disappear. What will replace them? Home care, which was already growing at the expense of congregate care before the pandemic in many developed countries. Achou et al. (2021) found in a Canadian poll that 72% of respondents in their 50s and 60s were less likely to enter a nursing home because of their COVID experience. These respondents are saving more, and most would support greater government subsidies to home health care. For home care, you need a home. The end of the pandemic will not reverse the new fear of nursing homes.

11. *Protection from weather.* Not directly related to the pandemic, and protection from weather has long been among the reasons why people want housing, but as we all know climate is getting worse in many parts of the world, and so there's a lot more weather to protect people from. Climate change interacts with many of the other reasons for housing: the worse the weather outside, the more house you want to do your work, to go to school, to exercise safely, to participate with your community, and so on.

Are there offsetting changes? Yes, but probably not as large. There are fewer children, at least for the next few years, and maybe longer if raising a child requires a lot more house. A physical address is no longer necessary for many purposes because a phone takes its place, but this change occurred before the pandemic. Probably the biggest offsetting changes have taken place in fintech—people are holding much less cash, and so have less need of places to hold their cash safely. What they need to protect instead are passwords and cards. Unfortunately, good ways of protecting passwords and cards do not appear to be developing quickly, but they might.

## **Direct Implications for Homeless Services**

---

What are the implications for homelessness? The least important is that ETHOS should be revisited, probably with a particular emphasis on technology. The FEANTSA reports in the last several years on information and communications technology are a big step in this direction (FEANTSA, 2013; 2021). Bekasi et al. (2021), for instance, describe how telemedicine can be used to help homeless people.

More immediately, emergency accommodations, social housing, and everything in between will have to be designed with these uses in mind. Housing means something different now, and so does homelessness.

Treating homelessness will probably cost more—but it will do more too. Goals that used to be pursued through the State's health, education, employment, and cultural budgets, for instance, will best be pursued in housing and homelessness (just as employers who think WFH will reduce their real estate costs will probably end up paying directly or indirectly for their workers' larger homes and improved connectivity). The State, for instance, can hire great teachers and equip them with great lesson plans, but if kids do not have good internet connections and quiet places to connect from, it would not make any difference during a large part of the school year.

### **Indirect Implications of Increased Demand for Housing**

---

As an economist, I am also interested in the indirect implications of the new and expanded uses of housing—and not just for people experiencing homelessness or at risk of homelessness. Indeed, most of the increased demand for housing is going to come in the middle and especially the upper parts of the income distribution. Economists have found it useful to think of houses as a combination of structure and land. Structure is what goes into building a house or apartment; land is where it is, and what else cannot be near it.

Structure usually has less impact on the rest of the world than land. The inputs to structure are labor, concrete, steel, plaster, wood, and so on, and the supply of those things can expand pretty easily in the long run without raising price much. There may be lumber or cement shortages now and then, but in the long run your building a deck is not going to make my table cost more. Outside the market one person's structure can affect others some—if it blocks their light or offends their aesthetic sensibilities, for instance—but that effect is limited, especially if the structure in question is not close to the places the other people in question never go, or if the structure is interior or in a backyard.

Land, on the other hand, cannot be expanded even in the long run and does affect millions of people pretty directly, although they usually do not recognise it. The amount of land within one kilometer of Times Square is going to be 3.14 square kilometers whether the price is high or low. Every additional lot or expanded lot between my house and Columbia means I have to travel further. Every additional or expanded lot between my house and reservoir means that the pipe to my house has to be longer, and every additional or expanded lot between my house and hospital means that the ambulance has to travel further (both coming and going).

The bottom line is that if the demand for more home offices, schools, gyms, and so on translates into more structure—adding a home office at the back of an existing house, for instance—then it's unlikely to raise rents except for the affected property.

On the other hand, if demand for more housing translates into demand for more or bigger lots, then rents for everyone housed will rise, because everyone housed uses some land. That is how the changing uses of housing can affect homelessness.

Will the new uses for housing by upper- and middle-income people come on net more from structure or more from land? I don't know. It is likely to be some from each, and so some part of the increased demand for housing is going to result in higher rents and more homelessness. But policies can probably affect how much.

Climate change is also going to affect future rents. Climate change will render some land unusable for housing, which may increase the price of the remaining land. Better storm sewers also make land more expensive, and greater storm water retention requirements may increase demand for land per house. If large parts of the Earth are rendered uninhabitable, land prices in the remaining habitable parts will rise. But climate change will also make structure more expensive: better insulation, stronger windows, more water-tight basements, and possibly more elevated structures.

Of course, there are countertrends that may operate in the other direction. The most frequently mentioned countertrends are the obvious conservation-of-space considerations: if activities shift into houses, they have to leave somewhere else. So, the post pandemic world, in this view, will have fewer movie theaters, nursing homes, brick and mortar stores, and offices, for instance. This land, and maybe even these buildings, can become housing.

For most items on this list, I think this is true, and policy should encourage it. But I don't think it's enough. There are two reasons: relative magnitudes and office expansion.

First, relative magnitude. Consider New York City, because I am familiar with the data, and the two least dense parts of NYC, Queens and Staten Island. Even though New York as a whole has the greatest amount of commercial and office activity in the United States by far, about 10 times as much land is used for residences as for stores and offices (New York City Department of City Planning, 2013). In Queens and Staten Island, which are more like the rest of the developed world than Manhattan is, the ratios are 14 times and 11 times, respectively. To offset an increase of 10% in the amount of land used for housing, commercial, and office activity would have to be wiped out.

Second, office expansion. For cities like New York, Los Angeles, London, Dublin, Amsterdam, Milan, Frankfurt, and Paris, I do not think offices will contract; office employment and income will probably grow in the long run.

The intuition is that city size is determined by a battle between agglomeration and congestion. Agglomeration means that for certain activities if a lot of people are working in close proximity to each other, they can accomplish a lot more per capita;

more people makes things better. Agglomeration is a very strong force; it is a major part of the reason why wages in Paris are about 15% higher than wages in other French cities and 60% higher than wages in French rural areas (Combes et al., 2008). Wages in the largest cities in China are about 30% higher than wages in medium-sized cities and more than 50% higher than rural wages (Peng, 2019), and tiny houses in Silicon Valley cost over a million euros.<sup>1</sup> Congestion means that the more people living and working in the same area, the more they get in each other's way, both literally and figuratively: longer commutes, loss of privacy, crowding, contagion, crime, noise, just general nastiness. Agglomeration makes cities good places to live and work and so attracts people to cities; congestion does the opposite and repels them. As the balance between these forces shifts, city size shifts and rent responds.

Obviously, COVID itself belongs to the congestion side of the ledger, and that is why the great cities of Europe and North America are still pretty deserted now. But sooner or later, some combination of medical ingenuity, herd immunity, and luck will drive COVID and its variants into abeyance. The long-term question is what the effect of remote work technologies will be. In my mind, they reduce congestion, just like a new subway system does. If you go to the office three days a week rather than five, your weekly cost of commuting has fallen by 40%. Cheaper commutes imply bigger metropolitan areas, and greater gains from agglomeration. Zoom is just another step in the progress we have made over the last several centuries by separating activities and specialising by location. Work that does not have to get done in the centre of the city should not get done in the centre of the city. The huge productivity gains cities like Paris realise would be unimaginable if every household had to have its own cow, chickens, and vegetable garden. New York could not operate the way it does if everybody who worked in midtown had to exercise there, shower there, send their kids to school there, vacation there, and be buried there.

On the other hand, bigger cities imply higher rent and higher rent implies more homelessness. Empty offices are not going to offset the increased demand for housing because they are not going to be empty. For the biggest, most spectacular cities—the places where homelessness was rising fastest pre-pandemic in the US and in most of Europe—the effect is probably going to be the opposite.

---

<sup>1</sup> A house in Palo Alto with under 122 square meters was being offered for €1 284 million in December 2021 (Your Home in Silicon Valley, 2021).

## What to Do?

---

So, I am not optimistic about homelessness in the post pandemic world. Many of the new technologies are wonderful and they are going to enrich the lives of many people, including many people listening today. But they probably will not reduce homelessness. COVID is not your friend. My picture of the post-COVID world has (1) more uses of housing, and more housing per capita; (2) higher wages and employment, and generally greater prosperity; (3) continuing difficulties with public health and with people who have suffered permanent damage from the pandemic; and (4) higher rents and housing costs. These features do not have to imply greater homelessness, but they will if policies are not adjusted. I do not have a detailed plan for the post-COVID world. Remember we are just starting to think about this world—in December 2019 there wasn't even a word "COVID." COVID has also taught us not to make plans that we cannot change. I cannot tell you what I will be doing in six months. But I have some general recommendations.

For advocates and researchers, please do not use old mechanical measures like poverty is half of median income or everyone should spend a third of their income on housing. Start with what really matters and build from there. One of the main messages in this article should be that what people need to live minimally decent lives has changed because the world has changed, and it costs more. Everyone needs an appropriate COVID vaccine, and a booster shot (or two). Families with kids are not housed unless they have good internet access, and older people in southern Europe are not housed unless they have air conditioning. Maybe northern Europe too. Total lack of internet access is social exclusion. Everybody needs a plan to escape from disastrous weather. This costs money. We have to deal with it intelligently.

For policy generally, look to land. The wonderful new technologies are inducing wild changes in land values. There have been and will be great windfalls in many of the same metropolitan areas where homelessness will rise. A heavy tax on land values is not only a good way to finance the response to homelessness, but also a good way to channel the growth of housing demand into structures instead of land. Remote work and other new technologies make income and sales taxes, and many other traditional taxes less effective and more distortionary, and so land taxes would be needed even without the great windfalls and growing needs. This is not a new idea; it was developed by Henry George in 1879 in one of the most popular books in the US in the 19<sup>th</sup> century.

In general, remember that we got through the pandemic so far by being flexible and imaginative, by embracing new technology, and by spending a lot of money. Do not expect the post pandemic to be a lot different. Whenever it arrives.



### *Acknowledgements*

I have benefitted from helpful comments from Ingrid Gould Ellen, Eoin O'Sullivan, Nora Teller, and participants at the FEANTSA European Observatory on Homelessness 2021 Research Conference.



## ► References

Achou, B., De Donder, P., Glenzer, F., Lee, M., and Leroux, M-L (2021) *Nursing Home Aversion Post-Pandemic: Implications for Savings and Long-Term Care Policy* (CESIFO discussion paper 9295).

Almond, Douglas, 2006, Is the 1918 Pandemic Over? Long Term Effects of *in utero* Influenza Exposure in the Post-1940 US Population, *Journal of Political Economy* 114(4) pp.672-712.

Ayres, I. and C. Unkovic (2012) Information Escrows, *Michigan Law Review* 111 p.145 et seq.

Barrero, J.M., Bloom, N., and Davis, S.J. (2021) *Internet Access and its Implications for Productivity, Inequality, and Resilience* (Becker Friedman Institute working paper, July).

Behrens, K., Kichko, S., and Thisse, J-F. (2021) *Working from Home: Too Much of a Good Thing?* (Centre for Economic Policy Research discussion paper 15669).

Békási, S., Gyórfy, Z., Döbrösy, B., Bognár, V., Radó, N., Morva, E., and Girasek, E. (2021) *Measuring Openness Towards Telecare Among People Experiencing Homelessness in Shelters Offering Mid- and Long-Term Accommodation* (Paper presented at the 15<sup>th</sup> FEANTSA European Observatory on Homelessness Research Conference). [Accessed 20 December 2021]. Available at: [https://www.feantsa.org/public/user/Observatory/2021/Research\\_Conference/Presentations/WS11\\_Bekasi.pdf](https://www.feantsa.org/public/user/Observatory/2021/Research_Conference/Presentations/WS11_Bekasi.pdf).

Best Best and Krieger (2021) *Are Virtual Meetings Here to Stay?* [Accessed 21 December 2021]. Available at: <https://www.jdsupra.com/legalnews/are-virtual-public-meetings-here-to-stay-3785220/>.

Combes, P., Duranton, G., and L. Gobillon (2008) Spatial Wage Disparities: Sorting Matters! , *Journal of Urban Economics* 63(2) pp.723-742.

FEANTSA, 2013, *Using Information and Communication Technology in Addressing Homelessness*. [Accessed 20 December 2021]. Available at: [https://www.feantsa.org/download/using\\_ict\\_to\\_address\\_homelessness-26560127157270351298.pdf?force=true](https://www.feantsa.org/download/using_ict_to_address_homelessness-26560127157270351298.pdf?force=true).

FEANTSA, 2021, *Webinar—Digitalisation and Homelessness: How to Ensure No One is Left Behind, May 31*. [Accessed 20 December 2021] Available at: <https://www.feantsa.org/en/event/2021/05/31/webinar?bcParent=22>.

George, Henry, 1879 [2001] *Progress and Poverty: An Inquiry into the Cause of Industrial Depressions and of Increase of Want with Increase of Wealth... The Remedy* (New York: Robert Schalkenbach Foundation). Author's edition published by W.M. Hinton and Company, San Francisco, 1879.

Koerber, W. and Wilson, S. (2021) *New 2020 Census Results Show Group Quarters Population Increased Since 2010, U.S. Bureau of the Census*. [Accessed 20 December 2021] Available at: <https://www.census.gov/library/stories/2021/08/united-states-group-quarters-in-2020-census.html>.

Long Term Care COVID Tracker (The Atlantic), 2021. [Accessed 20 December 2021] Available at: <https://covidtracking.com/nursing-homes-long-term-care-facilities>.

New York City Department of City Planning (2013) *Community District Needs, Fiscal Year 2013*. [Accessed 20 December 2021] Available at: <https://www1.nyc.gov/site/planning/about/publications.page>.

Pelta, R. (2021) *Survey: Men and Women Experience Remote Work Differently, Flexjobs*. [Accessed 20 December 2021] Available at: <https://www.flexjobs.com/blog/post/men-women-experience-remote-work-survey/>.

Peng, S. (2019) Urban Scale and Wage Premium: Evidence from China, *Journal of the Asia Pacific Economy* 24(3) pp.468-480.

Rode, E. (2021) *Will City Governments Continue Virtual Meetings Option Post Pandemic, Desert Sun, May 3*. [Accessed 21 December 2021] Available at: <https://www.desertsun.com/story/news/2021/05/03/bill-would-require-virtual-options-post-pandemic-city-council-meetings/4855711001/>.

Schroeder, M., Spyridon L., Mancy, R. and Angelopoulos, K. (2021) *How Do Pandemics End? Two Decades of Recurrent Outbreak Risk Following the Main Wave* (CESIFO discussion paper no. 9475).

Stanton, C. and Tiwari, P. (2021) *Housing Consumption and the Cost of Remote Work* (National Bureau of Economic Research working paper 28483).

Tulshyan, R. (2021) *Return to Office: Some Women of Color Aren't Ready* (New York Times, June 23). [Accessed 20 December 2021] Available at: <https://www.nytimes.com/2021/06/23/us/return-to-office-anxiety.html>.

Wong, V. (2021) *These People of Color are Anxious About Racist Micro-Aggressions When They Return to the Office* (BuzzFeed, June 29). [Accessed 20 December 2021] Available at: <https://www.buzzfeednews.com/article/venessawong/workers-returning-office-racism>.

Your Home in Silicon Valley (2021) *Property Search*. [Accessed 21 December 2021]. Available at: [https://www.yourhomeinsiliconvalley.com/property-search/results/?utm\\_source=Google+PPC&utm\\_campaign=ExcelWeb&utm\\_medium=referral&utm\\_content=ExcelWeb&gclid=Cj0KCQiAk4aOBhCTARIsAFWF P9Hegnru6FFTSokaDQ5ZeSvksvsy\\_a0dl3wNPGYUX\\_OxMtb94\\_N0Y0aAiSdEALw\\_wcB#/city\\_PALO%20ALTO/state\\_CA/view\\_gallery/](https://www.yourhomeinsiliconvalley.com/property-search/results/?utm_source=Google+PPC&utm_campaign=ExcelWeb&utm_medium=referral&utm_content=ExcelWeb&gclid=Cj0KCQiAk4aOBhCTARIsAFWF P9Hegnru6FFTSokaDQ5ZeSvksvsy_a0dl3wNPGYUX_OxMtb94_N0Y0aAiSdEALw_wcB#/city_PALO%20ALTO/state_CA/view_gallery/)



---

# Access to Health for People Experiencing Homelessness

---

Stefanie Plage and Cameron Parsell

School of Social Science, The University of Queensland, Australia

► **Abstract** *Homelessness significantly affects a person's health resulting in premature deaths and considerable suffering. Practice and policy remedies to improve health for people experiencing homelessness are based on the premise of the right to health. Implementing this right is commonly framed as a matter of 'access', for instance to health services or the social determinants of health (i.e., housing). Yet, there is limited consideration of the assumptions and practice implications of 'access' so understood. Engaging with scholarship from the social and health sciences, including public health, epidemiology, medicine, anthropology, and sociology, we identify three configurations of 'access to health': (i) the capacity to meet needs for health care; (ii) a means to govern people experiencing homelessness; and (iii) a means to reproduce socio-economic relations. We interrogate these configurations by discussing the concepts on which they draw, including fundamental causes, de/medicalisation, and citizenship. We propose empirically driven conceptual development to reimagine 'access to health' for people experiencing homelessness as rooted in the logic of care. The logic of care attends to how we think and feel about health, behaviours, and people, what is considered 'right' and what is – and ought to be – done to improve the health of people experiencing homelessness.*

► **Keywords** *Access to health, Homelessness, Social inequalities in health; Health policy; Logic of Care*

## Introduction

---

People experiencing homelessness represent a growing part of the population in high income countries. Even prior to the COVID-19 pandemic, countries such as the United States, England, some European countries, and Australia have witnessed an increase in the proportion of the population who are homeless (Fitzpatrick et al., 2019; Pawson et al., 2020; NAEH, 2021; OECD, 2021). While the absolute number of people experiencing homelessness may be hard to verify, the links between homelessness and poor health are well-documented (Hwang, 2001; Baggett et al., 2010; Chin et al., 2011; Kertesz, 2014; Davies and Wood, 2018), including reduced life expectancy, as well as greater all-cause mortality (Seastres et al., 2020), and morbidity (Fazel et al., 2014). Homelessness is evidently associated with ill-health, including but not limited to cardiovascular disease and cancer, mental illness, accidental injury, respiratory illness, HIV/AIDS, sexual ill-health, and infectious diseases (Hwang, 2001; Kertesz, 2014; Kertesz et al., 2014). The access to health of people experiencing homelessness has been extensively problematised within a human rights framework (e.g., van Menxel et al., 2006).

The Constitution of the World Health Organisation (WHO, 1946, p.1) envisaged the “highest attainable standard of health” as “one of the fundamental rights of every human being.” Understanding health as a human right places the onus on governments to ensure access to timely, acceptable, and affordable health care of appropriate quality. At the same time, it situates health, including the health of people who are experiencing homelessness, within civic rationalities that assume an interplay of rights and obligations embedded in advanced welfare states (Parsell et al., 2021). As a human right, governments are compelled to provide for the underlying determinants of health, such as safe and potable water, sanitation, food, housing, health-related information, education, and freedom from discrimination (OHCHR and WHO, 2016). In turn, individual citizens ought to strive for their best possible health within their circumstances. This serves to situate the health for people experiencing homelessness increasingly within an economic calculus (van Leerdam, 2013; Wood et al., 2016; Lemoine et al., 2021). Here, the flow on effects of poor health in this population are framed as a strain on limited health care resources (e.g., acute services), and seeking improvements to their health is justified to maximise the utility of community resources (Doran, 2016).

The notion of ‘health as a human right’ often proffered by such cost-benefit analyses informs a multi-disciplinary scholarship in the social and health sciences, including public health, medicine, epidemiology, anthropology, and sociology, striving to improve the access to health for homeless people. Yet, explicit engagement with the underlying logic contained in ‘access to health’, is often limited. In this article, we identify and discuss three configurations of ‘access to health’ rooted in the logic

of choice (Mol, 2008). In doing so, we critically engage with key concepts such as de/medicalisation, fundamental causes, and citizenship to highlight opportunities for conceptual development. We propose a fourth configuration – access to health as a set of collective practices – based in the logic of care (Mol, 2008). Before we present our synthesis of prevalent configurations in the ‘access to health literature’ we outline the tensions between choice and care to guide our analysis.

## Choice and Care in the Context of Health

---

The shifts in contemporary welfare systems and governance traced in the social and political sciences (e.g., Parsell et al., 2021) have been accompanied by similar paradigmatic changes in how health and health care are understood. The individualisation of responsibility for health and care is a key process here, as citizen consumers are charged with looking after their own health (Petersen et al., 2010). The underlying assumption links health outcomes to good individual practices based in informed and deliberate consumer choices. In other words, being healthy and living healthily is not only individually desirable but also normative to maintain a functioning citizen body. Negative health outcomes may be interpreted as a person’s failure to screen for and prevent ill-health, seek and follow timely medical advice, or more broadly to ‘live well’ (Crawford, 2006).

Mol (2008) argues that these dynamics follow the ‘logic of choice’. This logic assumes that individuals optimise their own health to the best of their knowledge with the help of medical experts. As citizen-consumers, their rights to health are contingent on taking ownership of how they live and making good choices. Mol (2008) contrasts this with a logic of care that makes sense of health as emergent in collective practices during situations of choice. In this way, the logic of care attends to the socio-cultural context (how we think and feel about health, certain behaviours, and people) as well as moralities (what is considered ‘good’). We argue for explicitly shifting towards a logic of care in research and practice seeking to improve the access to health for people experiencing homelessness, which acknowledges the social relations in which choices are negotiated. To build this argument, we outline and discuss three configurations of access to health informed by the logic of choice: access to health as (i) the capacity to meet needs for medical care, (ii) the governance of people experiencing homelessness, and (iii) the reproduction of socio-economic relations (see Table 1). The configurations of access to health for people experiencing homelessness discussed in this article are not mutually exclusive but integrate these three dimensions to varying extents, as we explore below.

## Access as the Capacity to Meet Needs for Medical Care

---

*Unmet needs and barriers to health care:* There is a substantial body of empirical work conceptualising access as the ability to meet the need for medical care when required. In turn, the poor health experienced by homeless people becomes measurable by cataloguing their ‘unmet’ needs (Baggett et al., 2010) and the system and individual barriers to catering to those needs (Hauff and Secor-Turner, 2014). The catalogue of unmet needs spans reproductive health care (McGeough et al., 2020), foot care (D’Souza et al., 2021), dental care (Yokota et al., 2020), care after hospital discharge (Canham et al., 2019), mental health and primary care (Chambers et al., 2013), and scholars debate whether unmet need is a driver of unnecessary use of acute health care services (Doran, 2016). While “being homeless is difficult enough,” “accessing health care while homeless is even more daunting,” as Martins (2008, p.428) put it. Homelessness creates barriers to accessing mainstream healthcare, which exacerbates the underlying health problems of people who are experiencing homelessness, and in turn creates additional barriers for them to access and sustain housing (Parsell et al., 2020). It also illustrates the logic of choice (Mol, 2008), as individuals’ health service utilisation is scrutinised in terms of its barriers and enablers. The most commonly identified barriers to meeting the need for medical care are financial, e.g., ability to pay for service, fill prescriptions, arrange transportation, or compensate for loss of paid hours of work (Hwang, 2001; Zlotnick et al., 2013; Kertesz, 2014; Ramsay et al., 2019). The conclusions drawn from this understanding of access is that solutions are needed that work around the extended financial barriers to meet the specific health care needs of people who are homeless.

### *The role of health system models*

Unmet needs are deemed symptomatic of an ailing health care system in which the provision of care is contingent on market dynamics and a patchy health insurance system. Studies on the unmet needs of people who are homeless are concentrated in the United States, in which poor health insurance coverage is compounded by the emergence of an increasingly complex health care system that provides free or subsidised services to some marginalised populations, for example veterans experiencing homelessness, but not others. Concurrently, specialised homeless health services and outreach models (e.g., ‘medical homes’ or ‘pop-up clinics’) often attached to community health centres have emerged in parallel to mainstream health care services with the aim to remove barriers to accessing medical care faced by people experiencing homelessness (Kertesz et al., 2013). This has brought about a different set of issues about quality standards, patient-centredness, and continuity of care, as well as the potential exclusion from access to medical care of socially disadvantaged persons out of catchment or not specified in a community health centre’s funding model (Varley et al., 2020).



### ***Fundamental cause theory***

In contrast to the United States, countries such as Canada, the UK, Australia, and much of Europe have health care systems which incorporate both market and public welfare principles to provide universal health care (Hwang et al., 2013). These universal systems differ in important ways across countries and often health care coverage is not as comprehensive as the term ‘universal’ implies; nevertheless, these systems address many of the barriers identified in the United States. Yet, research demonstrates that health disparities for homeless people persist despite universal access to health care (Chin, Sullivan and Wilson, 2011; Davies and Wood, 2018; Seastres et al., 2020). Fundamental cause theory sheds light on the associations between health and socioeconomic status (SES) (Link and Phelan, 1995; Phelan and Link, 2013; Cockerham, 2021) and provides useful starting points to explain the poor health experiences of people who are homeless in countries with access to universal health care. SES is more than a background factor that sets the scene for biological and medical processes; it is a direct cause for differential health outcomes. Fundamental cause theory’s analytical rigour lies in its capacity to query why and how social structures promote health for some, but not others.

Four criteria serve to evaluate if social categories qualify as ‘fundamental causes’. First, the social category would be expected to influence the experiences of multiple diseases. Second, the social category would be expected to encompass varied risk factors and mechanisms through which disease outcomes are affected. Third, the social category would likewise be associated with differential access to resources that can be deployed to mitigate risks. Fourth, the social category would be expected to show a dynamic but persistent relation to health outcomes over time, even though biomedical knowledge and health care modalities might shift (Cockerham, 2021). Applying these criteria to the experience of homelessness as a specific socioeconomic status characterised by multiple resource constraints, risks, and patterns of disease incidence, indicates its role as ‘fundamental cause’. As discussed above, homelessness inflects the experience of many diseases (criterion 1). It also presents a swath of risks and potential mechanisms through which health is affected (criterion 2). Becker and Foli (2021), for instance, identified accessibility of services as only one of four critical attributes for homeless people’s health-seeking behaviours. They operationalised decreased access as “being uninsured or having no money, requiring transportation, experiencing long wait times for appointments, or lacking knowledge of available healthcare services” (Becker and Foli, 2021, p.4). Analytically, they differentiated ‘access’ from other salient mechanisms, such as distrust in healthcare services, prioritisation of more urgent physiological needs, and delayed care seeking within the critical attributes that impact health-seeking behaviours among homeless people.

### ***Limitations of access as capacity to meet health needs***

Experiencing homelessness also affects the capacity to mitigate risks through effective resource deployment (criterion 3). Cheezum et al. (2018) examined the restricted availability of health promoting resources such as nutritious food along with environments for safe physical activity. The relationship of ill health and the experience of homelessness remains pertinent over time (criterion 4). Gelberg et al. (1997), more than 20 years ago in their sample of people experiencing homelessness in LA, identified that non-financial barriers, such as the urgency of finding and maintaining the means of subsistence, contribute to delays in help-seeking behaviour that result in greater acute care needs. Unmet health needs for homeless people appear to persist – albeit in changing guise – regardless of the health system model. Approaching homelessness as a social category that constitutes a fundamental cause explains the evident endurance of health inequalities despite general advances in treatment modalities (e.g., for cardiovascular disease) and across different systems of health care (e.g., universal vs. pay-for-service). This is the point of departure for scholarship that interrogates the role of housing at the core of health inequities which we discuss next.

## **Access as a Means of Governing Homeless People**

---

### ***Housing and health in relation***

Building on, and often utilising evidence produced by the empirical studies mapping the unmet needs of people experiencing homelessness, there is a thriving scholarship interrogating the role of housing in their health. Access to better health is here thought of as embedded in dynamics that transcend health care systems, requiring interrogation of the flow-on effects of housing for individual and population health. While the ‘unmet needs’ literature is rooted in biomedicine and its knowledge practices, approaches to housing and health to varying extents draw on the social determinants of health paradigm (see e.g., Marmot, 2005). Being housed is identified with the norm from which people experiencing homelessness are seen to deviate either due to the structural conditions in which they live, or due to their personal characteristics and behaviours. Access to health then manifests as a means of governing people who are homeless in providing or withholding opportunities for housing and care. Pathways in and out of housing become inseparable from health, as housing and health policy converge in practice. This point is exemplified in the debate on what needs to be addressed first to achieve better long-term outcomes for people experiencing homelessness: the lack of housing, or the individual circumstances and practices that are purported to cause ill-health, often framed conceptually as an issue of de/medicalisation (Mathieu, 1993; Lyon-Callo, 2000; Löfstrand, 2012; Wasserman and Clair, 2014).

### ***Medicalisation and demedicalisation***

Medicalisation is the process through which social ills become redefined to fall within the remit of biomedicine. Demedicalisation, in turn, denotes the countervailing process in which issues previously perceived as medical spill over into other areas of expertise. Health issues that are associated with substance use, diabetes, renal and liver disease are commonly cast as driven by behavioural causes (Vallgård, 2011). Homelessness – due to the extent to which psychosis and addiction have pervaded our understandings of what defines and explains homelessness (Knowles, 2000) – becomes medicalised by its socio-cultural approximation to related behaviours (Wasserman and Clair, 2014). In its medicalised form, homelessness ceases to appear as a problem of social inequality but is made amenable to the intervention of medical practitioners focussing on one individual at a time.

### ***Treatment First***

Behavioural causes are assumed to be emergent in individual lifestyle and are seen as subject to a person's responsibility. We see again at work, what Mol (2008) referred to as 'the logic of choice'. The logic of choice assumes autonomous citizen-consumers who make informed choices and are willing and able to live with the consequences of their choices free from paternalistic interference. This aligns with the tenet of individual responsibility that has informed decades of housing policies under the banner of 'Treatment First' (Rosenheck, 2021). From the Treatment First perspective, people experiencing homelessness presenting with health and behaviour issues need be made ready for stable housing. In this way, ill-health situates people experiencing housing instability with respect to moralities in which health appears as an achievement to be pursued in appropriate actions, what Crawford referred to as 'healthism' (Crawford, 1980): ill-health signals moral failings, here compounded by the failing to secure the basic conditions (i.e., housing) for the pursuit of better health. Concurrently, as Farrugia (2010, p.84) noted, "homelessness is associated with irresponsibility and moral failing", placing people experiencing homelessness in a double bind. It is not surprising then, that stigmatisation and an atmosphere of being unwelcome is reported as another non-financial barrier to accessing healthcare (Wen et al., 2007; Hauff and Secor-Turner, 2014). If the experience of homelessness is understood as a function of undesirable and individualised behaviours believed to exacerbate poor health practices, interventions targeting individuals to correct such behaviours and enable 'better' choices come logically prior to meeting housing needs. These interventions are charged with producing morally viable subjects who demonstrate capacity for self-improvement as the necessary condition for eligibility to care in adjacent service systems (e.g., welfare and housing) (Lyon-Callo, 2000).

## ***Housing First***

In the wake of Treatment First's failure to stem the escalation of homelessness and the societal and personal costs it incurs, a movement sustained by a political alliance of public health expertise, social science, and advocacy put 'Housing First' models on the agenda (Tsemberis and Eisenberg, 2000; Hwang, 2001; Rosenheck, 2021). Padgett et al. (2016) refer to the influence of Housing First as a paradigm shift. Housing First departs from more complex understandings of the relationship of housing and health in which social conditions loom large alongside medical considerations (Hwang, 2001). As a theoretical foundation, Housing First mobilises the social determinants of health framework popularised in Marmot's call for investigating the 'causes of the causes' (Marmot, 2005, p.1101; see Rosenheck, 2021). Greater attention is paid to the societal dynamics that keep people out of secure housing culminating in integrated models of supportive housing for people experiencing chronic homelessness (Evans et al., 2016; Wygnańska, 2016; Cheezum et al., 2018). Housing provision is thought of as an intervention with positive flow-on effects for health (Doran et al., 2013; Baxter et al., 2019). The empirical evidence that Housing First leads to better outcomes for people exiting homelessness across a number of domains, and in particular in the transition to stable housing, is encouraging. Yet, the evidence for the efficacy of Housing First for improved long term health outcomes is inconclusive (Baxter et al., 2019), and often focussed on recovery from substance use and mental ill-health, and on reducing costs from hospital or emergency department use (Henwood et al., 2013; van Leerdam, 2013; Wood et al., 2016; Kertesz and Johnson, 2017; Chhabra et al., 2020; Kirst et al., 2020; Lemoine et al., 2021). In other words, the focus remains on 'problem' behaviours and their health system consequences (e.g., presentation to acute care service providers) commonly ascribed to homeless populations.

## ***Limitations of access as a means of governance***

Despite evidence demonstrating Housing First's success achieving desired behaviour change by providing access to housing, the underlying rationale for the need to intervene through supportive housing models is not entirely dissimilar from Treatment First approaches. Wasserman and Clair (2014) do not see Treatment First and Housing First as opposing forces but as located within the same individualised (and medicalised) paradigm. The same paradigm that is informed by the logic of choice as outlined above (see Mol, 2008). Housing First inverts the continuum of care as "homeless service institutions nonetheless continue to focus heavily on treatment" (Wasserman and Clair, 2014, p.3). At the same time, Housing First programmes' capacity to address the structural drivers ('the causes of the causes') and promote large-scale societal transformation is limited. This critique has given rise to scholarship interrogating the role of the third sector in the governance of people experiencing homelessness, which we discuss below.

## **Access as a Means of Reproducing Socio-Economic Relations**

---

### ***Housing as health care***

In a trend parallel to the ‘right to health’ discourse, we have seen a rise in ‘right to housing’ approaches (e.g., Watts, 2013; Crowley and Mullen, 2019) with mixed implementation strategies and often unanticipated consequences (Loison-Leruste and Quilgars, 2009; Anderson and Serpa, 2013; Anderson, 2019; Swope and Hernández, 2019; Clarke et al., 2020; Brown et al., 2021). The focus on housing as a social determinant of health has brought about a degree of conceptual conflation of housing with health, in which housing itself is at times positioned as health care (Fullilove, 2010; Doran et al., 2013). Scholars interrogating health and housing from a political economy perspective argue that this potentially distracts from larger social relations of exploitation, in which the access to health/housing is a means of reproducing such relations by invoking reciprocal rights and obligations. Neoliberal frameworks intent on behaviour change are limited to ‘fixing’ individuals and fail to address structural dynamics (Wasserman and Clair, 2014; Rosenheck, 2021). In this view, unmet housing and health needs of people experiencing homelessness are not accidental – nor undesirable – within neoliberal and market-oriented societies. They constitute an integral and productive part of the political economy.

### ***Chronic homelessness***

Willse (2010), for instance, argued that Housing First approaches relied on the social construction of a specific category of homelessness, those experiencing long-term and repeated homelessness, who based on an economic calculus are prioritised for housing and health care. Hence, Housing First interventions, despite good outcomes, are seen as motivated by their capacity to alleviate strains on collective resources without tackling the societal relations that sustain inequality. Rights discourses (to health and/or housing) are reduced to rationalisations of policy decisions based on cost-benefit analyses. As Evans et al. (2016, pp.255) warned, “access to a fundamental health determinant – housing – is not a matter of the state fulfilling individual rights; rather, it is modulated through the government of risk, by linking specific groups in the homeless population to unfavourable health and social care utilization patterns.” On a broader level, this underlines another issue inherent to the logic of choice: what is good for the collective is not necessarily good for the individual, and vice versa (Mol, 2002; 2008). “By problematizing homelessness in terms of costs rather than values (such as rights), some homeless groups may be vulnerable when the cost analysis does not come out in their favor” (Evans et al., 2016, pp.255). Homelessness itself is a dynamic experience and its severity and duration has become increasingly quantified in counting ‘episodes’ to establish the degree of ‘chronicity’ of a person’s homelessness, borrowing from

the language of biomedicine. In turn, a 'diagnosis' of chronic homelessness with a poor health prognosis has been used to 'triage' persons for fast tracking them into housing and treatment (Willse, 2010).

### ***Neoliberal critique***

Taking aim at how homelessness becomes medicalised in the process and the role of the service provider industry (Lyon-Callo, 2000; Willse, 2010; Löfstrand, 2012), proponents of this critique argue that the facilitation of access – ironically – is inextricable from the (re)production of homelessness. This reasoning is informed by the extensive critique of neoliberal governance which has seen the dismantling of welfare provisions and safety nets across the globe. Yet, the proliferation of neoliberal critique is increasingly met with scepticism. Bell and Green (2016) have cautioned that using neoliberalism as a conceptual framework in and of itself is insufficient to produce sophisticated accounts of public health dynamics. 'Neoliberalism' has come to be employed as shorthand to explain (almost) every ill, while causal directions remain often unclear, concrete mechanisms driving health inequities are underexplored and implications for system change remain vague. Similarly, critiques have been levelled at the reliance on medicalisation as a conceptual tool within neoliberal critique. Rose (2007, pp.700-701) concluded that "medicalisation has become a cliché of critical social analysis". He argued that medicalisation instead needs to be acknowledged as fundamentally shaping human life in contemporary society. In doing so, Rose identified medicalisation-as-cliché as perpetuating an obsolete nature/culture dualism that unduly inhibits analysis.

### ***Limitations of access as a means of social reproduction***

Critiques of neoliberalism and medicalisation expose a dilemma within the dominant portrayal of the link between homelessness and health. On the one hand, homelessness is represented to be a social pathology that becomes amenable to (medical/housing) intervention and to which biomedical terminology applies (e.g., 'homelessness chronicity'). As a social ill to be cured, the debate then revolves around whether to address somatic symptoms, such as mental or physical ill-health to make people experiencing homelessness 'housing-ready' (i.e., Treatment First), or whether to prioritise shelter and prepare the homeless for targeted interventions to improve their lives (i.e., Housing First). Both models bring into effect subjectivities through which governance takes effect: the 'chronically homeless' and the 'housed' or 'formerly homeless'. On the other hand, homelessness thoroughly and relentlessly demedicalises the contemporary human condition by constraining participation in the most taken-for-granted salutogenic practices (i.e., shelter, safety, diet, rest, hygiene) that greatly impact on longevity and morbidity as well as sense of meaning and purpose in survival (see e.g., Håkanson and Öhlén, 2016; Paudyal et al., 2020). Framing medicalisation as an issue of medical authority that is extended

beyond its legitimate remit bears the potential to put individual people experiencing homelessness at risk, and cut them off from care (Knowles, 2000). Homelessness and ill-health become normalised as their association aligns with the non-medical/natural axis. As Braslow and Messac (2018, p.1887) noted, “we have seen not only the abdication of medical responsibility for the life circumstances of severely psychotic people, but also a growing acceptance of homelessness and incarceration as legitimate fates for people whose psychotic behaviour violates social norms” (see also Knowles, 2000). To address the issues raised in this article, and account for the complexities in the health of people experiencing homelessness, we propose to reimagine access to health for people experiencing homelessness guided by the logic of care (Mol, 2008), which we elaborate below.

### **Reimagining Access to Health for Homeless People within the Logic of Care**

---

In this article, we described how access to health care is configured in three different ways, each in turn associated with varied policy responses and different implications for practice. Nonetheless, there is overarching consensus that the ill-health of people experiencing homelessness continues to be a pressing social justice issue, a public health as much as a moral crisis (Baggett et al., 2010). In each of the three configurations discussed above, structural issues are salient. Structural issues are recognised as barriers in systems providing health care, in the interactions of the health care system with other societal systems involving the housing industry and third sector organisations, and in the way the health of people who are experiencing homelessness is embedded in broader socio-economic relations. However, these configurations of access to health are guided by the logic of individual choice. We present four arguments that favour a shift of emphasis from choice to care in research and practice aiming to improve the health of people experiencing homelessness. First, pathway thinking hinders rather than enhances the advocacy for people experiencing homelessness. Second, housing and health agendas overlap considerably, but are not reducible to one another. Third, what is considered right and good is emergent and adaptable in collective practices rather than a preestablished ideal that individuals are to pursue. Fourth, shifting the focus away from lifestyle choices that expose individuals to judgment and stigma towards ‘situations of choice’ navigated collaboratively among multiple social actors facilitates attention to the caring relations in which health is produced. Below we elaborate each of these arguments in turn.

### ***Pathway thinking***

Sustained focus on pathways in and out of homelessness constitute a core component in the current scholarship on the relationship between health and homelessness. This scholarship understands the pathway out of homelessness as inextricable from achieving better health and addressing deviant behaviours. We summarise four points of critique that have been raised with respect to Housing First as currently the most progressive intervention strategy informed by pathway thinking: (1) Housing First only gives housing to people because they are sick, not based on rights; (2) focusing on sickness is often motivated by reducing health costs; (3) giving severely sick people housing does not address the structural failures that produce chronic homelessness; and (4) often accessing housing after chronic homelessness does not improve people's health significantly (Padgett et al., 2016; Parsell, 2017).

We argue that these critiques are associated with the logic of choice that informs interventions such as Housing First and Treatment First. As Mol (2008) highlighted, the logic of choice is troubled by the fundamental assumption of linearity: a decision is made at a point in time, actioned and presumably leading to calculable consequences. Housing a sick person should lead to better health outcomes for them. Better health should lead to more stable housing. Better health and housing outcomes should relieve the burden on social and health care systems. Better health and housing outcomes should also relieve the moral pressure to resolve broader inequalities. Interventions should result in observable improvements in individual circumstances and collective health, yet the evidence is not as unequivocal as we would anticipate. We argue that this is not an issue stemming from the unresolved debate whether to focus on Housing First or Treatment First, but from the assumption of linearity in causal chains that is poorly aligned with the messiness of lived experience. The issue lies in framing this debate as one on the *direction* of causality. In contrast, an approach rooted in the logic of care, presumes that improvements necessitate tinkering (or indeed 'doctoring'), failure, unintended consequences, and learnings that are emergent in the back and forth of relational practices. Interventions need to provide scope for adaptation and flexibility within caring practices.

### ***Convergence in health and housing agendas***

The underlying assumption in Treatment First and Housing First approaches is that the needs for safe and secure housing and other resources to obtain good health can be ordered and ranked by urgency, as if some can come logically prior before others. An overly linear understanding of the relationship of health and its social determinants has the practical implication that housing and health interventions converge in practice and policy. This runs the risk to subsume (and defer) urgent



health needs to advances in the housing justice agenda. This does not imply that housing and health should ever be completely separated from one another. In fact, we argue for uncoupling the debate from 'pathway' thinking to enable taking the health of homeless populations seriously. For example, the pathway to homelessness for an individual may include drug use. However, there are many drug users, but most of them will not experience homelessness. Is it reasonable to assume then that focusing on drug use in supportive housing will result in an individual's stable housing thereafter? Undoubtedly, addressing drug use will have positive flow-on effects for a person's health in its own right, regardless of immediate or subsequent housing outcomes. Applying the logic of choice here leads to the assumption that a good outcome is evident when a person refrains from using drugs and secures stable housing. All practice is oriented towards achieving this ideal outcome in which health and housing are simultaneously addressed. However, the evidence base on the outcomes of supportive housing interventions highlights that while housing and health overlap, they are not reducible to one another. This distinction matters, as it acknowledges the complexities in the access to health for people experiencing homelessness, which is insufficiently addressed by short term interventions targeting primarily housing whilst offering varying degrees of support as an add-on.

### ***Housing and good health as normative***

Debating whether the causes of homelessness are behavioural, structural, or indeed a complex interaction of 'causes of the causes' (Marmot, 2005) lends further traction to social dynamics in which the entitlement to good health is to be earned through appropriate practices of the self. Being housed and healthy is situated as normal within contemporary medicalised Western societies against which the experiences of homeless people are compared and defined as deviant. Somewhat ironically, the reviewed approaches to access, centre on the network of responsibilities and rights in which individual people experiencing homelessness find themselves, but with little attention to how people experiencing homelessness actually *do* health. Indeed, this is perhaps a function of underestimating the agency of people experiencing homelessness (Parsell, 2018), either by denying their capacity for decision-making as citizen-consumers in the underlying logic of choice, or by denying their agency with reference to seemingly insurmountable power asymmetries in interactions with housing and health service providers in political economy perspectives. We argue that re-envisioned conceptualisations of access to health need to attend to the lived experiences of homelessness as a profoundly de-medicalising set of conditions in which taken-for-granted amenities that have resulted in substantial improvements in general population health are precarious, sometimes absent, and often hard fought. Thus far, 'access to health' understood as meeting needs for medical care has dominated, resulting in targeted

research concerned with the barriers and challenges for help-seeking and health system utilisation, with little attention to the everyday experiences of exclusion from good health. Based on this, we argue for a research agenda pursuing a different set of questions: What does health mean for people in these circumstances? How do these meanings shift as people move along the continuum of housing instability? How do people enact health in everyday practices on the margins of society? How are these practices embedded in social relations?

### *From 'lifestyle choices' to 'situations of choice'*

We caution against (mis)taking the above questions as a call to centring the individual experiencing homelessness in research on health and homelessness, perpetuating the fallacies of the logic of choice. First, taking 'the homeless person' as object of enquiry denies the ambiguities concealed in the concept (see Parsell, 2018). Whether a person is considered homeless depends on local and socio-historical norms, that vary within and across countries (OECD, 2021). Internationally, definitions vary in significant ways, including the presence or absence of a disability (NAEH, 2021), one's ability to exert control over the environment (Pawson et al., 2020), or the absence of domains that constitute a home (Amore et al., 2011). The shifting definitional boundaries drawn around homelessness along a continuum of housing instability often encompass vastly different experiences, including those with respect to health (Parsell et al., 2020). Homelessness intersects with a range of subject positions across various contexts, including for instance, 'welfare recipient', 'single parent', 'casual worker', and 'victim of domestic or family violence', just to name a few. Concurrently, social inequalities predispose different parts of the population to be more likely to experience poor or unstable housing conditions and feel the effects on their health more severely (Ranmal et al., 2021).

Health inequities affecting people experiencing homelessness do not eventuate solely in the encounters with the health care system, but in the ordinary exclusion from enjoying the benefits of biomedical knowledge practices that pervade contemporary society. This is perhaps nowhere more evident than in the unfolding COVID-19 crisis. The pandemic has brought into sharp relief the conditions of homelessness that produce poor health and the profound inadequacies of our current homelessness and health responses. In many parts of the world, these limitations, and the urgent health problems that homelessness represents, have been responded to with swift action to minimise the health consequences of homelessness. Indeed, Parsell et al. (2021) argue that government response to homelessness during COVID-19 are motivated by the concern that people who are homeless represent a health risk to the broader population. The COVID-19 responses to homelessness exemplify an occasion where individual and population health agendas align, serving as a timely reminder for the embeddedness of health and

care in socio-historical context. These responses are a case in point for 'situations of choice' in which individuals' access to health (including social determinants of health, such as housing) is negotiated in collective practices.

We propose to understand the access to health for people experiencing homelessness as emergent in 'situations of choice' between different salient forces and social actors. Focusing on situations of choice allows for attention on how salient subject positions are enacted with implications for housing and health. It allows differentiated practices of care that address a specific need in its appropriate context over time as service providers and people experiencing homelessness collaborate to identify possibilities for intervention within the material constraints and affordances of lived experience. In this way, choice is not a matter of individual lifestyle, but is produced in social relations with a gamut of contingencies, intended as well as unintended consequences.

## Conclusion

---

Improving the health of people experiencing homelessness presents an urgent priority, cutting across (i) *health system models*, (ii) *social determinants*, including housing as well as, (iii) *socio-economic relations* articulated in rights and obligations. We highlighted how the logic of choice informs configurations of the access to health for people who are experiencing homelessness variably as meeting needs for medical care, as a means to govern them, or as a means to reproduce socio-economic relations. We propose to move towards a logic of care that allows attention to 'situations of choice' as situated enactment of caring relations sensitive to cultural and historical context as well as dynamic over time. Our proposed focus is on how health is enacted, sustained, systematised, and stabilised in everyday and professional practices of care (see Mol, 2002), in a way that denies people experiencing homelessness good health. This requires research, practice, and policy to interrogate discourse and narrative, affect and emotion, as well as moralities. What we think and how we talk about health and homelessness, how we feel about certain parts of the population, certain behaviours, and the manifestations of (ill)health, as well as what is considered 'good and right', are the interrelated foci for progressing the analysis. These dimensions all bear on individual and collective practices and need to be addressed in conjunction. A practice sociology that acknowledges the embeddedness of social relations, discourses, and embodied experience is well positioned to advance this research agenda to generate evidence for social and health policy. Policies and programmes must prioritise the health of those experiencing health inequities most acutely.



## **Declaration of Conflicting Interests**

---

The Authors declare that there is no conflict of interest.

## **Funding**

---

This work was supported by the Australian Research Council through the Centre of Excellence for Children and Families over the Life Course [CE200100025] and a Future Fellowship [FT180100250].

## ► References

- Amore, K., Baker, M., and Howden-Chapman, P. (2011) The ETHOS Definition and Classification of Homelessness: An Analysis, *European Journal of Homelessness* 5(2) pp.19-37.
- Anderson, I. (2019) Delivering the Right to Housing? Why Scotland Still Needs an 'Ending Homelessness' Action Plan, *European Journal of Homelessness* 13(2) pp.131-159.
- Anderson, I. and Serpa, R. (2013) The Right to Settled Accommodation for Homeless People in Scotland: A Triumph of Rational Policy-Making? *European Journal of Homelessness*, 7(1) pp.13-39.
- Baggett, T.P., O'Connell, J.J., Singer, D.E., and Rigotti, N.A. (2010) The Unmet Health Care Needs of Homeless Adults: A National Study, *American Journal of Public Health* 100(7) pp.1326-1333.
- Baxter, A.J., Tweed, E.J., Katikireddi, S.V., and Thomson, H. (2019) Effects of Housing First Approaches on Health and Well-being of Adults who are Homeless or at Risk of Homelessness: Systematic Review and Meta-Analysis of Randomised Controlled Trials, *Journal of Epidemiology and Community Health* 73(5) pp.379-387.
- Becker, J.N. and Foli, K.J. (2021) Health-Seeking Behaviours in the Homeless Population: A Concept Analysis, *Health & Social Care in the Community* 30(2), pp.e278– e286.
- Bell, K. and Green, J. (2016) On the Perils of Invoking Neoliberalism in Public Health Critique, *Critical Public Health* 26(3) pp.239-243.
- Braslow, J.T. and Messac, L. (2018) Medicalization and Demedicalization. A Gravely Disabled Homeless Man with Psychiatric Illness, *The New England Journal of Medicine* 379(20) pp.1885-1888.
- Browne Gott, H., Mackie, P.K., and England, E. (2021) Housing Rights, Homelessness Prevention and a Paradox of Bureaucracy? *Housing Studies*. doi 10.1080/02673037.2021.1880000.
- Canham, S.L., Davidson, S., Custodio, K., Mauboules, C., Good, C., Wister, A.V., and Bosma, H. (2019) Health Supports Needed for Homeless Persons Transitioning from Hospitals, *Health & Social Care in the Community* 27(3) pp.531-545.
- Chambers, C., Chiu, S., Katic, M., Kiss, A., Redelmeier, D.A., Levinson, W., and Hwang, S.W. (2013) High Utilizers of Emergency Health Services in a Population-Based Cohort of Homeless Adults, *American Journal of Public Health* 103(S2) pp.S302-S310.

Cheezum, R.R., Rosso, M.T., Niewolak, N., and Cobb, T. (2018) Using PhotoVoice to Understand Health Determinants of Formerly Homeless Individuals Living in Permanent Housing in Detroit, *Qualitative Health Research* 29(7) pp.1043-1055.

Chhabra, M., Spector, E., Demuynck, S., Wiest, D., Buckley, L., and Shea, J.A. (2020) Assessing the Relationship between Housing and Health among Medically Complex, Chronically Homeless Individuals Experiencing Frequent Hospital Use in the United States, *Health & Social Care in the Community* 28(1) pp.91-99.

Chin, C.N., Sullivan, K., and Wilson, S.F. (2011) A 'Snap Shot' of the Health of Homeless People in Inner Sydney: St Vincent's Hospital, *Australian Health Review* 35(1) pp.52-56.

Clarke, A., Watts, B., and Parsell, C. (2020) Conditionality in the Context of Housing-Led Homelessness Policy: Comparing Australia's Housing First Agenda to Scotland's "Rights-Based" Approach, *Australian Journal of Social Issues* 55(1) pp.88-100.

Cockerham, W. (2021) *Sociological Theories of Health and Illness* (London: Routledge).

Crawford, R. (1980) Healthism and the Medicalization of Everyday Life, *International Journal of Health Services* 10(3) pp.365-388.

Crawford, R. (2006) Health as a Meaningful Social Practice, *Health: An Interdisciplinary Journal for the Social Study of Health, Illness and Medicine* 10(4) pp.401-420.

Crowley, N. and Mullen, R. (2019) Framing the Right to Housing: A Values-Led Approach, *European Journal of Homelessness* 13(2) pp.95-108.

D'Souza, M.S., Mirza, N.A., and Nairy Karkada, S. (2021) Development of a Foot Care Model to Determine the Risk of Foot Problems among Homeless Adults in Canada, *Health & Social Care in the Community* 29(5) pp.e214-e223.

Davies, A. and Wood, L.J. (2018) Homeless Health Care: Meeting the Challenges of Providing Primary Care, *Medical Journal of Australia* 209(5) pp.230-234.

Doran, K.M. (2016) Homelessness and ED Use: Myths and Facts, *The American Journal of Emergency Medicine* 34(2) pp.307.

Doran, K.M., Misa, E.J., and Shah, N.R. (2013) Housing as Health Care. New York's Boundary-Crossing Experiment, *New England Journal of Medicine* 369(25) pp.2374-2377.

Evans, J., Collins, D., and Anderson, J. (2016) Homelessness, Bedspace and the Case for Housing First in Canada, *Social Science & Medicine* 168 pp.249-256.

- Farrugia, D. (2010) The Symbolic Burden of Homelessness: Towards a Theory of Youth Homelessness as Embodied Subjectivity, *Journal of Sociology* 47(1) pp.71-87.
- Fazel, S., Geddes, J.R., and Kushel, M. (2014) The Health of Homeless People in High-Income Countries: Descriptive Epidemiology, Health Consequences, and Clinical and Policy Recommendations, *The Lancet* 384(9953) pp.1529-1540.
- Fitzpatrick, S., Pawson, H., Bramley, G., Wood, J., Watts, B., Stephens, M., and Blenkinsopp, J. (2019) *The Homelessness Monitor: England 2019* (London: Crisis).
- Fullilove, M.T. (2010) Housing is Health Care, *American Journal of Preventative Medicine* 39(6) pp.607-608.
- Gelberg, L., Gallagher, T.C., Andersen, R.M., and Koegel, P. (1997) Competing Priorities as a Barrier to Medical Care among Homeless Adults in Los Angeles, *American Journal of Public Health* 87(2) pp.217-220.
- Håkanson, C. and Öhlén, J. (2016) Illness Narratives of People who are Homeless, *International Journal of Qualitative Studies on Health and Well-being* 11(1) p.32924.
- Hauff, A.J. and Secor-Turner, M. (2014) Homeless Health Needs: Shelter and Health Service Provider Perspective, *Journal of Community Health Nursing* 31(2) pp.103-117.
- Henwood, B.F., Cabassa, L.J., Craig, C.M., and Padgett, D.K. (2013) Permanent Supportive Housing: Addressing Homelessness and Health Disparities? *American Journal of Public Health* 103(S2) pp.S188-S192.
- Hwang, S.W. (2001) Homelessness and Health, *Canadian Medical Association Journal* 164(2) pp.229-233.
- Hwang, S.W., Chambers, C., Chiu, S., Katic, M., Kiss, A., Redelmeier, D.A., and Levinson, W. (2013) A Comprehensive Assessment of Health Care Utilization Among Homeless Adults Under a System of Universal Health Insurance, *American Journal of Public Health* 103(S2) pp.S294-S301.
- Kertesz, S.G. (2014) Homelessness and Health Care, in: Cockerham, W., Dingwall, R. and Quah, S. (Eds.) *The Wiley Blackwell Encyclopedia of Health, Illness, Behavior, and Society*, pp.1-11. (Hoboken, NJ: Wiley).
- Kertesz, S.G., Holt, C.L., Steward, J.L., Jones, R.N., Roth, D.L., Stringfellow, E., Gordon, A.J., Kim, T.W., Austin, E.L., Henry, S.R., Johnson, N.K., Granstaff, U.S., O'Connell, J.J., Golden, J.F., Young, A.S., Davis, L.L. and Pollio, D.E. (2013) Comparing Homeless Persons' Care Experiences in Tailored Versus Nontailored Primary Care Programs, *American Journal of Public Health* 103(S2) pp.S331-S339.
- Kertesz, S.G. and Johnson, G. (2017) Housing First: Lessons from the United States and Challenges for Australia, *Australian Economic Review* 50(2) pp.220-228.

- Kertesz, S.G., McNeil, W., Cash, J.J., Desmond, R., McGwin, G., Kelly, J., and Baggett, T.P. (2014) Unmet Need for Medical Care and Safety Net Accessibility among Birmingham's Homeless, *Journal of Urban Health* 91(1) pp.33-45.
- Knowles, C. (2000) *Bedlam on the Streets* (London: Routledge).
- Kirst, M., Friesdorf, R., Ta, M., Amiri, A., Hwang, S.W., Stergiopoulos, V., and O'Campo, P. (2020) Patterns and Effects of Social Integration on Housing Stability, Mental Health and Substance Use Outcomes among Participants in a Randomized Controlled Housing First Trial, *Social Science & Medicine* 265 p.113481.
- Lemoine, C., Loubière, S., Boucekine, M., Girard, V., Tinland, A., and Auquier, P. (2021) Cost-effectiveness Analysis of Housing First Intervention with an Independent Housing and Team Support for Homeless People with Severe Mental Illness: A Markov Model Informed by a Randomized Controlled Trial, *Social Science & Medicine* 272 p.113692.
- Link, B.G. and Phelan, J. (1995) Social Conditions as Fundamental Causes of Disease, *Journal of Health and Social Behavior* (Extra Issue) pp.80-94.
- Löfstrand, C.H. (2012) Homelessness as an Incurable Condition? The Medicalization of the Homeless in the Swedish Special Housing Provision, in: L'Abate, L. (Ed.) *Mental Illnesses – Evaluation, Treatments and Implications*, pp.105-126. (Rijeka, Croatia: InTech).
- Loison-Leruste, M. and Quilgars, D. (2009) Increasing Access to Housing: Implementing the Right to Housing in England and France, *European Journal of Homelessness* 3 pp.75-100.
- Lyon-Callo, V. (2000) Medicalizing Homelessness: The Production of Self-blame and Self-Governing within Homeless Shelters, *Medical Anthropology Quarterly* 14(3) pp.328-345.
- Marmot, M. (2005) Social Determinants of Health Inequalities, *The Lancet* 365(9464) pp.1099-1104.
- Martins, D.C. (2008) Experiences of Homeless People in the Health Care Delivery System: A Descriptive Phenomenological Study, *Public Health Nursing* 25(5) pp.420-430.
- Mathieu, A. (1993) The Medicalization of Homelessness and the Theater of Repression, *Medical Anthropology Quarterly* 7(2) pp.170-184.



McGeough, C., Walsh, A., and Clyne, B. (2020) Barriers and Facilitators Perceived by Women while Homeless and Pregnant in Accessing Antenatal and or Postnatal Healthcare: A Qualitative Evidence Synthesis, *Health & Social Care in the Community* 28(5) pp.1380-1393.

Mol, A. (2002) *The Body Multiple* (Durham: Duke University Press).

Mol, A. (2008) *The Logic of Care: Health and the Problem of Patient Choice* (London: Routledge).

National Alliance to End Homelessness [NAEH] (2021) *State of Homelessness: 2021 Edition*. Available at: <https://endhomelessness.org/homelessness-in-america/homelessness-statistics/state-of-homelessness-2021/> on 27/10/2021.

Office of the United Nations High Commissioner for Human Rights [OHCHR] and WHO (2016) *The Right to Health*. Available at: <https://www.ohchr.org/Documents/Publications/Factsheet31.pdf> on 27/10/2021.

Organisation for Economic Co-operation and Development [OECD] (2021) HC3.1. *Homeless Population*. Available at: <https://www.oecd.org/els/family/HC3-1-Homeless-population.pdf> on 27/10/2021.

Padgett, D., Henwood, B.F., and Tsemberis, S.J. (2016) *Housing First: Ending Homelessness, Transforming Systems, and Changing Lives* (Oxford: Oxford University Press).

Parsell, C. (2017) Do We Have the Knowledge to Address Homelessness?, *Social Service Review* 91(1) pp.134-153.

Parsell, C. (2018) *The Homeless Person in Contemporary Society* (London: Routledge).

Parsell, C., Clarke, A., and Kuskoff, E. (2020) Understanding Responses to Homelessness During COVID-19: An Examination of Australia, *Housing Studies* pp.1-14. doi: 10.1080/02673037.2020.1829564.

Parsell, C., Clarke, A., and Perales, F. (2021) *Charity and Poverty in Advanced Welfare States* (London: Routledge).

Parsell, C., Clarke, A., and Vorsina, M. (2020) Evidence for an Integrated Healthcare and Psychosocial Multidisciplinary Model to Address Rough Sleeping, *Health and Social Care in the Community* 28 pp.34-41.

Paudyal, V., MacLure, K., Forbes-McKay, K., McKenzie, M., MacLeod, J., Smith, A., and Stewart, D. (2020) 'If I Die, I Die, I Don't Care about my Health': Perspectives on Self-Care of People Experiencing Homelessness, *Health & Social Care in the Community* 28(1) pp.160-172.

- Pawson, H., Parsell, C., Liu, E., Hartley, C., and Thompson, S. (2020) *Australian Homelessness Monitor 2020* (Collingwood: Launch Housing).
- Petersen, A., Davis, M., Fraser, S., and Lindsay, J. (2010) Healthy Living and Citizenship: An Overview, *Critical Public Health* 20(4) pp.391-400.
- Phelan, J.C. and Link, B.G. (2013) Fundamental Cause Theory, in: Cockerham, W. (Ed.) *Medical Sociology on the Move: New Directions in Theory*, pp.105-125. (Dordrecht: Springer Netherlands).
- Ramsay, N., Hossain, R., Moore, M., Milo, M., and Brown, A. (2019) Health Care While Homeless: Barriers, Facilitators, and the Lived Experiences of Homeless Individuals Accessing Health Care in a Canadian Regional Municipality, *Qualitative Health Research* 29(13) pp.1839-1849.
- Ranmal, R., Tinson, A., and Marshall, L. (2021) How do Health Inequalities Intersect with Housing and Homelessness?, *European Journal of Homelessness* 15(3) pp.113-121.
- Rose, N. (2007) Beyond Medicalisation, *The Lancet* 369(9562) pp.700-702.
- Rosenheck, R. (2021) Medicalizing Homelessness: Mistaken Identity, Adaptation to Conservative Times, or Revival of Social Medicine, *Medical Care* 59(4) pp.S106-S109.
- Seastres, R.J., Hutton, J., Zordan, R., Moore, G., Mackelprang, J., Kiburg, K.V., and Sundararajan, V. (2020) Long-Term Effects of Homelessness on Mortality: A 15-year Australian Cohort Study, *Australian and New Zealand Journal of Public Health* 44(6) pp.476-481.
- Swope, C.B. and Hernández, D. (2019) Housing as a Determinant of Health Equity: A Conceptual Model, *Social Science & Medicine* 243 p.112571.
- Tsemberis, S. and Eisenberg, R. (2000) Pathways to Housing: Supported Housing for Street-Dwelling Homeless Individuals with Psychiatric Disabilities, *Psychiatric Services* 51(4) pp.487-493.
- van Leerdam, J. (2013) Analysing Costs and Benefits of Homelessness Policies in the Netherlands: Lessons for Europe, *European Journal of Homelessness* 7(2) pp.157-161.
- van Menxel, G., de Wacker, A., and Blow, H. (2006) *The Right to Health is a Human Right: Ensuring Access to Health for Homeless People. National Report for Belgium for the FEANTSA annual theme* (Berchem: Steunpunt Algemeen Welzijnswerk).

- Varley, A.L., Montgomery, A.E., Steward, J., Stringfellow, E., Austin, E.L., Gordon, A.J., Pollio, D., deRussy, A., Hoge, A., Gelberg, L., Riggs, K., Kim, T.W., Rubens, S.L., Kertesz, S.G. (2020) Exploring Quality of Primary Care for Patients Who Experience Homelessness and the Clinicians Who Serve Them: What Are Their Aspirations? *Qualitative Health Research* 30(6) pp.865-879.
- Vallgård, S. (2011) Why the Concept 'Lifestyle Diseases' Should Be Avoided, *Scandinavian Journal of Public Health* 39(7) pp.773-775.
- Wasserman, J.A. and Clair, J.M. (2014) Homelessness, Medicalization of, in: Cockerham, W., Dingwall, R., and Quah, S. (Eds.) *The Wiley Blackwell Encyclopedia of Health, Illness, Behavior, and Society*, pp.1176-1180. (Hoboken, NJ: Wiley).
- Watts, B. (2013) Rights, Needs and Stigma: A Comparison of Homelessness Policy in Scotland and Ireland, *European Journal of Homelessness* 7(7) pp.41-68.
- Wen, C.K., Hudak, P.L., and Hwang, S.W. (2007) Homeless People's Perceptions of Welcomeness and Unwelcomeness in Healthcare Encounters, *Journal of General Internal Medicine* 22(7) pp.1011-1017.
- Willse, C. (2010) Neo-liberal Biopolitics and the Invention of Chronic Homelessness, *Economy and Society* 39(2) pp.155-184.
- Wood, L., Flatau, P., Zaretsky, K., Foster, S., Vallesi, S., and Miscenko, D. (2016) *What are the Health, Social and Economic Benefits of Providing Public Housing and Support to Formerly Homeless People?* (AHURI Final Report).
- World Health Organization [WHO] (1946) *Constitution of the World Health Organization* (New York, NY: International Health Conference).
- Wygnńska, J. (2016) Chronically Homeless People in Poland: Target Group of the 'Housing First – Evidence based Advocacy' Project, *European Journal of Homelessness* 10(2) pp.41-59.
- Yokota, K., Yu, S.W., Tan, T., Anderson, J., and Stormon, N. (2020) The Extent and Nature of Dental Anxiety in Australians Experiencing Homelessness, *Health & Social Care in the Community* 28(6) pp.2352-2361.
- Zlotnick, C., Zerger, S., and Wolfe, P.B. (2013) Health Care for the Homeless: What We Have Learned in the Past 30 Years and What's Next, *American Journal of Public Health* 103(S2) pp.S199-S205.

## Tables

**Table 1 – Configurations of Access to Health**

Configuration	Logic of Choice			Logic of care
	Means of meeting medical needs	Means of governance	Means of reproducing socio-economic relations	
<b>Key tenet</b>	Barriers to health service use drive differential health outcomes.	Housing and health are inseparable from behaviour change.	Service sector and governments perpetuate the social conditions for homelessness.	Socio-political context, cultural values, individual and population level relations inflect health practices.
<b>Questions</b>	How can <ul style="list-style-type: none"> <li>• <i>material</i> (e.g., fees, hours of work lost, transport)</li> <li>• <i>behavioural</i> (e.g., help-seeking)</li> <li>• <i>social</i> (e.g., stigma and shame)</li> </ul> barriers be addressed?	What is the best approach to address housing and health? <ul style="list-style-type: none"> <li>• <i>Housing First</i></li> <li>• <i>Treatment First</i></li> </ul>	What are the consequences of neoliberal governance? <ul style="list-style-type: none"> <li>• <i>Medicalisation</i> of chronic homelessness</li> <li>• <i>Demedicalisation</i> of psychiatric disorders</li> </ul>	How do people enact health in everyday practices on the margins of society? How are these practices embedded in social relations?
<b>Analytical focus</b>	Health systems	Social determinants of health	Rights and obligations in the neoliberal political economy	Situations of choice embedded in socio-cultural context

---

# Information and Communication Technology (ICT) Use Amongst People Who Were Housed in Emergency Hotel Accommodation During the COVID-19 Pandemic: Lessons from a Policy Initiative

---

Joanne Neale, Stephen Parkin, Alice Bowen, Laura Hermann, Landon Kuester, Nicola Metrebian, Emmert Roberts, Deborah Robson and John Strang

National Addiction Centre, King's College London, UK

► **Abstract** *Use of mobile phones, computers, and the Internet (ICTs) is part of everyday life; however, people experiencing homelessness have reduced opportunities to connect digitally. Responding to the COVID-19 pandemic, the UK Government implemented a policy initiative ('Everyone In') to provide emergency accommodation for people without homes. Alongside other essential support, many were given smartphones, credit, and/or access to free WiFi. This paper explores how people engaged with ICTs whilst they lived in two Everyone In hotels and after they returned to community settings. Between June 2020 and July 2021, we conducted 312 interviews with 35 people and analysed the data via Iterative Categorization. Participants owned inexpensive devices, that were sometimes in poor repair, and had often been gifted to them. Most described themselves as reliant on their phone and used it daily. Key barriers to ICT use were lack of credit, no/poor WiFi, and inability to charge devices. Desire for additional devices increased over time, especially after participants moved into more independent accommodation. We relate our findings to theoretical literature on digital inequalities, capital, and new materialism, and a simple model of ICT engagement is proposed. Drawing upon this, we identify ways of enhancing ICT use amongst people experiencing homelessness.*

► **Keywords\_** *Homelessness; Information and Communication Technology (ICT); mobile phone; qualitative; COVID-19; theory*

## Introduction

---

There is no universally agreed definition of homelessness, but its more extreme forms involve having no shelter or place to live (Neale, 1997; Humphry, 2014; Busch-Geertsema et al., 2016). People who are experiencing homelessness comprise one of the most vulnerable groups within society, often experiencing high levels of morbidity, mortality, poverty, unemployment, social isolation, loneliness, and poor access to healthcare (Rokach, 2005; Beijer et al., 2012; Fazel et al., 2014; Shinn et al., 2015). In England, official statistics suggest that, in the autumn prior to the COVID-19 pandemic, there were 4266 people experiencing street homelessness on a single night (MHCLG, 2021). According to the UK homeless charity Shelter, meanwhile, the number of people who were experiencing homelessness or in temporary accommodation in England in 2019 was 280 000 (Shelter, 2019).

Information and Communications Technology (ICT) refers to the use of computers and other electronic equipment and systems to collect, store, use, and send data electronically (Cambridge Advanced Learner's Dictionary and Thesaurus, 2021). The use of ICTs, such as mobile phones, computers, and the Internet, are now part of everyday modern life and having access to ICTs is increasingly considered an essential prerequisite to meaningful participation in society (OECD, 2000; Phipps, 2000). Despite this, the spread of ICTs have been uneven and many groups, including people experiencing homelessness, have had reduced opportunities to connect digitally (Sanders, 2020; Good Things Foundation and Homeless Link, 2021).

Poor engagement with ICTs has often been termed 'the digital divide' and people not using ICTs have been referred to as 'digitally excluded' (Selwyn, 2004; Dutton and Blank, 2013). More recently, the assumption that people are either users ('included') or non-users ('excluded') of technology has been replaced by a more nuanced understanding that there are different types and degrees of exclusion (or 'digital inequality'). Thus, digital exclusion is better understood as a multidimensional phenomenon; including, for example, not having the physical infrastructure (devices, software, and network access) to go online; an inability to acquire, maintain, or update digital skills; and lack of motivation for, or interest in, using digital technologies (Czaja and Urbaniec, 2019). Digital inequalities are also underpinned by socio-economic disparities relating to income, class, gender, race, education, age, disability, and place etc. (Lawson-Mack, 2001; Robinson et al., 2003; Gilbert et al., 2008). Furthermore, digital inequalities themselves create and

compound socio-economic disparities because poor engagement with technology reduces access to societal resources and other life opportunities (Halford and Savage, 2010; Humphry, 2014).

Establishing an accurate picture on the use of ICTs by people who are experiencing homelessness is difficult given the rapid pace of technological change and variability within and between countries and homeless populations. Studies from the UK, North America, and Australia have, however, shown that many people who are experiencing homelessness are digitally connected, but their use of ICTs is different from those who are housed (Humphry, 2014; Rhoades et al., 2017; Calvo et al., 2019; Sanders, 2020). For example, many people who are experiencing homelessness own a mobile phone, but not a computer, and rely on expensive pre-paid services, rather than cheaper contracts with network providers (Humphry, 2014; Neale and Stevenson, 2014). This often results in higher costs and reduced mobile credit, as well as periods of disconnectivity (Humphry, 2014; Gonzales, 2016; Polillo et al., 2021). In one study of people who were experiencing homelessness and using substances conducted in England during 2012/2013, nearly all participants had a mobile phone, but most had basic inexpensive phones, several had phones that did not work, and many spoke of losing or having phones stolen (Neale and Stevenson, 2014).

Although many participants in the study by Neale and Stevenson (2014) used their mobile phone daily to call or text, others explained that they did not use their phones very often as they could not afford credit, had problems charging their devices, or just wanted a phone to make or receive calls occasionally. Alongside calling and texting, participants said that they used their phones for emailing, setting alarms or reminders, listening to the radio or music, keeping a diary, making audio recordings, taking photographs or videos, playing games, and using the calculator function. Some reported good knowledge of their mobile phone and its capabilities, but others said that they did not take full advantage of their device because they did not know what it could do, how to set up and use functions, what their current payment method covered, or how to monitor their usage to avoid large bills. Computer literacy was also variable. A few participants said that they knew how to program, others stated that they knew 'enough', and some emphasised that they did not know much about computers at all (Neale and Stevenson, 2014).

According to a more recent international scoping review, the percentage of adults who were homeless and using social networking sites ranged from 17% to 41% (Calvo and Carbonnell, 2019). Meanwhile, a separate review of ICTs and e-Health found that people experiencing homelessness used mobile phones primarily to communicate with other people or to access information via the Internet, whereas they used computers to search for work, refuge, or housing; to communicate with other people; and for leisure (Calvo et al., 2019). A later systematic review concluded

that people experiencing homelessness were interested in using ICTs and were willing to use technology for health-related purposes (Polillo et al., 2021). This finding is consistent with Neale and Stevenson (2014) whose participants expressed a desire to learn more about ICTs; Calvo and Carbonell (2019) who concluded that people experiencing homelessness were motivated to use social networking sites; and Dorney-Smith and Gill (2017) who reported that members of the homeless population in London, UK, were interested in having online access to their GP records.

Using ICTs is not without risk and dangers; for example, online theft, fraud, harassment, violations of privacy, data loss, account hacking, and other breaches of trust. Nonetheless, research has shown how mobile phones and computers have many potential benefits. Amongst people experiencing homelessness, this can include helping them to (re)establish and maintain relationships and alleviate boredom (Neale and Stevenson, 2014; Moczygemba et al., 2021). Virtual contact through social networking sites can also reduce their risk behaviour, substance use, and depressive symptomology whilst increasing their opportunities for employment and job training (Yost, 2012; Rice et al., 2011; 2012). Learning to use Facebook has additionally been shown to enhance the psychological well-being of people experiencing homelessness (Calvo and Carbonell, 2019) and mobile phones can help them manage medication (Burda et al., 2012). In short, ICTs can offer important opportunities for improving health and well-being, increasing social integration, raising goals and aspirations, and producing tangible benefits in a range of life areas (Neale and Stevenson, 2014).

## COVID-19

---

In March 2020, COVID-19 was declared a pandemic (WHO, 2020a) and there was rapid and widespread agreement that people who were experiencing homelessness were at heightened risk of contracting the virus and of becoming unwell (Bernard, 2020; US CDC, 2020; WHO, 2020b). In response, the UK Government implemented a policy initiative, known nationally as 'Everyone In', to provide temporary and emergency accommodation (often in commercial hotels) for everyone experiencing street homelessness and other forms of homelessness (Crisis, 2020). By July 2021, data suggested that 37 000 people had been supported by Everyone In, and, of these, over 26 000 had been moved into longer-term accommodation (The Kerslake Commission, 2021).

In London, Everyone In was overseen by the Greater London Authority and London borough councils, which brought together multiple services and agencies to provide temporary accommodation for over 5 000 people. Alongside a room, free food, medical care, advice on benefits, and broader social care and support, many



of those accommodated within Everyone In were given relatively inexpensive smartphones and credit, as well as free WiFi, to make it easier for them to maintain contact with professionals (St Mungo's, 2021). Some service providers also helped those living in the hotels to access online services and to apply for grants for laptop computers (St Mungo's, 2021). This was considered necessary given that the pandemic had resulted in most care and support, including assessments and routine appointments, being transferred online or to phone or video calls; yet mobile phone ownership amongst those accommodated was believed to be low (Doctors of the World, 2020).

In this paper, we explore how a group of people, including some who had been given mobile phones, engaged with ICTs whilst they were living in two Everyone In hotels and during the nine months after they had moved out. To this end, we draw upon data collected as part of an unfunded rapid evaluation of Everyone In conducted between June 2020 and July 2021 (Neale et al., 2020; Neale et al., 2021; Parkin and Neale, 2021). Ethical approval for this research was granted by King's College London Research Ethics Committee (CREC-HR-19/20-18676) and access to the two hotels (hereafter Hotel A and Hotel B) was approved by the service providers managing the premises. In separately analysing and presenting the data on engagement with ICTs, our objective is to provide insights that might inform digitally inclusive policies and service delivery for people experiencing homelessness in the future.

## Methods

---

### *Recruitment*

The study design was qualitative, longitudinal, and conducted by telephone due to social distancing requirements (Parkin et al., 2021). As all hotel residents were presumed to have been given a phone if they did not already own one and had been advised to stay in their rooms except for essential activities, this provided an unusual opportunity to interview people who might normally be invisible to, or excluded from, telephone-based research. To optimise recruitment, however, three team members (JN, NM, and DR) attended the two hotels in person on six separate occasions between June 2020 and September 2020. During each visit, they knocked on room doors, gave brief verbal explanations of the research (whilst wearing face coverings and at a safe distance), and left study information packs comprising a participant information sheet and informed consent form. The study pack also included a phone number which residents were invited to text or call if they wanted to learn more and/or participate. Approximately 300 study packs were distributed, and 41 hotel residents contacted the research team.

One team member (SP) answered all telephone calls and texts and spoke to all potentially interested hotel residents to check that they understood the aim of the study and what participation would involve. Once a resident had confirmed that they wanted to participate, SP established a date and time for their first interview. Six residents who made contact spoke almost no English and so could not meaningfully consent, meaning that only 35 of the 41 residents were recruited. These 35 residents were told that a researcher would be in touch to interview them at the agreed time, and interviews were then conducted by one of a team of 11 interviewers. Prior to any data collection, all 11 interviewers attended online training sessions on conducting the interviews and managing, entering, and storing the data securely. Throughout the study, team members also maintained regular online contact with each other to share procedural information, trouble shoot, and ensure consistency of approach.

### *Data generation*

Data were generated in three distinct stages (see Box 1).

#### **Box 1: Data Generation**

	<b>Stage 1 ('in hotel')</b>	<b>Stage 2 ('move on')</b>	<b>Stage 3 ('post hotel')</b>
Date	June – September 2020	July – December 2020	April – July 2021
Number of participants	35	28	13
Recruitment hotel			
Hotel A	31	26	13
Hotel B	4	2	0
Number of interviews completed by each participant	1-5	1-5	1
Duration of interviews	20-30 minutes	20-60 minutes	25-30 minutes
Total number of interviews completed	165	134	13
Topics covered	Demographic characteristics and life circumstances; experiences of moving into and living in the hotel; housing and homelessness prior to the pandemic; alcohol and other drug use; smoking; health, including COVID-19; accessing support; relationships; use of ICTs; and expectations about moving out of the hotel	Current life circumstances; experiences of moving out of the hotel; current accommodation; alcohol and other drug use; smoking; health, including COVID-19; accessing support; relationships; use of ICTs; and views on the future	Current life circumstances; current accommodation; relationships; substance use; health, including COVID-19; use of ICTs; and views on the future

Stage 1 ('in hotel') comprised interviews with the 35 hotel residents whilst they were living in Hotel A (n=31) or Hotel B (n=4). So as not to overwhelm participants by asking them to commit to a lengthy telephone interview, each resident was invited to participate in up to five brief telephone interviews (each lasting between 20 and 30 minutes, conducted over the course of a week). Whenever possible the same interviewer conducted all the interviews with any given participant. During Stage 2 ('move on'), 28 participants were successfully recontacted, and all again participated in up to five follow-up interviews (each lasting between 20 and 60 minutes, conducted on a weekly basis over one month). Where possible, each Stage 2 interview was completed by the same interviewer who had undertaken any given participant's Stage 1 interviews. Stage 3 ('post hotel') occurred nine months after participants had left the hotel where we had recruited them. Many of the phone numbers used at Stages 1 and 2 were now out of service but 13 participants were successfully recontacted, and each completed one short follow-up interview with SP (each lasting between 25 and 30 minutes).

In total, 312 interviews were conducted (165 interviews at Stage 1; 134 interviews at Stage 2; and 13 interviews at Stage 3). Of these, 311 interviews were audio recorded; generating a total of 125 hours of recorded interview data (52 hours from Stage 1; 62.5 hours from Stage 2; and 10.5 hours from Stage 3). One Stage 3 interview was conducted by email because the participant was in Europe and had problems connecting by phone. Prior to the interview, participants provided verbal consent which was also audio recorded (Gordon, 2000). All participants received a £40 gift voucher on completion of their Stage 1 'in hotel' interviews; a £50 gift voucher on completion of their Stage 2 'move on' interviews; and a £10 voucher on the completion of their final Stage 3 'post hotel' interview. Those who completed all three stages of the study therefore received a total of £100 in gift vouchers.

### ***Data management and analyses***

The 11 interviewers entered their own interview data into a preprepared Excel file. This comprised a sheet for each interview, a row for each participant, and a column and sub-columns for each topic. Each interviewer listened to their own interviews and summarised their participants' responses into the appropriate cells in the file. After each study stage, JN merged all the interviewers' Excel files into one main Excel file which then provided the source for undertaking a framework-guided rapid analysis (Ritchie and Lewis, 2003; Gale et al., 2013; Parkin et al., 2021) for the main study reports (Neale et al., 2020; Neale et al., 2021; Parkin and Neale, 2021). This was achieved by reading across the spreadsheets to review individual participants' responses to different topics at different times and down the spreadsheet to identify patterns and themes relating to each topic.

For this paper, all data entered under ICT-related topics (columns in the Excel file) were first analysed inductively by JN following the principles of Iterative Categorization (Neale 2016; 2020). To this end, the ICT-related columns within each sheet (interview) were reviewed and similar points were grouped together in one Word document to produce a summary for each of the three interview stages. Findings from the three ICT summaries were then read together and this indicated that all the key ICT data could be organised under five descriptive headings: i. the types of devices participants owned; ii. ICT usage; iii. data and credit; iv. barriers to ICT engagement; and v. the relevance of ICTs to participants' lives. Next, the content of each of the three summary documents was merged into one main Word document and re-ordered under the five descriptive headings by interview stage. After the data had been reorganised in this way, JN returned to the Excel file to check for accuracy and updated the Word document with minor amendments.

At this point, internal university funding was secured to professionally transcribe the Stage 3 interviews. In addition, JN and SP listened to a selection of the remaining audio files and transcribed salient comments relating to ICTs. The professionally transcribed and team transcribed data together provided a stock of verbatim data from which quotations could be selected to illustrate key findings. Once a draft of the manuscript had been completed by JN, all authors who had been involved in the interviews (AB, SP, LH, and LK) reviewed the findings to check that they were consistent with their own recollections and interpretations of the data. Any discrepancies were resolved by returning to the study Excel files and audio transcriptions, and the manuscript text was amended accordingly.

### ***Participants***

Most of the 35 study participants were single, separated, divorced, or widowed (few said that they had partners). As Hotels A and B only accommodated adults, no participants had resident children (although about half had children who were living with ex-partners or who were grown up). At Stage 1, participants were mostly male ( $n=28$ ) and had a mean age of 48 years (range 21-75 years). In total, 11 had been born in the UK, three had been born in other parts of Europe, and 21 had been born in other parts of the World (Algeria, Angola, Antigua, Brazil, Ecuador, Eritrea, Ghana, Iran, Iraq, Jamaica, Nigeria, Guinea, South Africa, Togo, Trinidad, and the United States). Several participants said that they were asylum seekers, refugees, or had no legal immigration status (others preferred not to discuss this topic).

The longest period of homelessness at Stage 1 was 30 years and the shortest period was four nights. Whilst homeless, people stated that they had slept in a variety of places, including hostels and shelters, bed and breakfast hotels, empty buildings, parks, vehicles, at airports, on the streets, and in the homes of acquaintances. When Hotels A and B closed (autumn 2020), participants were moved to

diverse types of accommodation, including other hotels within Everyone In, hostels, bed and breakfast hotels, shared flats, independent flats, houses of multiple occupation, and supported accommodation. In addition, two male participants went travelling in Europe and another returned to living in a tent. Only one of the 13 participants interviewed at Stage 3 had a secure tenancy beyond 2021.

Table 1 presents other basic information about participants at all 3 stages and shows how the profile of the sample changed slightly between Stages 1 and 3 due to participant attrition.

<b>Characteristics</b>	<b>Stage 1: 'in hotel' N = 35 (%)</b>	<b>Stage 2: 'move on' N = 28 (%)</b>	<b>Stage 3: 'post hotel' N = 13 (%)</b>
Sex:			
Male	28 (80.0)	23 (82.1)	11 (84.6)
Female	7 (20.0)	5 (17.9)	2 (15.4)
Mean age in years (range)	48 (21-75)	47 (21-75)	53 (29-76)
Born			
UK	11 (31.4)	11 (39.3)	5 (38.5)
Europe	3 (8.6)	2 (7.1)	1 (7.7)
Other parts of the world	21 (60.0)	15 (53.6)	7 (53.8)
Formal qualification			
Yes	20 (57.1)	18 (64.3)	9 (69.2)
No	15 (42.9)	10 (35.7)	4 (30.8)
Homeless for three years or more			
Yes	14 (40.0)	13 (46.4)	7 (53.8)
No	16 (45.7)	13 (46.4)	6 (46.2)
Missing	5 (14.3)	2 (7.1)	0 (0.0)
Self-reported problems with alcohol or other drugs			
Yes	10 (28.6)	9 (32.1)	4 (30.8)
No	24 (68.6)	19 (67.9)	9 (69.2)
Missing	1 (2.9)	0 (0.0)	0 (0.0)
Given a hotel phone			
Yes	14 (40.0)	13 (46.4)	4 (30.8)
No	19 (54.3)	15 (53.6)	9 (69.2)
Missing	2 (5.7)	0 (0.0)	0 (0.0)

## Findings

### *Devices owned*

At Stage 1, all participants confirmed that they owned a mobile phone, and some reported that they owned more than one phone. However, these devices were often basic ('non-smart') phones that offered limited functionality. Fourteen participants

said that they had been given a smartphone with some credit or free data (all from Hotel A), and others described how they owned phones that they had bought or been gifted prior to the pandemic. For example, one male participant had previously been given a basic phone from a homelessness charity but had more recently bought a second-hand phone from a friend:

[Homelessness charity] did give me one... It's not the latest Samsung whatever. It's just a little... old-fashioned green screen mobile... That saved me because I didn't have a phone at that time... Since then, I managed to save up money and buy a proper phone. I've bought a Motorola phone from a friend of mine. It's a second-hand phone... I just pay him in instalments. (Stage 1, participant 18, Hotel A, male, aged 55 years, born in the UK)

When interviewed at Stage 2 (immediately after leaving their first hotel), some participants were still using the smartphone given to them in Hotel A, others were using a phone that they had prior to the pandemic, and some were using a phone that they had been given or bought more recently. A few participants reported that they continued to own more than one phone, although many said that they owned phones that were broken or not fully functional (for example, one participant's phone could not make calls whilst another's had audio problems).

By Stage 3, only four of the participants who had originally been issued with a hotel phone remained in the study and only two continued to use that phone (the third had reverted to an 'old' phone, and the fourth had swapped the SIM card over to a different phone). Most participants at Stage 3 were using their own (non-hotel) phone and again described a mixture of relatively inexpensive smartphones and old 'basic' phones, which were often in poor working order:

It's damaged, because the screen, it fell... As I'm talking to you the screen is black. (Stage 3, participant 03, Hotel A, female, aged 36 years, born outside the UK)

In addition to owning a mobile phone, several participants at Stage 1 reported that they owned a tablet and/or laptop computer and one said that he had an iPod Touch. Participants did not, however, always have these devices with them in the hotel, often explaining that they were being stored by family, friends, or a charity. By Stages 2 and 3, a small number of participants who had moved into more independent accommodation had acquired extra devices, such as a smart television, Kindle, and/or laptop, usually donated by a friend, relative, or charity, rather than personally purchased. In addition, several participants said that they visited community libraries to access a computer and one borrowed a laptop belonging to the hotel where he was currently staying.

### *ICT usage*

Whilst living in Hotels A and B, several participants reported that they only used their phone occasionally whereas many said that they used their phone all the time. Most reported using phones for making and receiving calls and texts, but also for other internet-based activities. As one male participant explained:

I use my phone for calling people, social media, texting people, emails, banking, so every potential thing. (Stage 1, participant 02, Hotel B, male, aged 21 years, born outside UK)

Participants routinely described how they liked to use applications (apps) for listening to the radio, music, and podcasts; watching TV; getting news; looking things up; studying; emailing; writing blogs or poetry; learning about arts and crafts; taking photographs or videos; supporting their recovery from addiction; participating in online social groups; playing games; monitoring their fitness; learning languages; reading the bible; shopping; or banking. A few participants said that they did not engage with social media because they did not want an obvious online presence in case they were identified by the Home Office (government department responsible for immigration, security, and law and order), and one expressed concern about dating apps, to which he believed he was addicted. In contrast, many others said that they enjoyed using social media (including Facebook, Snap Chat, Instagram, Twitter, LinkedIn, Viber, YouTube, TikTok, and Grindr); although a few clarified that they preferred to view others' profiles rather than post material themselves:

I'm kind of like a voyeur of apps... I watch YouTube videos and, erm, and social media wise, like, I'm on a few but... I don't ever post anything on Facebook, but I just use it to, like, look at my friends... and stuff like that. (Stage 1, participant 16, Hotel A, female, aged 44 years, born outside the UK)

Whilst living in the hotels, many participants also used video calling platforms (WhatsApp, Zoom, Facetime, Skype, and Vivo) to speak with relatives (who were often overseas), friends, employers, or members of church or refugee groups to which they belonged. Indeed, many said that they liked to see the caller's face on their screens. Despite this, some participants stated that they did not have anyone to video call (particularly if family members in their home countries did not have the necessary technology), they preferred face-to-face contact, or they were too self-conscious about their appearance to use this facility:

Personally, I don't really like video calling, because... I hate seeing my face on things. (Stage 1, participant 29, Hotel A, male, aged 56 years, born in the UK)

In addition, participants sometimes used laptops and tablet computers for studying, looking things up, attending online classes, producing artwork, applying for benefits and jobs, and completing paid work. Only a few participants stated that they did

not know how to set up a mobile phone and would need support with this. In contrast, many said that they would be willing and able to help other hotel residents set up their phones, and some added that they had already assisted people in the hotel with this.

Varied patterns of phone and wider ICT use were also evident at Stages 2 and 3, after participants had left their first hotels. Alongside the ICT-related activities reported at Stage 1, people were now using their phones and other devices for contacting a wider range of services and professionals (doctors, hospitals, drug treatment services, housing organisations, immigration services, solicitors, lawyers, and benefit agencies); for working or a paid job; for travel-related activities (booking and paying for tickets and using maps); and for jobhunting or looking for volunteering opportunities. For example, one male participant, who had returned to travelling in Europe, explained how he used his phone constantly:

I'm never off it [phone]... you have to take videos and pictures of everything... you have to look up everything on Maps... And then I'm on like Facebook poetry groups and then I type up my poetry on my phone too... Then you have to use it for all the other things like for volunteering, and emails, and coaches, and Duolingo and Google Translate and Workaway app. It's just endless. (Stage 2, participant 15, Hotel A, male, aged 38 years, born in the UK)

### ***Data and credit***

Most participants stated that they relied on the free hotel WiFi when interviewed at Stage 1, although a few paid their own phone bills (via either a contract or a monthly top up) and several explained that charities, friends, or family members sometimes added credit to their phone. Some participants also described how they had previously struggled to pay phone bills and had accrued debts (sometimes ongoing and sometimes now repaid). One participant noted how he had experienced difficulties paying his phone bill after losing his job in the year prior to the pandemic, but had since managed to repay what he owed and swapped to a less expensive phone contract:

I was kind of like struggling... until I was able to set up all my payments... But since I got my first Universal Credit [state benefit], then I'm able to clear it [phone debt] all off... Then they [phone company] offered me unlimited everything... For £20 a month... So, I have unlimited calls, unlimited texts. (Stage 1, participant 29, Hotel A, male, aged 56 years, born in the UK)

At Stage 2, several participants confirmed that they had retained their phone contract from before the pandemic, which they continued to pay monthly using their state benefits or work income. Meanwhile, a few had also tried shopping around for a better data package as they felt they were paying too much. Others still relied



on friends or relatives to ‘top up’ their data or remained grateful for the credit remaining on the free package received with their hotel phone; although several worried about how long these data would last and how they would manage once they ended. Some participants also expressed dismay that they had already used all their credit and so were reliant on free WiFi whenever they could access it, or on a phone in the staff office if this was available in their move-on accommodation:

Phone calls they don’t give us credit for... No top up, no credit... I don’t have phone for anything, so if I want to call... [I need to] go down and use the office phone line. The credit they gave me... is finished now. Maybe I can receive a call, but I can’t call anybody. (Stage 2, participant 05, Hotel A, male, aged 63 years, born outside the UK)

Participants’ ability to buy credit and top up their mobile data nine months after leaving their first hotel varied according to their wider financial situation (access to benefits, employment, and family support) but remained overall limited. Several participants had shopped around in search of data packages that were good value for money; however, most remained dependent on the free WiFi within their current accommodation; had to rely only on incoming calls and texts; or waited for a friend, family member, or charity to top up their credit:

I’m managing, just managing. Sometimes the charity tops it [phone credit] up for me... Sometimes when I have top-up... I can use the Internet on my phone. (Stage 3, participant 11, Hotel A, male, aged 44 years, born outside the UK)

### ***Barriers to ICT engagement***

At Stage 1, only a few participants said that they did not own or use technology because they lacked the necessary IT skills. Most said that cost (particularly having to pay phone bills but also the expense of buying larger devices) was the main barrier to owning and using ICTs:

Interviewer: Is there a particular reason you don’t have an iPad or computer?

Participant: Because I can’t afford it... You can give me one, I’ll be happy.

(Stage 1: participant 03, Hotel A, female, aged 56 years, not born in the UK)

Some participants also reported that it had previously been difficult to retain devices when living on streets because they were often stolen and/or difficult to charge. Indeed, participants described how, prior to the pandemic, they had to be creative in locating and using electricity sources in public locations, such as cafes, toilets, blocks of flats, libraries, tourist information centres, churches, day centres, and transport hubs. One participant also explained how he and a group of other people who were homeless had accessed free WiFi by sleeping in the doorway of a large London theatre:

Sleeping at the [name of theatre], you used to get free WiFi there at night. So, I'd try to keep the power [on his mobile phone] up so I could watch the TV at night-time... It's free WiFi down at the theatre. It's just one of the bits of London where you can get free WiFi... It was brilliant... once I worked it out. (Stage 1, participant 13, Hotel A, male, aged 40 years, born in the UK).

During their Stage 2 interviews, participants again reported that the main reasons they did not use ICTs were lack of phone credit, having no or poor access to WiFi, and not being able to charge devices. By this time, some phones had already been disconnected because of non-payment of bills, and many stated that they missed the free WiFi from their first hotel. Those who had been moved into other hotels also often complained that the WiFi available to them now was weak and unstable, which made it difficult to complete online tasks and necessitated constant trips to the hotel reception where the signal was generally stronger. One participant who wanted to study expressed frustration at the combination of noisy hotel neighbours, which disrupted his concentration, and the unstable hotel WiFi:

There is WiFi... disconnecting, connecting, disconnecting, connecting... it's not stable. (Stage 2, participant 06, Hotel A, male, aged 43 years, born outside the UK)

In addition (and in slight contrast to the Stage 1 interviews), several participants now said that they did not fully understand how their smartphone or tablet computer worked and one noted that her iPad was locked, but she could not afford to pay £20 to unlock it. Another, who relied on an iPod Touch for staying in contact with people by email, was also struggling to keep this charged:

I have an iPod Touch which I was using quite a lot... with a USB port I could keep the thing trickle charged all the time... I was going to throw it away as not working... but I left it in this trickle charger... and after a couple of weeks it started working, much to my surprise... I'm afraid I haven't had chance at the moment [to charge it]. (Stage 2, participant 12, Hotel A, male, aged 73 years, born in the UK)

After nine months (at their Stage 3 interviews), participants continued to identify the same three core factors as barriers to ICT use. These were: lack of credit, no or poor access to WiFi (including weak signal or slow download speed), and not being able to charge devices (particularly if participants had returned to sleeping on the streets). One participant encountered problems using his mobile phone because he was travelling in Europe and could not connect to the phone networks there. Another, who was still living in an Everyone In hotel, identified a combination of problems, including the slow hotel WiFi, his poor eyesight, and lack of peripheral devices for printing and scanning.

### ***ICT relevance***

At Stage 1, most participants said that they relied on their mobile phones for all kinds of tasks and functions. Nearly all were consequently pleased to have received a mobile phone from Hotel A and many of those who had not received a phone expressed disappointment and/or annoyance. Whilst a couple of participants explained that they did not want or need a second phone, others appreciated, or said that they wanted, an additional device. Several participants referred to mobile phones as being 'essential', particularly during the national lockdown. Indeed, one male participant said that playing games on his phone had stopped him from 'going mad' in his hotel room.

Despite this positivity, two participants expressed reservations about mobile phone ownership for moral and ethical reasons (although both said that they were happy to own a phone now that they were in the hotel). One man explained that he had always felt that it was 'wrong' to own a phone whilst he was begging, and another said that he objected to how phones were made:

Not agreeing with where they [manufacturers] get the minerals from for their screens... making them illegally, illegal mines in Central Africa, and just promoting poverty and starvation and whatever... They ain't got no morals. (Stage 1, participant 33, Hotel A, male, aged 55 years, born in the UK)

Overall, participants at Stage 1 favoured smartphones over non-smartphones because of the former's greater functionality. Equally, they preferred mobile phones over larger devices, because they said that computers were too heavy to carry around, they could access a computer in a library, and/or they did not feel that they needed a computer if they had a phone. Nonetheless, several participants confirmed that they would like to learn more about computers and/or would consider getting a computer after being rehoused or when working again. Indeed, several participants recognised that computers and tablets had a range of advantages over mobile phones as their keyboards made them better for typing and video editing and they also had greater storage:

A few things that I am doing, I would rather [have] an iPad... Because it's bigger and I can store things on it... Because sometimes, with my phone, I have to delete things on it, because... I can't use it without clearing everything... If I have that [an iPad], I wouldn't be doing that... I would store things inside there. (Stage 1, participant 09, Hotel A, female, aged 52 years, born outside the UK)

After moving out of Hotels A and B, most participants said that they continued to rely on their mobile phones. Again, several participants emphasised that their phone was their 'lifeline' and/or their 'connection to the world'. One participant, who reported that he was using an old phone because his hotel issued phone had been

stolen, explained how he had had no access to the Internet since leaving Hotel A and this disadvantaged him when applying for jobs as he had to physically walk around local hotels asking for kitchen work.

In addition, many participants at Stages 2 and 3, particularly those who seemed more stable in their move on accommodation, expressed a desire for better phones, additional devices, and improved connectivity. This included hopes for devices with larger screens (particularly for those with eyesight problems and those who wanted or needed to type), speakers (for listening to and making music), a PlayStation, a printer, and an Amazon Alexa (type of virtual assistant). Several participants also emphasised that they wanted, or hoped, to secure a tablet, laptop, or desktop computer in the not-too-distant future so that they could complete 'more serious' tasks, such as preparing their CV, completing government forms, job searching, 'getting organised', reading, and 'keeping busy'. By Stage 3, only one participant said that he had no interest in owning any devices besides his phone.

## Discussion

---

There are notable consistencies between our findings and the extant international literature. For example, our participants tended to own relatively inexpensive (basic or smart) mobile phones, which were sometimes in poor repair or not fully functional and had frequently been gifted to them by others (Humphry, 2014; Neale and Stevenson, 2014). Despite this, most described themselves as being reliant on their phone and many said that they used it for a wide range of daily functions (Neale and Stevenson, 2014; Dorney-Smith and Gill, 2017; Calvo et al., 2019; Humphry, 2019; Moczygamba et al., 2021; Polillo et al., 2021). For the most part, participants seemed to have good basic mobile phone literacy. Nonetheless, participants' wider computing skills seemed less strong, with many reporting a desire to learn more and some adding that they would be interested in acquiring and using a computer once they were more settled (Neale and Stevenson, 2014; Polillo et al., 2021).

As also found in previous research, affordability was a major barrier to ICT engagement (Humphry, 2014; Neale and Stevenson, 2014; Doctors of the World, 2020; Good Things Foundation and Homeless Link, 2021). In practice, this was less of a problem at Stage 1 when everyone had access to reliable free WiFi within their hotel, but more of a constraint at Stages 2 and 3 after participants had moved on to new accommodation and credit from hotel-issued phones had expired. Whilst some participants relied on *ad hoc* financial support from friends, relatives, or charities, others said that they had phone bills they could not pay, and some had run out of credit so could only receive incoming texts or calls; resulting in periods of disconnectivity (Humphry, 2014; Gonzales, 2016; Polillo et al., 2021). Other

barriers to ICT use included slow WiFi connections, keeping devices charged, having to carry and store heavy devices, and theft, particularly whilst sleeping on the streets (Humphry, 2014; Neale and Stevenson, 2014; Good Things Foundation and Homeless Link, 2021).

The longitudinal design of our study facilitated some further insights. For example, the devices on which we had initially contacted participants were frequently not in service by Stage 3. Whilst this may reflect the poor quality and consequent short-life span of the inexpensive phones that our participants owned, it seems equally likely to relate to the difficulties participants experienced in paying for calls and data and keeping their devices charged. Additionally, our participants mostly preferred smartphones over non-smartphones and mobile devices over laptop and tablet computers, particularly at Stage 1. Yet, ownership of, and desire for, additional devices seemed to increase over the course of the study, especially after participants moved into more independent accommodation, seemingly highlighting latent ICT needs. Furthermore, ICTs were mostly used for communication and entertainment during the 'in hotel' Stage but employed for a wider range of more formal reasons, including 'organisational' and 'productivity' functions, at the 'move on' and 'post hotel' stages. This reminds us that devices serve different functions and choice of device is context dependent.

Our findings confirm the existence of digital inequalities rather than a simple binary digital divide (Lawson-Mack, 2001; Robinson et al., 2003; Gilbert et al., 2008). Thus, participants were not excluded from technology in any absolute sense. Rather, they had differential access to devices, data, charging points, storage, skills/knowledge, contracts, and tariffs. Moreover, these changed over time and place (for example, on the streets, in the hotels, and in their diverse forms of move-on accommodation). Equally, participants had differential access to wider physical and social resources (for example, supportive family or friends who would pay for credit or donate devices, ability to engage in paid work, or even good eyesight and dexterity for using small screens). As a result, participants experienced digital inequalities in relation to their resources and contexts, but these were not fixed, and digital inclusion could increase or decrease (if, for example, a device suddenly stopped working, a participant moved to new accommodation without reliable WiFi, or a service provider allowed someone to use an office phone).

The analyses we present also speak to theoretical literature on 'capital' (that is, the economic, cultural, and social assets that enable people to progress and achieve in society) (Bourdieu, 1977; 1985; 1986; Coleman, 1988; Putnam, 1995; Halford and Savage, 2010). According to Bourdieu (1977; 1985; 1986), capitals operate within contexts or 'fields' and have the potential to accumulate within that field and/or convert to advantage in other 'fields'. For example, within the context of homeless-

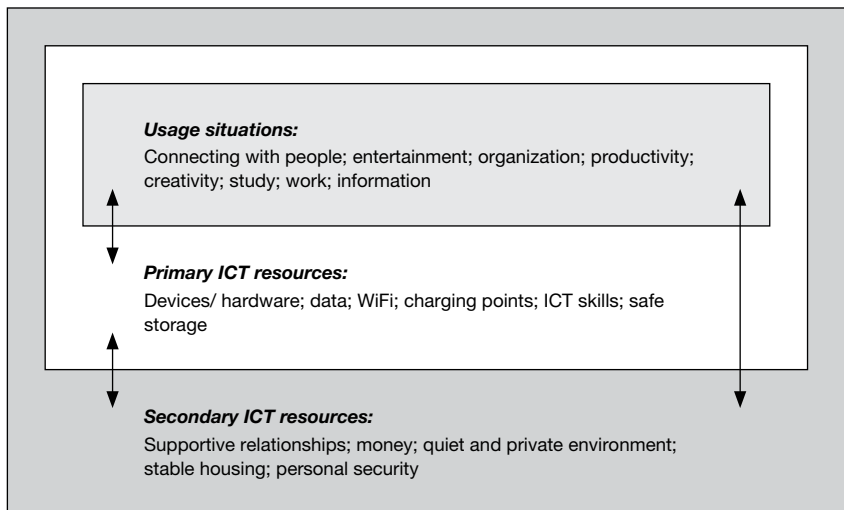
ness ('field'), ICTs ('capital') helped our participants to maintain relationships (generating 'social capital'); participate in education, travel, art, and poetry (generating 'cultural capital'); and apply for state benefits, organise their finances, and engage in paid work (generating 'economic capital') (cf. Parkin, 2013; Neale and Stevenson, 2014; Neale and Brown, 2016; Montgomery et al., 2020). In this way, the use of ICTs created additional capital that enabled our participants to manage their homelessness, but also produced benefits in other fields or contexts (such as, work, health, and immigration). In contrast, poor access to ICTs impeded participants' ability to deal with their homelessness and perpetuated their wider social, cultural, and economic marginalisation by diminishing their opportunities for social contact, meaningful activity, study, work, and engagement with professionals who might help them with health, housing, social care, and immigration-related needs. This appeal to the concept of capital is not to suggest that the use of ICTs is unambiguously positive; indeed, a few participants avoided social media because they were anxious about being identified by the Home Office, one was concerned about being addicted to dating apps, and some had accrued debts from phone bills. However, our participants' accounts clearly showed how the benefits of ICT use and engagement outweighed the negatives.

Beyond this, our findings can be linked to the interdisciplinary field of 'new materialism' and particularly to 'actor-network theory', which is a key strand of new materialism (c.f. Halford and Savage, 2010). As an approach, new materialism maintains that human and non-human phenomena are interconnected (rather than discreet) and, as such, their effects are contingent and variable rather than fixed or stable (Haraway, 1991; Coole and Frost, 2010; Braidotti, 2013; Fox, 2016). Thus, ICTs (such as mobile phones, computers, and technological infrastructure and availability) are physical but simultaneously social, cultural, historical, and political. ICTs do not exist independently of the humans who use them, the places and times they are used, and the reasons they are used. Accordingly, and as our data revealed, the properties of any device are affected by multiple interrelated factors including its cost; how easy it is to charge and store securely; the functions it performs; to what extent those functions are deemed a priority by the end user; and the financial and wider life circumstances of that end user. Furthermore, the use of ICTs, in turn, affects other human and non-human phenomena, such as relationships, employability, income, the ability to contact doctors and solicitors, and the potential to acquire other technological devices (Latour, 1991; Halford and Savage, 2010; Humphry, 2019).

These theoretical approaches have their respective strengths and weaknesses and require further empirical investigation which we leave for future studies. Until then, we have brought our findings together into one simple visual model that we hope will be of interest and use to those who wish promote ICT engagement amongst

people who are experiencing homelessness with more immediate effect (see Figure 1). At the core of this model are ‘usage situations’: the activities we understand that people who are experiencing homelessness want to perform using digital devices: for example, staying in touch with family, friends, and services; finding entertainment; being organised, productive, or creative; studying; working; and accessing information. Surrounding this are the ‘primary ICT resources’ needed to complete the desired activities. These will include devices and other hardware; data and/or WiFi; charging points; ICT skills; and safe storage. Finally, and external to this, are ‘secondary ICT resources’ which comprise the infrastructure that enable people to meaningfully use the primary resources to complete the desired ICT activities. These will likely include supportive relationships, money, a quiet and private environment, stable housing, and a degree of personal security. Our findings suggest that these three spheres operate in a dynamic and interactive way with increases in one potentially generating benefits in the others.

**Figure 1: Facilitating ICT engagement amongst people experiencing homelessness**



### **Limitations**

Our study was conducted at short notice, during a pandemic, and with almost no funding. As such, the data we have generated and analysed have limitations. Most obviously, our participants came from only two (and mostly from just one) Everyone In hotel in London. In addition, they had specific demographic characteristics (predominantly single men; most born overseas; all able to read and speak basic

English; and all in possession of, and able to use, a mobile phone). We cannot therefore claim that our sample is representative of all people accommodated by Everyone In or all people experiencing homelessness in the UK during the pandemic. Furthermore, only 13/35 (37.1%) of our original study participants were reinterviewed at Stage 3 and the balance of participants' demographic characteristics had changed by this point; meaning that those participating at the end were not necessarily representative of the initial study sample.

Although many of the mobile phone numbers used in the Stage 1 interviews were no longer in service by Stage 3, we cannot definitively conclude that we lost participants to follow up because they no longer had a working mobile phone (since we do not know how many had simply secured a new phone or number). After nine months, we had lost contact with 10 of the 14 participants who had been given a mobile phone in Hotel A. Nonetheless, we successfully reinterviewed four, of whom two were still using their hotel-issued phone (so demonstrating the ongoing utility of some of the phones distributed). Although engagement with ICTs was not the focus of our research, we generated a significant amount of data on the use of devices and technology by people who were homeless, including many who had uncertain immigration status and who would have otherwise been difficult to identify and interview. This has enabled us to generate insights that add to the existing literature. Moreover, by relating our analyses to broader theoretical approaches and by presenting a simple model of ICT engagement, we hope that our findings have transferability to other settings and might be of interest to others working in this field.

## Conclusions

---

As society becomes ever-more digitalised (a phenomenon accelerated by COVID-19), those who do not have access to ICTs will likely find themselves increasingly isolated, and without access to critical support networks (including health and social care, and other professional services) and opportunities for social participation (Sinclair and Bramley, 2011; Humphry, 2014; Park and Humphry, 2019; Polillo et al., 2021). Our data reveal the potential benefits of a policy initiative that included distributing free mobile phones to people experiencing more extreme forms of homelessness. These include opportunities for communicating with family, friends, and professionals; entertainment/alleviation of boredom; and completion of a wide range of essential life tasks and activities, such as study, job searching, and applying for benefits and housing. Nonetheless, we also found that providing a mobile phone in the absence of wider ICT infrastructure (including accessible WiFi, charging facilities, safe storage, and ICT training) limits any lasting benefits. Equally,



giving a phone to someone who is experiencing homelessness, but does not have other resources, such as supportive relationships and a stable and safe environment, will also weaken what can be achieved.

The phones provided within the Everyone In hotels were undoubtedly an important element in the success of the initiative (The Kerslake Commission, 2021). However, the devices themselves were not discreet interventions. Using the language of new materialism and actor network theory, mobile phones function as part of a wider dynamic ICT 'network' or 'assemblage' (including both the primary and secondary ICT resources we have identified). This helpfully reminds us that organisations can facilitate ICT engagement amongst people experiencing homelessness, even if they are not able to donate devices. For example, health centres, hospitals, libraries, transport hubs, shopping malls, and cafés can all contribute at little or no cost to themselves by providing free WiFi and access to charging points. Additionally, homelessness service providers, such as shelters and day centres, can offer lockers for storing devices; access to desktop, laptop, and tablet computers for activities that require larger screens and keyboards; and ICT training and support to those who want to learn more (Polillo et al., 2021). Lastly, and more ambitiously, innovative partnerships between those working in the homelessness sector and telecommunications companies can, and have already begun to, generate valuable hardware and infrastructure, including devices, data, and connectivity (Humphry, 2019; Polillo et al., 2021; Tesco Mobile, 2021).

## Acknowledgements

---

The authors would like to thank all the hotel residents (research participants) for sharing their experiences, and the various service providers for facilitating access to the hotel residents. We would also like to acknowledge other team members for conducting some of the qualitative interviews and/or otherwise supporting the research (Eileen Brobbin, Sam Craft, Colin Drummond, Georges-Jacques Dwyer, Emily Finch, James Gunn, Juliet Henderson, Mike Kelleher, Rebecca McDonald, Polly Radcliffe, Richard Turner). Joanne Neale and Stephen Parkin are part-funded by, and John Strang is supported by, the National Institute for Health Research (NIHR) Biomedical Research Centre for Mental Health at South London and Maudsley NHS Foundation Trust and King's College London. John Strang is also an NIHR Senior Investigator. Joanne Neale, Stephen Parkin and John Strang acknowledge the Pilgrim Trust for supporting their involvement in the research. The views expressed are those of the authors and not necessarily those of the NHS, the NIHR, the Department of Health, or the Pilgrim Trust.

## ► References

- Beijer, U., Wolf, A., and Fazel, S. (2012) Prevalence of Tuberculosis, Hepatitis C Virus, and HIV in Homeless People: A Systematic Review and Meta-Analysis, *The Lancet Infectious Diseases* 12(11) pp.859-870.
- Bernard, C. (2020) *COVID-19 (Coronavirus) Outbreak, Homeless Link*. Available at: <https://www.homeless.org.uk/connect/blogs/2020/mar/05/covid-19-coronavirus-outbreak>
- Bourdieu, P. (1977) *Outline of a Theory of Practice* (Cambridge: Cambridge University Press).
- Bourdieu, P. (1985) The Social Space and the Genesis of Groups, *Theory and Society* 12(6) pp.723-744.
- Bourdieu, P. (1986) The Forms of Capital, in: J.G. Richardson (Ed.) *Handbook of Theory and Research for the Sociology of Education*, pp.241-258. (New York: Greenwood Press).
- Braidotti, R. (2013) *The Posthuman* (Cambridge: Polity).
- Burda, C., Haack, M., Duarte, A., and Alemi, F. (2012) Medication Adherence Among Homeless Patients: A Pilot Study of Cell Phone Effectiveness, *Journal of the American Academy of Nurse Practitioners* 12(11) pp.675-681.
- Busch-Geertsema, V., Culhane, D., and Fitzpatrick, S. (2016) Developing a Global Framework for Conceptualising and Measuring Homelessness, *Habitat International* 55 pp.124-132.
- Calvo, F. and Carbonell, X. (2019) Is Facebook Use Healthy for Individuals Experiencing Homelessness? A Scoping Review on Social Networking and Living in the Street, *Journal of Mental Health* 28(5) pp.505-519.
- Calvo, F., Carbonell, X., and Johnsen, S. (2019) Information and Communication Technologies, E-Health and Homelessness: A Bibliometric Review, *Cogent Psychology* 6(1).
- Cambridge Advanced Learner's Dictionary and Thesaurus (2021) (Cambridge: Cambridge University Press).
- Coleman J. (1988) Social Capital in the Creation of Human Capital, *American Journal of Sociology* 94 pp.S95-S120.
- Coole, D.H. and Frost, S. (2010) Introducing the New Materialisms, in: D.H. Coole and S. Frost (Eds.), *New Materialisms. Ontology, Agency, and Politics*, pp.1-43. (London: Duke University Press).

Crisis (2020) *Government Response to Homelessness and COVID-19*. Available at: [https://www.crisis.org.uk/media/241941/crisis\\_covid-19\\_briefing\\_2020.pdf](https://www.crisis.org.uk/media/241941/crisis_covid-19_briefing_2020.pdf)

Czaja, I. and Urbaniec, M. (2019) Digital Exclusion in the Labour Market in European Countries: Causes and Consequences, *European Journal of Sustainable Development* 8(5) pp.324-336.

Doctors of the World (2020) *A Rapid Needs Assessment of Excluded People in England During the 2020 COVID-19 Pandemic*. Available at: <https://www.doctorsoftheworld.org.uk/wp-content/uploads/2020/06/covid-full-rna-report.pdf>.

Dorney-Smith, S. and Gill, N. (2017) Improving Digital Health Access for Excluded Groups, *Comment, British Journal of Healthcare Management* 23(8) pp.354-356.

Dutton, W.H., Blank, G., and Groselj, D. (2013) *Cultures of the Internet: The Internet in Britain. Oxford Internet Survey 2013* (Oxford: Oxford Internet Institute, University of Oxford).

Fazel, S., Geddes, J.R., and Kushel, M. (2014) The Health of Homeless People in High-Income Countries: Descriptive Epidemiology, Health Consequences, and Clinical and Policy Recommendations, *The Lancet* 384(9953) pp.1529-1540.

Fox, N.J. (2016) Health Sociology from Post-Structuralism to the New Materialisms, *Health* 20(1) pp.62-78.

Gale, N.K., Heath, G., Cameron, E., Rashid, S., and Redwood, S. (2013) Using the Framework Method for the Analysis of Qualitative Data in Multi-Disciplinary Health Research, *BMC Medical Research Methodology* 13(117).

Gilbert, M., Masucci, M., Homko, C., and Bove, A. (2008) Theorizing the Digital Divide: Information and Communication Technology Use Frameworks Among Poor Women Using a Telemedicine System, *Geoforum* 39(2) pp.912-925.

Gonzales, A. (2016) The Contemporary US Digital Divide: From Initial Access to Technology Maintenance, *Information, Communication and Society* 19(2) pp.234-248.

Good Things Foundation and Homeless Link (2021) *Doing Digital: How It Can Help Improve Wellbeing in the Homelessness Sector* (Sheffield: Good Things Foundation).

Gordon, E.J. (2000) When Oral Consent Will Do, *Field Methods* 12(3) pp.235-238.

Halford, S. and Savage, M. (2010) Reconceptualizing Digital Social Inequality, *Information, Communication & Society* 13(7) pp.937-955.

Haraway, D. (1991) *Cyborgs, Simians and Women* (London: Free Association Books).

Humphry, J. (2014) The Importance of Circumstance: Digital Access and Affordability for People Experiencing Homelessness, *Journal of Telecommunications and the Digital Economy* 2(3) pp.55.1-55.15.

Humphry, J. (2019) 'Digital First': Homelessness and Data Use in an Online Service Environment, *Communication Research and Practice* 5(2) pp.172-187.

Latour, B. (1991) Technology is Society Made Durable, in: J. Law (Ed.) *A Sociology of Monsters: Essays on Power, Technology and Domination*, pp.103-131. (London: Routledge).

Lawson-Mack, R. (2001) *The Digital Divide: Standing at the Intersection of Race and Technology* (Durham, NC: Carolina Academic Press).

MHCLG (Ministry of Housing, Communities and Local Government) (2021) *Rough Sleeping Snapshot in England: Autumn, 2020. Official Statistics*. Available at: <https://www.gov.uk/government/statistics/rough-sleeping-snapshot-in-england-autumn-2020/rough-sleeping-snapshot-in-england-autumn-2020>).

Moczygemba, L., Thurman, W., Tormey, K., Hudzik, A., Welton-Arndt, L., and Kim, E. (2021) GPS Mobile Health Intervention Among People Experiencing Homelessness: Pre-Post Study, *JMIR Mhealth and Uhealth* 9(11).

Montgomery, C., Parkin, S., Chisholm, A., and Locock, L. (2020) 'Team Capital' in Quality Improvement Teams: Findings from an Ethnographic Study of Front-line Quality Improvement in the NHS, *BMJ Open Quality* 9 p.e000948.

Neale, J. (1997) Homelessness and Theory Reconsidered, *Housing Studies* 12(1) pp.47-61.

Neale, J. and Stevenson, C. (2014) Homeless Drug Users and Information Technology: A Qualitative Study with Potential Implications for Recovery from Drug Dependence, *Substance Use and Misuse* 49(11) pp.1465-1472.

Neale, J. and Brown, C. (2016) We Are Always in Some Form of Contact: Friendships Amongst Homeless Drug and Alcohol Users Living in Hostels, *Health and Social Care in the Community* 24(5) pp.557-566.

Neale, J. (2016) Iterative Categorisation (IC): A Systematic Technique for Analysing Qualitative Data, *Addiction* 111(6) pp.1096-1106.

Neale, J. (2020) Iterative Categorisation (part 2): Interpreting Qualitative Data, *Addiction* 116(3) pp.668-676.

Neale, J., Brobbin, E., Bowen, A., Craft, S., Drummond, C., Dwyer, G.-J., Finch, E., Henderson, J., Hermann, L., Kelleher, M., Kuester, L., McDonald, R., Parkin, S., Radcliffe, P., Roberts, E., Robson, D., Strang, J., Turner, R., and Metrebian, N. (2020) Experiences of Being Housed in a London Hotel as Part of the 'Everyone In' Initiative. Part 1: Life in the Hotel (London: National Addiction Centre, King's College London).

Neale, J., Brobbin, E., Bowen, A., Craft, S., Drummond, C., Dwyer, G.-J., Finch, E., Henderson, J., Hermann, L., Kelleher, M., Kuester, L., McDonald, R., Parkin, S., Radcliffe, P., Roberts, E., Robson, D., Strang, J., Turner, R. and Metrebian, N. (2021) *Experiences of Being Housed in a London Hotel as Part of the 'Everyone In' Initiative. Part 2: Life in the Month After Leaving the Hotel* (London: National Addiction Centre, King's College London).

OECD (2000) *Learning to Bridge the Digital Divide* (Paris: Schooling for Tomorrow, OECD Publishing).

Park, S. and Humphry, J. (2019) Exclusion by Design: Intersections of Social, Digital and Data Exclusion, Information, *Communication & Society* 22(7) pp.934-953.

Parkin, S. and Neale, J. (on behalf of the study team) (2021) *Experiences of Being Housed in a London Hotel as Part of the 'Everyone In' Initiative. PART 3: Life, Nine Months, after Leaving the Hotel* (London: National Addiction Centre, King's College London).

Parkin, S. (2013) *Habitus and Drug Using Environments: Health, Place and Lived Experience* (Farnham: Ashgate Publications Ltd).

Parkin, S., Neale, J., Roberts, E., Brobbin, E., Bowen, A., Hermann, L., Dwyer, G., Turner, R., Henderson, J., Kuester, L., McDonald, R., Radcliffe, P., Craft, S., Robson, D., Strang, J., and Metrebian, N. (2021) Conducting Rapid Qualitative Research Amongst People with Experience of Rough Sleeping in London During the COVID-19 Pandemic, *Research Methods in Medicine and Health Sciences* 2(4) pp.124-139.

Phipps, L. (2000) New Communications Technologies: A Conduit For Social Exclusion, Information, *Communication & Society* 3(1) pp.39-68.

Polillo, A., Gran-Ruaz, S., Sylvestre, J., and Kerman, N. (2021) The Use of Ehealth Interventions Among Persons Experiencing Homelessness: A Systematic Review, *Digital Health* 7.

Putnam, R.D. (1995) Bowling Alone: America's Declining Social Capital, *Journal of Democracy* 6(1) pp.65-78.

Rhoades, H., Wenzel, S., Rice, E., Winetrobe, H., and Henwood, B. (2017) No Digital Divide? Technology Use Among Homeless Adults, *Journal of Social Distress and the Homeless* 26(1) pp.73-77.

Rice, E., Milburn, N.G., and Monro, W. (2011) Social Networking Technology, Social Network Composition, and Reductions in Substance Use Among Homeless Adolescents, *Prevention Science* 12(1) pp.80-88.

Rice, E., Ray, D., and Kurzban, S. (2012) Homeless but Connected: The Role of Heterogeneous Social Network Ties and Social Networking Technology in the Mental Health Outcomes of Street-Living Youth, *Community Mental Health Journal* 48(6) pp.1-12.

Ritchie, J. and Lewis, J. (2003) *Qualitative Research Practice: A Guide for Social Science Students and Researchers* (London: Sage).

Robinson, J., DiMaggio, P., and Hargittai, E. (2003) New Social Survey Perspectives on the Digital Divide, *IT & Society* 1(5) pp.1-22.

Rokach, A. (2005) Private Lives in Public Places: Loneliness of the Homeless, *Social Indicators Research* 72 pp.99-114.

Sanders, R. (2020) *Digital Inclusion, Exclusion and Participation* (Glasgow: The Institute for Research and Innovation in Social Services; IRISS).

Selwyn, N. (2004) Reconsidering Political and Popular Understandings of the Digital Divide, *New Media & Society* 6(3) pp.341-362.

Shelter (2019) *280,000 People in England Are Homeless, With Thousands More at Risk*. Press release. Available at: [https://england.shelter.org.uk/media/press\\_release/280,000\\_people\\_in\\_england\\_are\\_homeless,\\_with\\_thousands\\_more\\_at\\_risk](https://england.shelter.org.uk/media/press_release/280,000_people_in_england_are_homeless,_with_thousands_more_at_risk)

Shinn, M., Gibbons-Benton, J., and Brown, S.R. (2015) Poverty, Homelessness, and Family Break-Up, *Child Welfare* 94(1) pp.105-122.

Sinclair, S. and Bramley, G. (2011) Beyond Virtual Inclusion – Communications Inclusion and Digital Divisions, *Social Policy and Society* 10(1) pp.1-11.

St Mungo's (2021) *Housing and Health. Working Together to Respond to Rough Sleeping During Covid-19*. Available at: <https://www.mungos.org/publication/housing-and-health-working-together-to-respond-to-rough-sleeping-during-covid-19/>

Tesco Mobile (2021) *Tesco Mobile Reconnects*. Available at: <https://www.tescomobile.com/why-tesco-mobile/on-your-side/reconnects>

The Kerslake Commission (2021) *The Kerslake Commission on Homelessness and Rough Sleeping. A New Way of Working: Ending Rough Sleeping Together. Final Report*. Available at: <https://www.commissiononroughsleeping.org/>

US Centers for Disease Control and Prevention (CDC) (2020) *Interim Guidance: People Experiencing Homelessness and COVID-19*. Available at: <https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/unsheltered-homelessness.html>).

WHO (World Health Organisation) (2020a) *WHO Announces COVID-19 Outbreak a Pandemic*. Available at: <https://www.euro.who.int/en/health-topics/health-emergencies/coronavirus-covid-19/news/news/2020/3/who-announces-covid-19-outbreak-a-pandemic>

WHO (World Health Organisation) (2020b) *Vulnerable Populations during COVID-19 Response. People Experiencing Homelessness during the COVID-19 Response in the WHO European Region. Factsheet*. Available at: WHO/Europe | Fact sheet – Vulnerable populations during COVID-19 response – Addressing the mental health needs of vulnerable populations (May 2020).

Yost, M. (2012) The Invisible Become Visible: An Analysis of How People Experiencing Homelessness Use Social Media, *The Elon Journal of Undergraduate Research in Communications* 3(2) pp.21-30.





---

# Why Street Homelessness Has Decreased in Japan: A Comparison of Public Assistance in Japan and the US

---

Hiroshi Goto, Dennis P. Culhane and Matthew D. Marr

Rikkyo University, Japan

University of Pennsylvania, USA

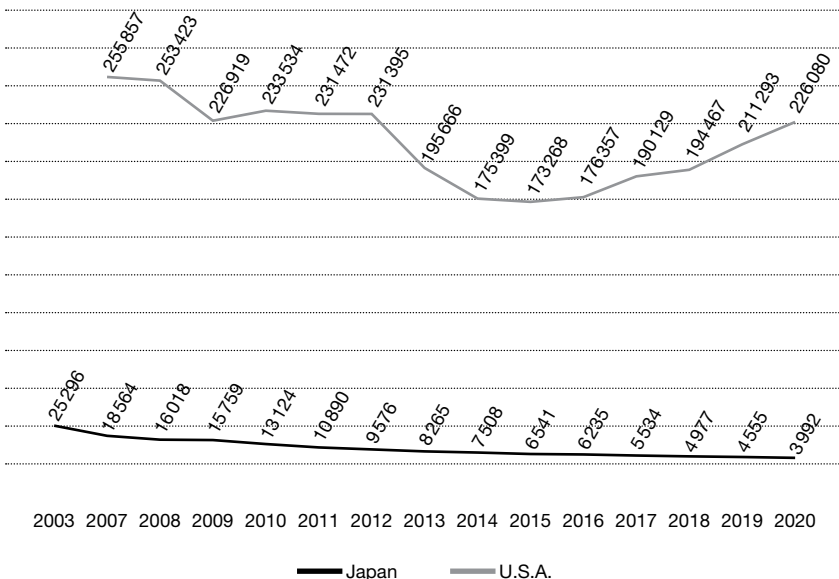
Florida International University, USA

- **Abstract\_** *The number of people officially enumerated as living on the streets in Japan has been consistently decreasing since 2003. As of January 2020, there were 3992 unsheltered people counted on a single night, which is about 16% of the peak in 2003. In contrast, in the US 226 080 people were counted as 'unsheltered' on a single night in 2020 and this number has been consistently increasing since 2015. This paper will focus on one cause of this difference, the respective public assistance systems in the US and Japan. The main public assistance system in Japan, Seikatsu-Hogo (Livelihood Protection) is argued to be a major factor driving the decline in the number of people living unsheltered there. But the characteristics of the Livelihood Protection programme that have contributed to this decline in street homelessness have not been examined in detail. We argue that three characteristics of Japan's public assistance programme are at the core of its success in addressing street homelessness 1) generality, 2) comprehensiveness, and 3) expeditiousness. We also provide an overview of some important shortcomings of the programme. Clarifying how Japan has been able to reduce street homelessness provides insights for measures to address street homelessness in the US and other countries.*
- **Keywords\_** *Homelessness, International comparison, Public assistance, Supplemental Security Income (SSI), Seikatsu-Hogo (Public assistance in Japan)*

### Background and Purpose of This Study

Addressing homelessness has become a common and difficult challenge for countries around the world. For instance, in the United States (US) around 580 000 people were counted as experiencing homelessness on a single night in January, 2020. Of these, around 226 000 people were unsheltered and this number has been consistently increasing since 2015. According to the latest statistics, the total number of people experiencing homelessness increased by 2% between 2019 and 2020, while the rate of homelessness (measured as the share of people experiencing homelessness as a percent of the total population) increased by 4% over this period (OECD, 2021). In contrast, in Japan, since the enactment of the “Act on Special Measures concerning Assistance in Self-Support of Homeless” in 2002, and the beginning of a nationwide survey of homelessness, the number of people living on the streets has been consistently decreasing. As of January 2020, there were 3992 people experiencing unsheltered homelessness, which is about 16% of the peak in 2003. Figure 1 shows trends in the number of people living on the streets in both countries.

**Figure 1: Comparison of the number of people experiencing street-level homelessness in Japan and the United States (The US Department of Housing and Urban Development (HUD) (2021) / Kousei Rōdō Sho (Japan’s Ministry of Health, Labor, and Welfare (2013-2020)).**



If the reduction in the number of people experiencing unsheltered homelessness is to be taken as an indicator for evaluating policies addressing homelessness, Japan can be seen as a success story, whereas the US, which made significant gains from 2007-2015, has experienced a reversal of its success.

There are various factors behind the increase and decrease in both countries in the number of people who experience homelessness, including the roles of private support (family), labour market trends, the amount of affordable housing, and the existence of support groups such as NGOs. This paper will focus on one factor, the public assistance system. Reforms to the main public assistance system in Japan, “Seikatsu-Hogo” (Livelihood Protection), have been argued to be behind the decline in the number of people experiencing street homelessness there (Yamada, 2009). However, which characteristics of Japan’s public assistance have contributed to the decline have not been examined in detail.

The purpose of this paper is to discuss what features of Japan’s public assistance system have contributed to the decline in street homelessness, comparing it to the public assistance system in the US, where the number of people experiencing homelessness, especially street homelessness, is increasing. Clarifying how Japan has been able to reduce homelessness could provide suggestions for homelessness measures in the US and other countries.

As a side note, in the US, the situations of people experiencing homelessness and the content and operation of support systems differ from state to state. The number of people experiencing street homelessness in Japan also varies from region to region, and as we will discuss later, the amount of public assistance provided also varies from region to region. Therefore, in this paper, taking into account the size of the population, the number of people experiencing homelessness, and the size of the city, a comparison will be made between Los Angeles, which has been called the “homeless capital of the US” (Dozier 2022: 2), and Tokyo (23 wards), which has the largest number of people experiencing unsheltered homelessness in Japan.

## **Why Focus on Street-Level Homelessness? An Overview of Homelessness in Los Angeles and Tokyo**

---

As mentioned in the previous section, we focus our analysis on the decline in street-level homelessness, rather than on all people experiencing homelessness more broadly defined. The reason for this is that the way homelessness is defined under Japanese law is limited to street-level homelessness.

The act passed in 2002 in Japan defines homelessness as follows. “The homeless are those who reside in facilities such as urban parks, riverbanks, roads and railway stations for no valid reason and conduct their daily lives there.”

Applying this definition to ETHOS (European Typology of Homelessness and housing exclusion), which is often referred to when discussing topics related to homelessness and includes four conceptual categories (Roofless, Houseless, Insecure, and Inadequate), Japan’s definition falls into the “Roofless” category. This is operationally defined as “people living rough”.

From this perspective, it is clear that the definition of homelessness in Japan is narrow.<sup>1</sup> In this sense, the decrease in street-level homelessness in Japan does not, of course, directly imply a decrease in the overall number of people experiencing homelessness. In fact, a recent survey of 50 000 people over the age of 18 living in the 10 prefectures with the highest number of people experiencing street-level homelessness in Japan found that as many as 6% experienced street-level homelessness, “houselessness,” or “insecurity” as defined by the ETHOS conceptual categories (Zenkoku Hōmuresu Shien Network, 2020). Therefore, it is also necessary for Japan to expand the perception and legal definition of homelessness to match the actual situation, and then to consider how to deal with the problem. However, given that data available since Japan’s homelessness measures are limited to street-level homelessness, and given that the US is struggling to reduce street-level homelessness, the analysis here will consider a reduction in street-level homelessness as one tentative outcome of homelessness measures.

Figure 2 shows the overview of homelessness in Los Angeles (County) and 23 wards of Tokyo. Similar to the national level comparison seen in Figure 1, Los Angeles is on the rise, while Tokyo is on the decline.

---

<sup>1</sup> The same point is made in the discussion by Iwata (2021a) and Kakita (2020). Iwata points out the following. “It is important to examine why Japan’s homelessness policy has focused only on people sleeping rough and has proposed individual’s independence through employment as a solution, rather than conceptualizing homelessness from the structural perspective of ‘secure and adequate housing’ being threatened.”

**Figure 2: The number of People Experiencing Unsheltered Homelessness in Los Angeles County and the 23 wards of Tokyo (2016-2020) (Los Angeles Homeless Services Authority Homepage / Kousei Rōdō Sho (Japan’s Ministry of Health, Labor, and Welfare (2013-2020)).**

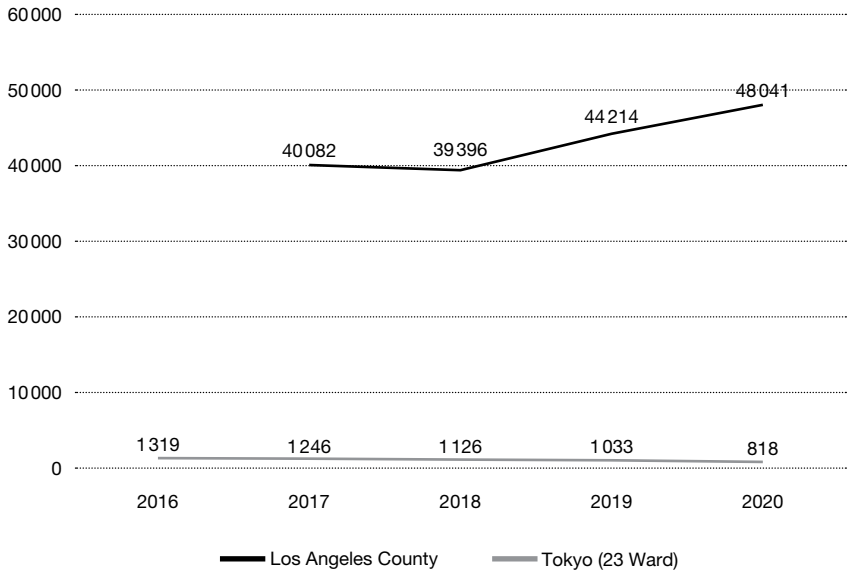


Table 1 shows the demographics of unsheltered homelessness in Los Angeles and Tokyo in 2020. Here, we focus on gender, age, length of homelessness, and health and disability status.

**Table 1. Demographics of Unsheltered Homelessness in Los Angeles County and the 23 wards of Tokyo (Los Angeles Homeless Services Authority Homepage / Kousei Rōdō Sho (Japan's Ministry of Health, Labor, and Welfare (2013-2020) / Tokyo-To Fukushi Hokenkyoku (Tokyo Metropolitan Bureau of Social Welfare and Public Health (2019)).**

	Los Angeles (County)	Tokyo (23 Wards)
People Experiencing Unsheltered Homelessness (2020)	48 041	818
Gender (2020)		
Male	72.3	96.5
Female	26.0	3.5
Gender Non-Binary	1.4	N/A
Transgender	0.3	N/A
Age (From here, Los Angeles [County] (2020) / Tokyo data from 2016, n=367)		
Under 18	3.6	N/A
18-24	5.2	N/A
25 and over	91.3	N/A
Under 40	N/A	1.4
40-49	N/A	10.4
50-59	N/A	28.7
60-69	N/A	41.3
70 and over	N/A	18.0
HOUSEHOLD COMPOSITION		
Individuals (those not in family units)	93.6	100.0
CHRONIC HOMELESSNESS		
Percentage of total unsheltered	47.5	87.3
HEALTH & DISABILITY		
Substance Use Disorder	31.0	N/A
HIV/AIDS	1.9	N/A
Serious Mental Illness	25.3	N/A

In terms of gender, in Los Angeles, around 70% of the population experiencing unsheltered homelessness is male and 26% female, while in Tokyo, 95% of the population is male (in Japan, the survey was conducted visually and data on non-binary gender were not collected). As for age, in Los Angeles, the age categories published at the county level are very large and difficult to compare, so we also look at data from the City of Los Angeles (Table 2).

**Table 2. Age of People Experiencing Unsheltered Homelessness in the City of Los Angeles, 2020. (n=28 852)**

Under 18	2.9
18-24	5.6
25-54	63.6
55-61	16.8
62 and over	10.9

In Los Angeles, the majority of the population is in the adolescent to middle-aged age groups. In Japan, however, the proportion of elderly people aged 60 and above is high at just under 60% of the total. The percentage of people who have experienced homelessness for more than one year is around 50% in Los Angeles, but around 90% in Japan, indicating that the situation in Japan is more serious in terms of prolonged homelessness. In terms of health status and disability, the percentage of Los Angeles' population experiencing unsheltered homelessness with substance use disorders and serious mental illnesses is around 30% each (with some overlap). We do not have similar data from Japan. However, according to a survey conducted in one of Tokyo's 23 wards, 50 out of 80 people living on the streets were reported to have some symptoms of mental illness (Morikawa et al., 2011). In that sense, it is expected that there is a large percentage of people experiencing unsheltered homelessness that have symptoms of mental illness in Japan. However, these data were collected through a questionnaire called the Mini-International Neuropsychiatric Interview (MINI), which was developed to screen for psychiatric disorders broadly. In our interview and ethnographic research on homelessness in both countries, fewer people have reported or displayed symptoms of severe mental illness in Japan. This is likely due to much higher rates of institutionalisation for severe mental illness in Japan (Marr, 2015).

## **An Overview of the US Public Assistance System: Why Focus on SSI?**

---

In the US, various cash benefits programmes are available to people experiencing poverty and homelessness, such as Temporary Assistance for Needy Families (TANF) and Supplemental Security Income (SSI). Also, some states have General Assistance or General Relief (GA or GR), a modest cash assistance programme for nonworking adults who are not otherwise receiving SSI. The names of these programmes vary from state to state.

About 37% of people experiencing homelessness in the US have serious physical or mental health problems (HUD, 2010). As shown in Table 1, the percentage of people with serious mental disorders among the unsheltered in Los Angeles is 25.8%. In addition, among people experiencing homelessness in Los Angeles, including those on the streets, the number of people over the age of 65 is expected to increase 2.5 times between 2017 and 2030 (Culhane et al., 2019).

Among the cash benefits mentioned above, those eligible for SSI are the elderly aged 65 and above and those with disabilities as defined by the Social Security Administration (SSA). In addition, as will be explained later, the benefit level (approximately \$1 000 per month in California) is considerably higher than the level

of GR provided in Los Angeles (\$221 per month). In that sense, it can be said that SSI is one of the most important programmes to help people get off from street in the US. TANF (or “CalWORKs” in California) is comparable to SSI in terms of benefit levels, but this programme is designed for households with children and is only applicable to a small percentage of people experiencing unsheltered homelessness, which is mostly single-person households. In addition, SSI is administrated under the responsibility of the Federal Government. Noda (2007) has pointed out that this system is similar to that of Japan’s public assistance.

In the following section, we compare SSI with Japan’s public assistance programme, Seikatsu-Hogo (Livelihood Protection), and analyse which characteristics of the Japanese programme are likely to have been most effective in reducing unsheltered homelessness in Japan.

### **Comparison of SSI (Los Angeles) and Livelihood Protection (Japan)**

---

Table 3 shows a comparison between SSI in the US and “Seikatsu-Hogo” (Livelihood Protection) in Japan. The comparison here is made from three perspectives. The first is eligibility requirements, the second is benefit level and relationship with other systems, and the third is time for certification.



**Table 3 Comparison of SSI (US, Los Angeles) and Livelihood Protection (Japan, Tokyo)**

	SSI (US, Los Angeles)	Livelihood Protection (Seikatsu-Hogo) (Japan, Tokyo)
Eligibility requirements	Attribute	<ul style="list-style-type: none"> <li>• In poverty – below a particular income level (provided based on a requirement that a person who is living in poverty shall utilise his/her assets, abilities and every other thing available to him/her for maintaining a minimum standard of living.)</li> </ul>
	Assets	<ul style="list-style-type: none"> <li>• Be either a US citizen or national, or a qualified alien.</li> <li>• Reside in one of the 50 States, the District of Columbia, or the Northern Mariana Islands.</li> <li>• Not be absent from the US for a full calendar month or 30 or more consecutive days.</li> <li>• Age 65 or older or Blind/Disabled.</li> </ul>
	Exclusion	<ul style="list-style-type: none"> <li>• Has limited income.</li> <li>• Has limited resources.</li> </ul>
Benefit level and relationship with other systems	Benefit level (Los Angeles and Tokyo) (compared to the relative poverty rate level)	<ul style="list-style-type: none"> <li>• If the disability is based on alcoholism or drug addiction alone.</li> <li>• Any month in which you're in prison or jail, have an outstanding warrant for a violation of a parole or probation order, or are a fleeing felon.</li> <li>• After you are outside the country for more than 30 days</li> </ul>
	Provision for other needs (housing, medical and others)	<ul style="list-style-type: none"> <li>• \$ 954 for a disabled person 18 or over</li> <li>• 89% (Relative poverty level in the US In 2020 = less than \$12 760 per year)</li> </ul>
Time for certification	<ul style="list-style-type: none"> <li>• \$ 727 (single individual at Tokyo)</li> <li>• 75.7% (Japan's relative poverty level in 2018 = less than \$11 513 per year)</li> </ul>	<ul style="list-style-type: none"> <li>• SSI recipients automatically qualify for Medicaid. (Medicaid eligibility varies by state)</li> <li>• More than 60% of SSI recipients receive SNAP (food stamps) and about a quarter receive housing assistance</li> <li>• In some cases, people are receiving SSI while living on the streets.</li> </ul>
	<ul style="list-style-type: none"> <li>• Average 166 days (2016-2021) and complicated application process</li> </ul>	<ul style="list-style-type: none"> <li>• If necessary,</li> <li>• Housing assistance (upper limit: \$487 in Tokyo/single household)</li> <li>• Medical assistance</li> <li>• Other assistance</li> <li>• Housing is automatically provided (if someone who is unsheltered gets public assistance).</li> </ul>
		<ul style="list-style-type: none"> <li>• Within 14 days in principle and simple application process</li> </ul>

### ***Eligibility requirements***

As mentioned previously, the eligibility requirements for SSI are that the person must be 65 years old or older, or have a disability as defined by the SSA. If you are 65 years old or older, it is relatively easy to receive SSI because you are exempt from the certification of inability to work. This may be one of the reasons why until recently few people over the age of 65 lived on the streets in the US, a trend that is weakening due to increased housing costs. However, it has been pointed out that other eligibility requirements, like whether or not a person matches the SSA defini-

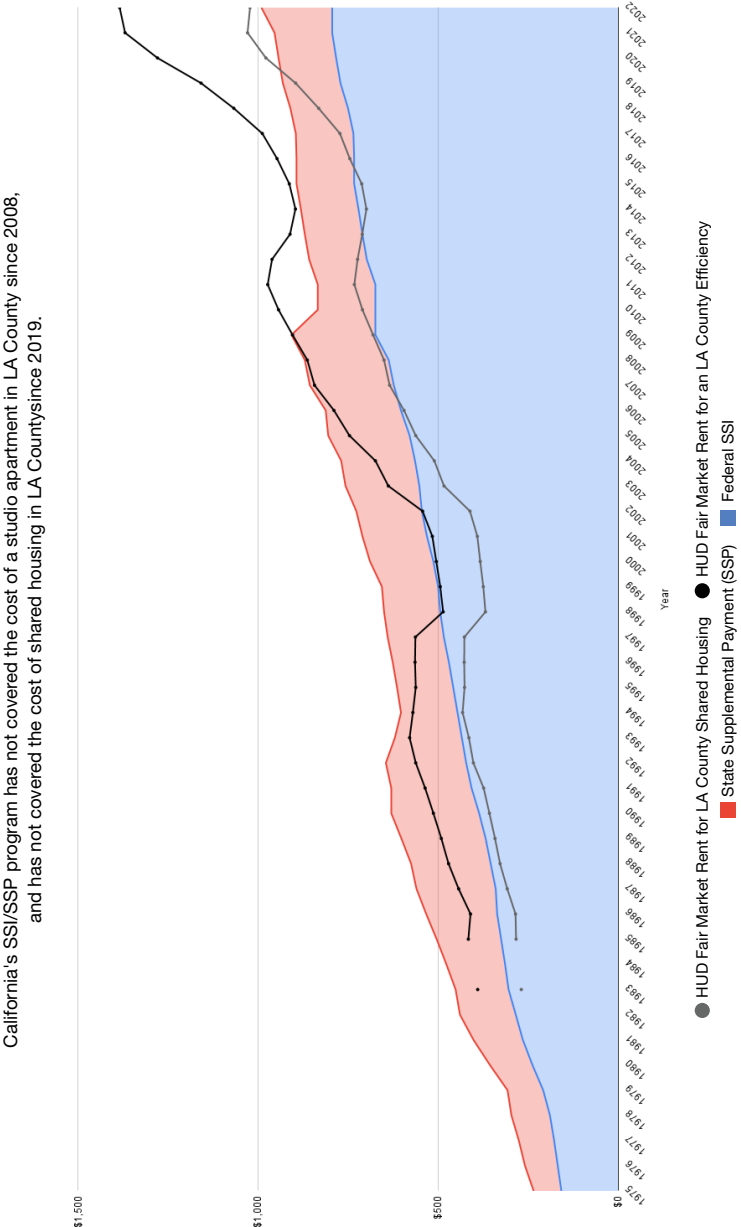
tion of disability, are becoming stricter every year (Erkulwater, 2006). According to Dennis et al. (2011), 32% of adult applicants overall between the ages of 18 and 65 were awarded benefits, while only 10-15% of adult applicants experiencing homelessness were awarded benefits. In addition, SSI has a provision that excludes benefits to those who do not comply with warrants for serious crimes and those who violate various conditions required by probation. In the US, and especially Los Angeles, there is a movement to criminalise homelessness, critiqued as a 'police first' approach (Marr et al., 2009). If this movement is thoroughly implemented, the number of people excluded from SSI may increase. The SSI system was also revised in 1997 to exclude people whose disability is based on alcohol or drug dependence, and this has resulted in the exclusion from SSI of a large number of people experiencing homelessness (GAO, 2000). Considering that 31% of the people experiencing unsheltered homelessness have substance use disorders, this requirement may result in a significant number of people with disabilities who are not eligible for SSI.

In contrast, Japan's public assistance has no requirements other than financial need (a 'general assistance principle'), and people of any age with or without disabilities are eligible to receive it. In addition, involvement in crimes such as those mentioned above does not result in exclusion (a 'non-discrimination principle'). According to previous studies, about 30-40% of adults experiencing homelessness in Japan have criminal records (Kakegawa, 2020).

### ***Benefit level***

In 2020, the prescriptive SSI benefit level for a person with a disability over the age of 18 in California was \$954/month. But this amount depends on household composition, type of disability, and so on. The maximum SNAP (food assistance) benefit for a single-person household, which 60% of SSI recipients are said to receive concurrently, is \$194/month. If we look at the relationship between SSI and the US relative poverty standard for 2020 (half of the median disposable income), SSI alone in California covers about 89%, and if we add SNAP, the figure would be about 107%. This means that it is possible to get an amount above the official US poverty line. However, the national poverty threshold does not adjust for regional cost of living differences, and California in particular has experienced significant housing costs increases. As shown in Figure 3, SSI payments (combined state and federal shares) have been losing ground to housing price increases, and indeed have fallen below the fair market rent for an efficiency apartment in LA since 2015, when unsheltered homelessness also began to rise. This indicates that, because of the decline of affordable housing, even people who receive SSI are often unable to get out of homelessness.

**Figure 3 California's SSI/SSP programme has not covered the cost of a studio apartment in LA County since 2008 and has not covered the cost of shared housing in LA County (United Way of Greater Los Angeles, Home for Good Initiative. The Older Adult Strategy: A Roadmap of Strategic System Investments to End Homelessness Among Older Adults in Los Angeles, September 2021).**



Source: United Way of Greater Los Angeles, Home For Good Initiative. The Older Adult Strategy. A Roadmap of Strategic System Investments to End Homelessness Among Older Adults in Los Angeles, September 2021

In Japan, public assistance provides \$727 in cash benefits for a single person (assuming the age of 40-59) in a high-cost city (like Tokyo). So, public assistance alone covers about 75% of the relative poverty line. However, public assistance in Japan includes eight forms of assistance, including housing and health care. We refer to this as a 'package system'. If you need to pay for housing, in addition to living expenses, it will be provided from within the same welfare system. When a person experiencing street homelessness receives welfare, housing costs or facilities are automatically provided. If we add housing assistance to the cash benefit (with an upper limit of \$487), which is almost automatically granted to unsheltered people who receive public assistance, the benefit level is 126% of the relative poverty line. This high level of benefits was noted in a study that showed that Japan had the smallest difference between the minimum wage (full-time work) and the total amount of social assistance plus housing assistance in OECD countries (Yamada and Komamura 2018). Japanese public assistance's inclusion of housing assistance closes a major part of that gap. In contrast, in the US, while SSI comes with guaranteed health insurance (Medicaid), it does not come with housing assistance. Only about 25% of SSI recipients receive housing assistance (in the US housing assistance is not an entitlement), which is administered by a separate federal agency under a separate application and eligibility process (US HUD 2021).

### *Time for certification*

According to data published by the SSA, the average number of days from the time of application for SSI to the time it is adjudicated is 166 days (average for 2016-2021). As mentioned earlier, SSI's accreditation rate is not high, but even if an applicant is not accredited, they can reapply within 60 days. However, the average number of days it takes to adjudicate that reapplication is also 103 days (average for 2018). According to interviews with people experiencing homelessness and their advocates, people often have difficulties applying for SSI and some may be incarcerated for minor offenses during the application process. The lack of immediate access to psychiatric care after release from prison, which is necessary to prove disability, has also been pointed out as a problem. Also, for people on the street, especially those with severe mental health issues, it is difficult to attend meetings and keep documents, a situation that is likely worsening with increased sweeps of tents and encampments in US cities. These difficulties contribute to rejections of applications and a longer time to get approved for SSI benefits.

It has also been pointed out that people who are homeless often use drugs and alcohol to cope with their situations (National Coalition for the Homeless 2009). As mentioned earlier, SSI can be denied if the disability can be attributed to alcohol or

drug dependence. Thus, a prolonged period for SSI adjudication due to homelessness can be argued as increasing the risk of SSI denial due to an increased risk of substance use.

Japan's public assistance on the other hand is basically ruled upon within 14 days, with a maximum of 30 days. Also, since the only requirement for receiving welfare is financial, very few cases are not approved if the applicant is living on the streets and is willing to move into shelter or housing introduced by the welfare office. For example, according to statistics from the Shinjuku City Welfare Office (2020), which has the largest number of people experiencing unsheltered homelessness in Tokyo, all 924 applications for public assistance submitted by people staying on the streets were approved. Of these applicants, 829 people moved into Single Room Occupancy (SRO) units, 33 to welfare facilities (shelters), and 62 to hospitals.

## **Discussion – Three Characteristics of Welfare in the Context of Declining Street-Level Homelessness in Japan**

---

Based on the above comparison, the characteristics of Japanese public assistance that contribute to a reduction in street homelessness can be summarised in three key words: 1. Generality, 2. Comprehensiveness, and 3. Expeditiousness.

### ***Generality***

'Generality' refers to the fact that Japan's public assistance is targeted at a single, broad, and inclusive category of the needy, rather than by multiple, narrow, and exclusionary categories as in the US. To put it succinctly, the system is designed so that anyone in need can use it. Needless to say, the concept of homelessness refers to a condition. As we saw in Table 3, those experiencing homelessness are a diverse group of people, and if the system is designed according to categories, as is the case with public assistance in the US, some people will be left behind because of the need to match these requirements in order to be able to access the system. Therefore, to reduce street-level homelessness, it would be preferable to design a system without limiting the categories (according to the 'general assistance principle') as in Japan.

### ***Comprehensiveness***

The 'comprehensiveness' of Japan's welfare system means that it combines various types of assistance that can address multiple aspects of poverty in addition to living expenses. As mentioned above, Japanese welfare is a combination of cash benefits from livelihood assistance and, if necessary, housing and health care. Therefore, if someone living on the streets receives public assistance, housing assistance is also

automatically provided. When considered in the context of reduced homelessness in Japan, the inclusion of a housing assistance mechanism in the public assistance system is extremely significant.

### ***Expeditiousness***

'Expeditiousness', as the name implies, means that the time from application to adjudication is extremely short compared to SSI in the US. This reduces the possibility of prolonged homelessness, as well as the associated deterioration of physical and mental health, and police citations, arrests, and incarcerations.

### ***Which factor has been most important in driving the decline?***

The three features of Japan's welfare system that we have described above were built into the system from the time it was established in 1950. In spite of this, street-level homelessness rose dramatically in Japan during the 1990s. This is because the generality of the system was not properly applied in operation. During the recession at this time, middle-aged and older unemployed men at risk of homelessness, many of them day labourers, were effectively excluded from the welfare system through street-level bureaucracy (Lipsky, 2010). Unemployed, able-bodied men of working age seeking aid at welfare offices were generally told by staff to look for work, or that they needed an address for benefits, going against the spirit of the law that created the programme. Many of these men internalised the sentiment that they were not eligible because they were physically able to work and refrained from pursuing benefits.

From the perspective of contributing to the reduction of homelessness at the street level, it is important to note that generality has changed significantly at the operational level since this time. In response to the increase in the number of people experiencing homelessness and groups advocating on their behalf in the early 2000s, the application of public assistance to working-age people was gradually liberalised at the operational level. Furthermore, the Lehman shock in 2008 (the 'Great Recession') increased public concern for contract workers who would become suddenly unemployed, triggering an extensive review and reform of the operation of public assistance. This has made it possible for people of working age to receive the benefit more readily.

From this perspective, of the three characteristics mentioned above, generality seems to be the one that has contributed the most to the reduction of street-level homelessness in Japan. Implementing generality enabled the other two components of Japan's system to have positive impacts on a broader population. Considering the comparison with the US, it seems that generality is the key to expand eligibility to include most people who are experiencing homelessness; that expeditiousness makes it possible to access the benefit quickly; and comprehen-

siveness enables people who are experiencing homelessness to get access to necessary housing assistance. Together these appear to be the necessary and sequential elements of the public assistance system in Japan that has reduced street homelessness there.<sup>2</sup>

## Lessons and Remaining Issues

---

The three working components of Japan's "Livelihood Protection" public assistance system suggest specific ideas for reforming SSI that could contribute to durable, long-term decreases in street homelessness in the US. First, the principle of generality suggests that SSI should be made to be needs-based and not based on categories like disabled and elderly. Basic income programmes are being implemented in US cities and could lay the groundwork for a more generally applied SSI benefit. Second, SSI should be made more comprehensive and inclusive of an adequate housing benefit that is useful in skyrocketing rental markets. This is especially important since an aging population in the US is becoming more vulnerable to homelessness due to the affordable housing crisis. Also, housing benefits as applied in supportive housing programmes have already demonstrated success in the US. Third, expeditiousness in processing applications and allocating benefits is necessary to avoid prolonging homelessness. There have already been hard-earned gains in reducing time to adjudication for SSI applications, but efforts need to be made to redouble them. All of these approaches would need substantial federal, state, and local investment. However, they would work in a complementary fashion, with generality reducing the complexity of proving eligibility, and expeditiousness increasing the effectiveness of comprehensive approaches including housing subsidies, for example.

This study discusses the decline in the number of people experiencing street homelessness, focusing on the Japanese public assistance system and how its features contribute to exits from street homelessness. However, it is also necessary to discuss the decline in the number of people who experience homelessness from a preventive perspective (i.e., whether the number of people who become newly homeless is increasing or decreasing). As we have discussed in this paper, the welfare system in Japan is a comprehensive system that combines various kinds of assistance. However, because it is allocated based on demonstrated need, it can only be used after income and assets are almost gone. In this sense, it is weak as a system to prevent people from becoming homeless. In recent years, from this perspective, some have advocated the 'dismantling' of the welfare system (Iwata,

---

<sup>2</sup> See Kitagawa (2021) for a more critical analysis of how punitive measures like evictions have worked alongside the public assistance system in the decline of street homelessness in Tokyo.

2021b). This approach proposes that the eight types of assistance included in Japan's welfare system be incorporated into a variety of existing social services to secure a minimum standard of living. From the perspective of preventing people from becoming homeless, such a shift would change our assessment of the features of the Japanese welfare system described in this paper.

Japan's welfare system has two other glaring issues that demand mention in the context of addressing homelessness. The first is stigma. In Japan, there is a strong stigma against receiving public assistance due to a high expectation for self-reliance, especially for people experiencing homelessness (Goto 2010). This is very important because when people apply for public assistance, their relatives (usually parents, siblings, and adult children, but also possibly including even cousins) are contacted to inquire about their support. As a result, the take-up rate of welfare in Japan is reported to be around 15-20%. Some people experiencing homelessness do not apply for welfare to avoid this aspect of the system (Inaba, 2021).

The second is about appropriate housing. Some of the shelters introduced by welfare offices upon application or operated by private organisations who bring unhoused people to offices for application are inadequate in terms of the living environment and the support provided. These shelters are sometimes mocked as the 'poverty industry.' The decline in street-level homelessness in Japan includes many cases of people receiving public assistance and transitioning to these facilities. If we apply this to the ETHOS context described in section 2, we could say that Japan has just moved people from Roofless ('People living rough') to Houseless ('People in accommodation for the homeless') or Inadequate ('People living in unfit housing') statuses. Thus, the decline in street homelessness in Japan that we have discussed does not mean a decline in the overall number of people experiencing homelessness defined more broadly. In this sense, the policy evaluation about a 'decline' in street-level homelessness described in this paper has possibly different connotations. A remaining challenge for researchers and practitioners in Japan is to examine and address these issues. Also, comparative research on public assistance systems outside of the US could further reveal characteristics of Japan's public assistance system associated with reduced street homelessness.

*This work was supported by Grant-in-Aid for Scientific Research, Fund for the Promotion of Joint International Research (Fostering Joint International Research (B)) Grant Number: 19KK0047 and Grant-in-Aid for Early-Career Scientists Grant Number: 19K13950.*



## ➤ References

Center on Budget and Policy Priorities homepage. Available at:

(<https://www.cbpp.org/research/social-security/supplemental-security-income>)

Culhane, D.P., et al. (2007) Testing a Typology of Family Homelessness Based on Patterns of Public Shelter Utilization in Four US Jurisdictions: Implications for Policy and Program Planning, *Housing Policy Debate* 18(1) pp.1-28.

Dennis, D., Lassiter, M., Connelly, W. H., & Lupfer, K. S. (2011) Helping Adults who are Homeless Gain Disability Benefits: The SSI/SSDI Outreach, Access, and Recovery (SOAR) Program, *Psychiatric Services* 62(11) pp.1373-1376.

Dennis P Culhane, Dan Treglia, Thomas Byrne, Stephen Metraux, Randall Kuhn, Kelly Doran, Eileen Johns, Maryanne Schretzman., (2019)The Emerging Crisis of Aged Homelessness: Could Housing Solutions Be Funded from Avoidance of Excess Shelter, Hospital and Nursing Home Costs? Available at: [https://works.bepress.com/dennis\\_culhane/223/](https://works.bepress.com/dennis_culhane/223/)

Dozier, D. (2022) Rethinking the Homeless Crisis: Black Spatial Visions for Los Angeles, *Antipode* 54(3) pp.752-771.

Erkulwater, J.L. (2006) *Disability Rights and the American Social Safety Net* (New York: Cornell University Press).

Government Accountability Office (GAO) (2000) HOMELESSNESS: Barriers to Using Mainstream Programs. <https://www.gao.gov/assets/rced-00-184.pdf>

Gotō, H. (2010) Daitoshi hōmuresu no jittai ni to shien kadai: seikatsu hogo seido wo chūshin to shite [Conditions and support issues for the homeless of major urban areas: A focus on the livelihood protection system], *Hinkon Kenkyū* 4 pp.108-17.

Inaba, T. (2021) Ankēto kara wakatta fuyō-syō-kai no kabe [Survey reveals “inquiry of support” as a barrier] Chingin to syakai hosyō

Iwata, M. (2021a) What is the Problem of Homelessness in Japan? Conceptualisation, Research, and Policy Response, *International Journal on Homelessness* 1(1) pp.98-124.

Iwata, M. (2021b) Seikatsu-hogo kaitai ron [The Theory of Dismantling of Public Assistance] Iwanami syoten.

Kakita, Y. (2020) Gurōbaru shiten wo majiete Nihon no hōmuresu • huantei kyojū wo torae naosu [Reexamining on homelessness and hosing exclusion in Japan through global perspective] Oosaka hoken izasshi

Takegawa, N. (2020) Hanzai kara no syakai fukki wo toinaosu [Rethinking Rehabilitation from Crimes] Jyun pō sya.

Kitagawa, Y. (2021) Homeless Policy as a Policy for Controlling Poverty in Tokyo: Considering the Relationship between Welfare Measures and Punitive Measures, *Critical Sociology* 47(1) pp.91-110.

Kousei rōdō sho (2013-2020) Hōmuresuno jittaini kansuru zenkoku chōsa houkokusho [Report on the National Survey on Homelessness].  
<https://www.mhlw.go.jp/toukei/list/63-15.html>

Lipsky, M. (2010) *Street-Level Bureaucracy: Dilemmas of the Individual in Public Services* (New York: Russell Sage Foundation).

Los Angeles Homeless Services Authority(LAHSa)homepage

<https://www.lahsa.org/data-refresh>

<https://www.lahsa.org/documents?id=3423-2019-greater-los-angeles-homeless-count-los-angeles-county.pdf>

<https://www.lahsa.org/documents?id=4680-2020-greater-los-angeles-homeless-count-city-of-los-angeles>

Marr, M.D. (2015) *Better Must Come: Exiting Homelessness in Two Global Cities* (New York: Cornell University Press).

Marr, M. D., DeVerteuil, G., & Snow, D. (2009) Towards a Contextual Approach to the Place–Homeless Survival Nexus: An Exploratory Case Study of Los Angeles County, *Cities* 26(6) pp.307-317.

Morikawa, S., Uehara, R., Okuda, K., Shimizu, H., Nakamura, K. (2011) Tokyo-to no 1chiku ni okeru hōmuresu no seishin shikkan yūbyō-ritsu [Prevalence of mental illness among the homeless in a district of Tokyo] Nihon Kōsyū Eisei Zasshi.

National Coalition for the Homeless (2009) Substance Abuse and Homelessness

Zenkoku Hōmuresu Shien Network [National Homeless Support Network]

(2020) Fuanteina kyozyū jyō-tai ni aru seikatsu konkyū-sya no haaku syuhō ni kansuru chō-sa houkoku syo [Report of Survey Research Work on Methods of Ascertaining the Lifestyle of the Needy in Unstable Living Conditions]

[http://www.homeless-net.org/docs/2020-03\\_homelessnet\\_mhlwreport.pdf](http://www.homeless-net.org/docs/2020-03_homelessnet_mhlwreport.pdf)

Noda, H. (2007) Amerika no hosokuteki hoshō shotoku (SSI) no tenkai [Development of Supplemental Security Income in the United States] Kaigai syakai hoshō kenkyū

OECD (2021) HC3.1. HOMELESS POPULATION. Available at:  
[https://webcache.googleusercontent.com/search?q=cache:PWPBmyBo0h8J:  
https://www.oecd.org/els/family/HC3-1-Homeless-population.pdf+&cd=2&  
hl=ja&ct=clnk&gl=jp](https://webcache.googleusercontent.com/search?q=cache:PWPBmyBo0h8J:https://www.oecd.org/els/family/HC3-1-Homeless-population.pdf+&cd=2&hl=ja&ct=clnk&gl=jp)

Shinjuku City Welfare Office (2020) Homepage. [https://www.city.shinjuku.lg.jp/  
fukushi/file04\\_01\\_00003.html](https://www.city.shinjuku.lg.jp/fukushi/file04_01_00003.html)

The National Survey of Homeless Assistance Providers and Clients (1999)  
HOMELESSNESS: Programs and the People They Serve.

The US Department of Housing and Urban Development (HUD) (2010) *Annual  
Homeless Assessment Report 2010*

The US Department of Housing and Urban Development (HUD) (2021) The 2020  
Annual Homeless Assessment Report (AHAR) to Congress. [https://www.huduser.gov/  
portal/sites/default/files/pdf/2020-AHAR-Part-1.pdf](https://www.huduser.gov/portal/sites/default/files/pdf/2020-AHAR-Part-1.pdf)

Tokyo to Fukushi Hokenkyoku(2019) *Hōmuresu no jiritsu no shien tou ni kansuru  
Tokyo-to jissai keikaku 4ed* [Tokyo Metropolitan Government Implementation Plan  
for Self-Support of the Homeless (4th)]. [https://www.metro.tokyo.lg.jp/tosei/  
hodohappyo/press/2019/03/29/24.html](https://www.metro.tokyo.lg.jp/tosei/hodohappyo/press/2019/03/29/24.html)

Yamada, A. and Komamura, K. (2018) Nihon no saitei seikatsu hōsyō no tokuchō  
[Characteristics of Securing a Minimum Standard in Japan] Yū Hi kaku

Yamada, S. (2009) Homuresu shien ni okeru syūrō to fukushi [Welfare and  
employment in homeless support] Akashi shoten.



---

# The Role of Non-profit Organisations in the Support of People Experiencing Homelessness in Brussels

---

Harm Deleu, Rebecca Thys and Mieke Schrooten

Social Work Research Centre, Odisee University of Applied Science, Belgium and Centre for Research on Environmental and Social Change (CRESC), University of Antwerp, Belgium

Centre of Expertise for Social Innovation, VIVES University of Applied Sciences, Belgium

Social Work Research Centre, Odisee University of Applied Science, Belgium and Centre for Research on Environmental and Social Change (CRESC), University of Antwerp, Belgium

- **Abstract\_** *This paper discusses the role non-profit organisations (NPOs) play in the support of people who are experiencing homelessness or inadequate housing in the Brussels-Capital Region. A recent census of people who are experiencing homelessness or inadequate housing in Brussels shows that they turn to both formal and informal NPOs for shelter or support. However, the role of NPOs – and especially the role of informal NPOs – remains underexplored in research on homelessness. To understand the extent to which NPOs support constituents who face homelessness and inadequate housing, we administered a survey to Brussels-based NPOs deploying activities in different fields and ranging from de facto organisations to large professional organisations. Based on our results, we present a typology of NPOs that reach out to people who are experiencing homelessness or inadequate housing. The vast majority of the surveyed organisations are in contact with people living in various forms of homelessness and inadequate housing, particularly sofa surfing and overcrowding. The profiles of the people concerned vary widely, but migration is a recurring theme. Further analysis reveals intersections between the type of homelessness the NPOs encounter among their constituents on the one hand and the kind of services NPOs offer to support their constituency with housing issues on the other hand.*

› **Keywords\_** *homelessness, inadequate housing, non-profit organisations, Brussels, informal social protection*

## Introduction

---

In November 2020, the sixth census of homeless and inadequately housed people in the Brussels-Capital Region took place. Based on a combination of data provided by accommodation and reception structures, a point-in-time street count, and questionnaires carried out in day centres, this biennial census aims to compile a snapshot of different forms of homelessness and inadequate housing and their distribution throughout the region.

The government agency in charge of the census emphasises that the results systematically distort reality, as some categories of the population concerned are not or only partially identified by their tools (Horvat and Striano, 2021). For example, people reliant on sofa surfing or living in extreme overcrowding remain largely invisible in the census. Moreover, the census does not receive data from all possible supportive structures. Government agencies and professional, publicly funded NPOs aimed at those experiencing homelessness are well represented, whereas data from more informal, volunteer-based NPOs, such as faith-based organisations or migrant associations, are underrepresented.

Yet, there are reasons to believe that people experiencing homelessness turn to both formal and informal structures for shelter or support. In general, social protection is not only found in formal systems, such as welfare states and markets, but also in informal systems, such as grassroots organisations, networks, families, and friends (Phillimore et al., 2021; Righard and Boccagni, 2015; Swyngedouw, 2019). The literature reveals a differentiation of actors involved in local social protection provided in different European regions and especially in cities (Kazepov, 2010; Phillimore et al., 2018; Swyngedouw, 2004; Van Dam and Raeymaeckers, 2017).

In the 2020 Brussels homeless census, 28% of the total number of people experiencing homelessness counted (5 313) resided in squats, negotiated occupancies, or non-aggregated accommodations, including faith communities (Horvat and Striano, 2021). Given the underrepresentation of such organisations in the census, their actual role in supporting people experiencing homelessness and inadequate housing is expected to be even more significant than these numbers suggest. While informal protection systems have been recognised as crucial in migration studies

and in research on social protection for people in societies with a limited or no formal welfare state, their role in supporting people experiencing homelessness is still underexplored (Mumtaz, 2021; Schrooten and Meeus, 2020; Simone, 2021).

This paper discusses the results of an empirical exploration of a diverse sample of NPOs in the Brussels-Capital Region and the support they provide for people experiencing homelessness and inadequate housing. The research questions guiding this exploration were: (1) What types of NPOs support people experiencing homelessness in Brussels? (2) Which services are offered by these NPOs? (3) Are these different types of NPOs confronted with various categories of homelessness?

NPOs' main characteristics are their relative autonomy from both the State and the market, and the fact that they transcend the family and community level (Anheier, 2005; Salamon and Sokolowski, 2004, 2016). NPOs often take up a role in service provision and advocacy, or a combination of both (Cooper, 2018; Kramer, 1981; Pauly et al., 2021). Service provision may consist of the provision of collective goods and services, especially for minorities and for people without access to the services provided by the Government or the market. Advocacy involves giving a voice to certain groups or issues that are underrepresented in executive and statutory bodies.

To document the role of NPOs in the support of people experiencing homelessness and inadequate housing in Brussels, a survey was conducted between March and October 2020 within the Brussels non-profit sector dealing with public issues at the local level. By including a broad variety of NPOs, we explicitly aimed to include a range of informal service providers that are often overlooked as relevant actors in the support of people experiencing homelessness, such as citizens' initiatives, migrant organisations, religious organisations, or sport clubs. We argue that the classification as formal or informal refers less to a dichotomy of clear separation than to a continuum that consists of numerous practices combining both formal and informal features. Based on our findings, we present a typology of six prototypes of organisations involved in the support of people experiencing homelessness and inadequate housing, allowing us to distinguish different levels of formalisation concerning the care and support for people experiencing homelessness, based on three dimensions: self-identification as part of the homeless sector, legal status, and presence of paid professionals in the NPO.

The presented exploration is part of a research project on informal support for people experiencing homelessness in Brussels (2019-2023). The project arose from the observation that many people experiencing homelessness remain out of sight of formal homelessness censuses and service providers and aims to gain insight into the diversity of living situations, needs, and strategies of people experiencing homelessness in Brussels and into the role informal social work practices take in this

process. Beside the here presented phase on NPO services, we conduct a literature study on hidden homelessness, case studies on a limited number of practices and a participatory study with people experiencing homelessness (Deleu et al., 2021).

We start this article by examining the particular framework of the Brussels non-profit sector. We then introduce two hypotheses underlying this research and discuss the sampling design. Next, we present our research findings and conclusions, to end with a discussion of the impact of these findings on current homelessness research and policy.

### **The Brussels Non-profit Sector: Between Dynamic and Charity Economy**

---

In general, cities are considered fertile soil for non-profit initiatives (Frantzeskaki et al., 2018). It has been suggested that this is especially the case for Brussels (Malherbe et al., 2019). Although clear figures on the size of Brussels's non-profit sector are lacking, some research findings confirm its magnitude. In an international comparison of 32 countries, Belgium appears to have one of the largest non-profit sectors in the world (Salamon et al., 2003). In the Brussels-Capital Region, NPOs account for 11% of salaried employment (Biernaux et al., 2020). Similarly, 7.2% of Brussels's population volunteer for an NPO (Hustinx et al., 2015). Although both employment and volunteer rates are slightly lower compared to other Belgian regions, there is a relatively higher number of NPOs in the Brussels-Capital Region (Banque Nationale de Belgique, 2017; Biernaux et al., 2020). Research by Thys (2017) found about 1500 NPOs rooted in the Belgian Moroccan, Belgian Congolese, and Belgian Turkish communities in Brussels, 63% of which were entirely based on volunteers.

There are two main explanations for the scope of NPOs in cities and for the size of Brussels' civil society in particular. Firstly, according to public good theories (Weisbrod, 1986), NPOs fill the gaps left by the Government or the market, which focus on fulfilling the needs of the median voter or the median customer respectively. Thus, a society with more diversity in terms of class, occupation, needs, age, culture, etc. would lead to more minority preferences being met by a more diverse non-profit sector. Malherbe et al. (2019) argue that the social problems of the deprived population in Brussels were not addressed by bureaucratic forms of the Welfare State, which stimulated the creation of social movements. Carlier (2020) explains how a lack of arrival infrastructure for undocumented migrants, who often pass through Brussels in transit, led to humanitarian aid and practices of hospitality organised by new forms of NPOs. Some of them later received state funding and



structuring, which allows them to formalise (Vandevoordt, 2019). This confirms the interdependence theory that emphasises partnership between governments and NPOs (Anheier, 2005).

Secondly, the functioning of the non-profit sector is affected by recent reorientations of welfare state arrangements, including a bigger emphasis on private responsibilities, which may lead NPOs toward the production of so-called ‘new charity economies’ in the shadow of the Welfare State (Dewanckel et al., 2021; Kessl et al., 2020). The new charity economy describes a system in which basic goods are distributed for free or sold at discount prices to ‘the poor’, often through NPOs with voluntary helpers or low-paid persons (Kessl et al., 2020).

Scholars have been criticising mere charitable services for people experiencing homelessness, such as food distribution or providing blankets, for their lack of ambition, inefficiency, and for keeping people in a position of dependence (Lancione, 2014; Parsell and Watts, 2017). However, evidence from Germany (Kessl et al., 2020) suggests that most organisations in the charity economy provide both material assistance and a broad spectrum of social services.

Innovative in our research is the focus on support for people experiencing homelessness and inadequate housing by NPOs of various degrees of formalisation, including non-homeless sector NPOs developing services in the field of education, culture, immigration, family affairs, sports, and so on.<sup>1</sup>

## Research Design

---

### *Hypotheses*

In our research, we examine the role of a variety of NPOs in supporting people experiencing homelessness and inadequate housing in Brussels. Our analysis is based on two hypotheses:

**Hypothesis 1: Brussels-based NPOs in various fields of activity come into contact with and provide services to people in different situations of homelessness and inadequate housing.**

The first hypothesis is grounded in three observations. First, it has been argued that contemporary urban conditions, characterised by population pressure in a context of austerity, can increase pressure on urban infrastructures and create particular forms of vulnerability, including heterogeneous forms of homelessness

---

<sup>1</sup> For a comprehensive view on the fields of activity involved, see Figure 2.

and housing unaffordability (Gillespie et al., 2021; Zufferey, 2016). Consequently, all urban service providers, including NPOs, will potentially come into contact with people affected by homelessness (Zufferey, 2016, p.223).

Second, the Brussels-Capital Region is facing an ongoing housing crisis, characterised, among others, by an increasing number of people experiencing homelessness, high housing costs as a major factor for material deprivation, and almost 50 000 people on the waiting list for social housing (De Keersmaecker and Zimmer, 2019; Dessouroux et al., 2016; Guio and Vandenbroucke, 2018; Horvat and Striano, 2021). Third, the inability of governments to adequately respond to certain migration influxes has been documented in Brussels, particularly in the context of the refugee reception crisis in 2015 (Ambrosini et al., 2019; Carlier, 2020; Depraetere and Oosterlynck, 2017).

**Hypothesis 2: Informal NPOs reach out to individuals who, due to their profile characteristics, follow different housing strategies than the users of established NPOs in the homeless sector.**

The second hypothesis relates to the possible differences in the profile of people experiencing homelessness who make use of the services of different types of NPOs. While some individuals do not make use of any support structure, others rely entirely on the public system. Yet others only seek help from more informal providers or combine formal and informal services (Phillimore et al., 2018; Schrooten and Meeus, 2020). The same applies to the support seeking strategies of people experiencing homelessness (Metraux et al., 2016; Ogden and Avades, 2011). The places and people beneficiaries turn to for support are highly situational and contextual. However, it is clear that individual characteristics such as cultural health capital, empowerment to assert expectations, language skills, and/or legal status play a role (Pemberton et al., 2019; Phillimore et al., 2018).

### ***Sampling design***

In order to understand the extent to which NPOs face homelessness and inadequate housing among their constituents, we conducted a survey of organisations. Five strategic and methodological considerations led to a sample that represents at least part of the diversity of the local non-profit sector. First, inclusion criteria were broadly defined as developing any form of artistic, cultural, educational, leisure, social, or sportive activity on the territory of the Brussels-Capital Region with a focus on adults and/or families. Both registered and de facto associations were invited to participate in the survey. Second, in the first phase of the sample, different angles of inquiry were pursued, ranging from personal networks to gatekeepers and random selection from existing registers. Third, our sensitivity to contextual features of the Brussels-Capital Region, such as the two traditional

language communities (Janssens, 2008) and its majority-minority composition (Crul, 2016), meant that we added new data collection sources and sought new characteristics of participants as the research progressed. In a fourth consideration, elements of random sampling mitigated possible biases: to further ensure random contacts, we introduced snowball sampling, a method traditionally considered suitable for accessing 'hidden populations' (Noy, 2008). Finally, a telephone contact protocol was developed and applied by the researchers when inviting participants. To avoid self-selection bias, the purpose of the research was explained as the support provided by NPOs to Brussels residents, with the focus on homelessness and inadequate housing only made explicit during the survey. The actual survey consisted of 34 questions and took approximately 20 minutes to complete. Most of the questions were multiple choice, supplemented by some open-ended questions. The survey was developed in Qualtrics in six different languages, and could be completed by phone or online. After excluding invalid data, 160 responses were analysed using SPSS. This number corresponds to an overall response rate of approximately 50%.<sup>2</sup>

## Results

---

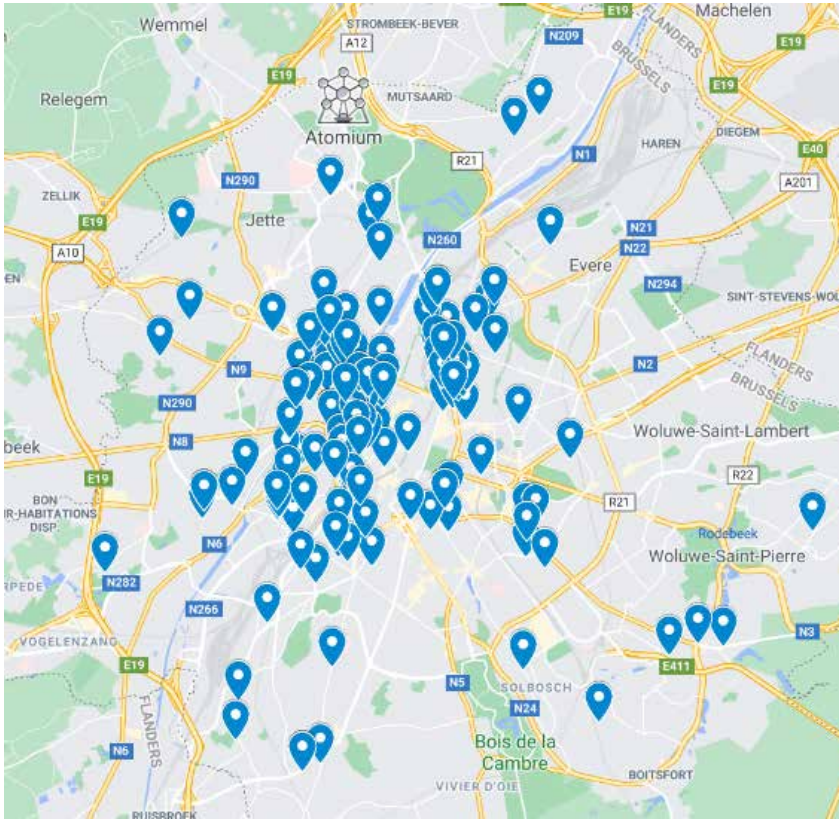
The organisations that participated in the survey were spread across the Brussels-Capital Region. A majority of the NPOs were located in the heart of the so-called canal zone, which consists of former central working-class districts. This zone is one of the areas where specific needs and characteristics such as a lower median income, a high population density, a young and mobile population, and a high share of rented housing lead to a higher representation of NPOs (Malherbe et al., 2019; Vermeulen, 2015).

The founding year of the organisations varied widely between 1931 and 2020. Fifty percent of the NPOs were founded after the year 2000 and 15% in the five years prior to the survey.

---

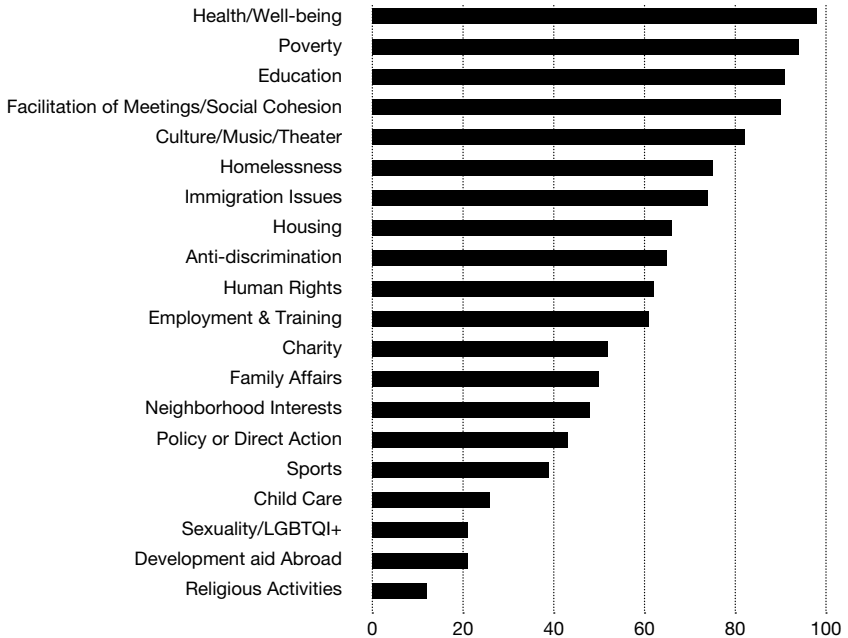
<sup>2</sup> Of the 212 NPOs with whom there was a personal contact by the established protocol (by phone), 116 completed the survey. Besides, 44 responses were given through a more general distribution via social media and a group mailing.

**Figure 1. The Location of the Responding NPOs Within the Brussels-Capital Region**



While 38 NPOs had no paid workers in the organisation, 122 did employ people. Of this latter group, 32 had between one and three employees, 47 between four and 10 employees, and 43 had 11 or more employees. Employees do not necessarily displace volunteers in NPOs, but often work together in the same organisation (Anheier, 2005, p.84).

NPOs also differed in their field of activity in the last year before the survey. We formulated a number of possible fields of activity (Morales and Giugni, 2011). Figure 2 shows that the most selected fields were Health and Wellbeing (98), Poverty (94), and Education (91). Homelessness and Housing were indicated as fields of activity by 75 and 66 of the 160 responding NPOs respectively, of which 55 selected both fields of activity.

**Figure 2. Fields of Activity of the Responding NPOs in the Year Prior to the Survey**

### *Developing a typology of NPOs*

In order to explore the extent to which informal NPOs reach people experiencing homelessness, we developed a typology of NPOs consisting of six ideal types (see Table 1). This typology is inspired by the three dimensions that were mentioned in the introduction. The first one is being part of the homeless sector (yes or no) and is visualised in the rows of the table. For some organisations, supporting homeless and inadequately housed people is their *raison d'être* (ideal types 2, 4, and 6), while other NPOs do not situate themselves in the homeless sector, but instead mainly pursue other goals, such as providing support to migrants or organising cultural activities (ideal types 1, 3, and 5). The second dimension concerns the status of being a legal personality (yes or no). Some NPOs acquire legal personality<sup>3</sup> and thus have full legal capacity (e.g. to open bank accounts, insure volunteers, or employ staff), while others do not register but operate as de facto organisational

<sup>3</sup> In the Belgian context legal personality for an NPO usually means a statute as *Association sans but lucrative* (ASBL) in French or *Vereniging zonder winstoogmerk* (VZW) in Dutch. The ASBL/VZW statute is relatively accessible. The articles of association, including the purpose, must be sent for publication and the proceeds of activities must be allocated to the realisation of the registered purpose (FPS Chancellery of the Prime Minister, 2010).

entities, especially in the early stages of their existence (Paxton and Rap, 2016; Thys, 2017). The third dimension looks at the presence of employees (yes or no), distinguishing between NPOs relying entirely on volunteers and those that employ paid professionals (Goldman, 2015; Moriau, 2016).

**Table 1. A Typology of NPOs That Reach People in Situations of Homelessness and Inadequate Housing**

	De facto NPO	Registered NPO with only volunteers	Registered NPO with employees
Non-homeless sector NPO	1	3	5
Homeless sector NPO	2	4	6

Type 1 consists of de facto, non-homeless sector organisations (n=5). De facto organisations are likely to be small and are often neglected in research on the non-profit sector (Toepler, 2003). They generally operate with limited budgets. These initiatives emerge from the social capital in communities (Searing and Lecy, 2021). They may be fluid, but are nevertheless essential to enable support, learning, connection, and mobilisation (Enfaltungen, 2001; Schrooten, 2021). The Type 1 organisations in our sample can be described as religious groups, two (self-)helps groups, and one squat, all of which indicated working with a constituency of people with a migration experience. All five are familiar with homelessness and/or inadequate housing. For their limited budget, usually less than €5000 a year, two of them depend on donations and two on a subsidy that counts for less than half of the total budget.

Type 2 are de facto, homeless sector organisations (n=4). The difference with Type 1 is that these initiatives identify themselves as working for people experiencing homelessness and inadequate housing. Their activities stem from an unmet need among people with housing difficulties. Again, two organisations in our sample have a religious angle, one is rooted in migration and another is an informal network aimed at commemorating people experiencing homelessness who have died. Of the three Type 2 NPOs who answered the corresponding question, two have a budget of between €5000 and €20000 and one has less than €5000 per year. Three of them depend partly on donations for their budget, two on a subsidy that covers less than half of the total budget, one on a subsidy that covers more than half of the budget, and one generates about half of the budget by selling services or goods.

Type 3 organisations are registered, volunteer-based, non-homeless sector NPOs (n=23). The fact that they have registered for legal personality demonstrates an intention for organisational continuity (Searing and Lecy, 2021). They have an organisational e-mail address, and usually also their own phone-number, Facebook page, and postal address. In our sample, this type includes an organisation for students with a migration background, several local youth associations, cultural

organisations, a self-help group, and organisations affiliated with a mosque and a church. Twenty of them reported being aware of homelessness and inadequate housing among their public, and 10 of them provide specific services to these people, mostly moral support, but to a lesser extent also material support and a place to sleep in the organisation's network.

More than half of the Type 3 organisations receive subsidies, usually for half or less of their total budget. Membership fees, donations, and the sale of goods or services supplement the total budget. Although there are some differences between the organisations, their annual budget seems to be quite low: 14 indicate that they work with a budget of less than €5000 a year.

Type 4 consists of volunteer-based NPOs that identify themselves as a homelessness organisation (n=6). Type 4 organisations in our sample provide food and clothing to people experiencing homelessness, often with a focus on a particular migrant community, share information with people in precarious situations, and/or raise public awareness of issues relevant to homelessness, such as the consequences of evictions. Of those responding to the question, two have a budget of less than €5000 per year, another two between €5000 and €20000 per year and one from €20000 to €100000. Some of them receive subsidies, which for one of them cover the entire budget. In five of the six NPOs of Type 4, donations also make up part of the budget.

The fifth type are non-homeless sector NPOs with at least one employee (n=97). Hiring employees in NPOs usually happens when a certain income level is reached (Searing and Lecy, 2021). Most of our respondents belonged to this type. Of the 97 organisations of Type 5, 55 define themselves as a socio-cultural organisation and 37 as a neighbourhood organisation. Seventy-nine of the Type 5 organisations include people experiencing homelessness or inadequate housing among their constituents. Forty-nine provide specific services, mainly by referring people experiencing homelessness to specialised services and by giving them access to their socio-cultural activities. For 62 of them, subsidies cover more than half or all of their budget. Forty-nine of them have a budget of over €100000 a year. Twenty-seven did not answer the budget question.

The sixth and last type of organisations are sectoral NPOs with employees (n=25). Traditionally, it is this type of organisations that are known as 'the homeless sector'. They are mostly established NPOs, including day centres, shelters, and accommodation structures. Most of them are involved in the Brussels homeless census which we referred to in the introduction. Subsidies are usually their main income: for 12 of them, subsidies cover more than half of their budget, and for another five, the whole budget. Of the 16 Type 6 NPOs that provided information about their annual budget, 14 manage a budget of more than €100000.

It is important to note that the position of an NPO in this typology is based on a snapshot and may change over time. NPOs are dynamic by nature and can move from one type to another or cease to exist. For instance, a de facto organisation of citizens uniting for a greener neighbourhood may disappear over time, but may also professionalise and become a registered NPO. Moreover, formal organisations can provide a platform for informal, volunteer-based activities, services, and projects, which run parallel to the formal activities and in some cases can be formalised later. In addition, there are informal organisations, for example offering food aid, which have been operating for years and are consequently considered formal by people working in the field and/or by people experiencing homelessness or inadequate housing.

### *Situations of homelessness and inadequate housing*

An important framework in the research literature on homelessness is the European Typology of Homelessness and Housing Exclusion (ETHOS) (FEANTSA, 2005). The framework is based on a broad understanding of homelessness and inadequate housing. It uses four main concepts: Rooflessness, Houselessness, Insecure Housing, and Inadequate Housing, all of which indicate the absence of a proper home (Amore et al., 2011; FEANTSA, 2005; Meert and Bourgeois, 2005).

ETHOS is used in different research projects, and an adapted version is central to the census of people experiencing homelessness and inadequate housing in the Brussels-Capital Region (Horvat and Striano, 2021). In our research, this adapted ETHOS was a main inspiration for mapping the living situations among the constituency of the surveyed NPOs. Respondents were asked whether people from their constituency were confronted with the following situations: '1. Living on the street or in public space'; '2. Regularly spend the night in a night shelter'; '3. Stay in an accommodation for the homeless'; '4. Stay in a squat (with or without an agreement with the owner)'; '5. Reside in a place not intended for habitation, for example a caravan, hut or tent'; '6. Accommodation where the person is accommodated by an individual (with friends, family members or another person)', referring to sofa surfing; '7. Stay within the network of a faith community'; '8. Stay in a Non-Aggregated Accommodation Structure (SHNA)'; '9. Stay in an accommodation that is far too small for the number of people living there', referring to overcrowding; or '10. A combination of several of the situations mentioned above'. Respondents were able to select 'yes', 'no', and 'I do not know' for each of the 10 options, depending on the situations they found among their audience.

No fewer than 139 of the 160 organisations surveyed indicated that they had constituents in situations of homelessness or inadequate housing. This was the case for 104 of the 125 organisations from the non-homeless sector (Types 1, 3, and 5). Two categories were by far the most common among respondents and



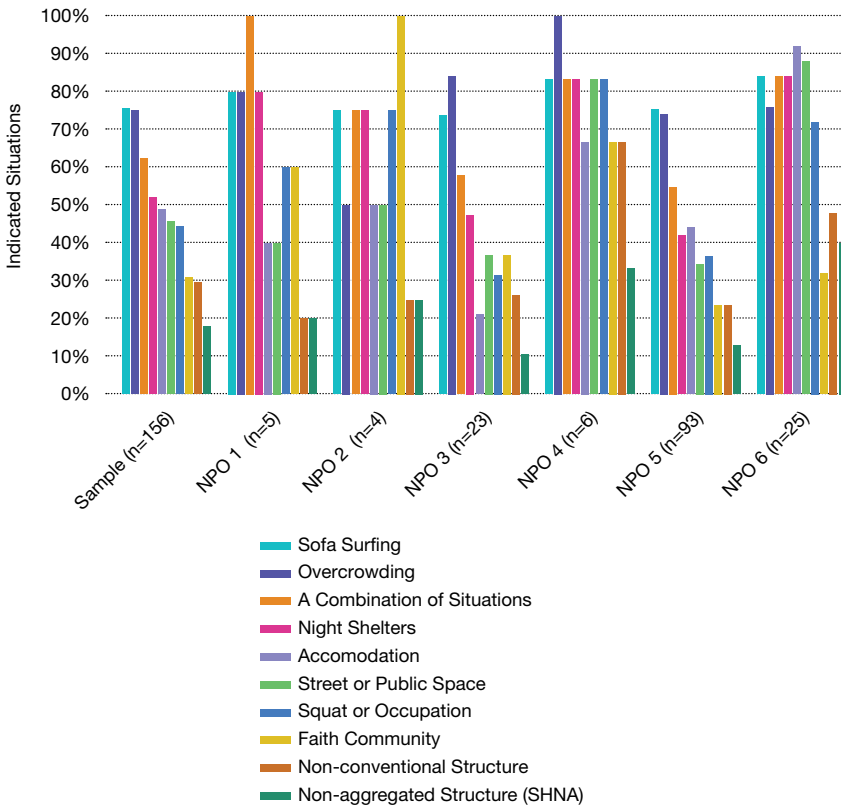
scored high across all types of NPOs, namely sofa surfing (118) and overcrowding (117). The first category is considered by ETHOS as insecure housing, while the second category refers to living in an inadequate housing situation. Respondents also recognised the interrelationship between different forms of homelessness and inadequate housing; 'a combination of several of the above-mentioned situations' was the third most frequently chosen option (96). People in emergency shelters (81) and accommodation for the homeless (77) completed the top five.

There are some similarities and differences between the housing situations that were recognised on the basis of the NPO typology mentioned above. As could be expected, sector NPOs with paid workers (Type 6) were familiar with rooflessness and houselessness, i.e., people living on the street or staying regularly in night shelters or accommodation. Some of these Type 6 NPOs offered official shelter or accommodation to people experiencing homelessness themselves. This does not mean that the offer of Type 6 NPOs was limited to these forms of homelessness. Of the 25 Type 6 NPOs surveyed, 21 also worked with sofa surfers, 18 with people living in squats, 12 with people who reside in a place not intended for habitation, 10 with people in an SHNA, and eight with people staying in a faith community. Both sector organisations and other NPOs encounter such situations of insecure and inadequate housing.

However, the volunteer-based and non-homeless sector NPOs were more often affected by insecure and inadequate housing. The 38 NPOs from Types 1 to 4, i.e., voluntary organisations, were most frequently confronted with people living in overcrowded conditions (29), with sofa surfers (27), with people moving from one situation to another (25), and people using shelters (21). Staying in the network of a faith community (18) scored relatively high, as high as staying in a squat. The fact that staying in an accommodation for people experiencing homelessness (12) and SHNA (6) scored relatively low may be related to the specific nature of these concepts, which are often not known outside the specialised homeless sector.

When comparing the relative share, the main difference between the Type 5 organisations with paid staff and the de facto Type 1 and 2 organisations is that the latter had more contact with people living in faith communities, as was the case for seven of the nine respondents. This is also the main difference between the professional homeless sector (Type 6), where staying in a faith community is the least common (albeit with a considerable eight on 25) compared to all four NPOs of Type 2 and four out of six NPOs of Type 4, both of which belong to the volunteer-based homeless sector.

**Figure 3. Chart on the Indicated Situations of Homelessness and Inadequate Housing**



***Profiles of people experiencing homelessness and inadequate housing***

Respondents were asked to indicate the profiles of that part of their constituency that is experiencing homelessness or inadequate housing. This was an open question, without any answer suggestion and not mandatory to fill in. Nevertheless, the question was answered by 111 of the 139 organisations that are in contact with people experiencing homelessness or inadequate housing.

A qualitative analysis of the results shows a mixed picture. Many respondents pointed to the diversity of the group with housing difficulties. Some of the organisations from the non-homeless sector (Types 1, 3, and 5) said that they do not have a clear view of the housing situation of their users, as homelessness and inadequate housing are not part of their scope and they therefore do not deliberately monitor such situations. The latter is particularly the case for organisations whose main field

of activity is sport or culture. Nevertheless, some clearly recurring themes were drawn out from the answers. Migration is a first topic, as 64 respondents from all six NPO types refer to migration when describing the profiles of people experiencing homelessness and inadequate housing among their visitors. Thirty-three NPOs of different types refer specifically to undocumented migrants. Nine NPOs in the sample mention people with refugee status. Some NPOs testify how refugees who are granted protection status cannot find housing, making them homeless or pushing them into inadequate housing, as two to four months is the maximum reception period provided by the Belgian Government. Two NPOs from the non-homeless sector refer to EU citizens from Central European countries who are experiencing homelessness in Brussels.

Another recurrent theme in the answers relates to family composition, which is mentioned by 31 respondents. According to them, three main groups appear to be particularly vulnerable to homelessness and inadequate housing. The first group consists of large families who have difficulty finding suitable housing. Several respondents also mention grandparents permanently living with the family, which can lead to overcrowding. The second group consists of single-parent families, often mothers with children. Third, five respondents from Type 3 and Type 5 NPOs specifically mention singles among those experiencing housing difficulties.

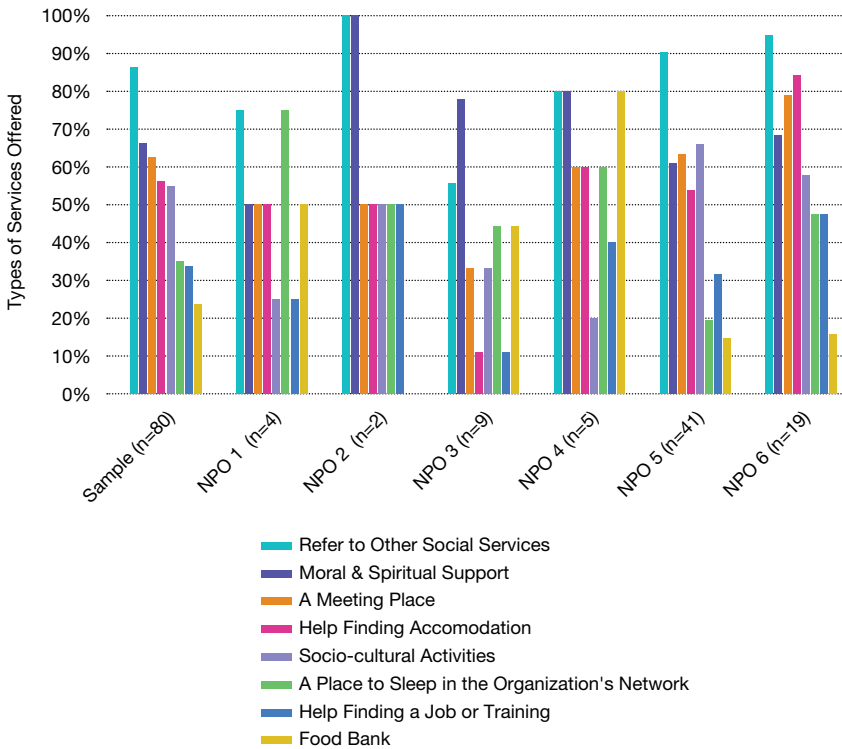
Fourteen respondents from Types 3, 4, 5, and 6 reported mental health problems among their homeless constituents, ranging from stress to psychiatric disorders. Six mentioned problems related to alcohol or other drug use. Getting lost in administrative procedures, and hence the non-take up of social rights, was another recurrent theme. Population characteristics mentioned once or twice were people marginalised because of their sexual orientation or gender identity (LGBTQI+), sex workers, artists, people with disabilities, and homeowners in substandard housing. Incidentally, 10 respondents of various types also highlighted the strengths of people experiencing homelessness, describing them as strong, courageous, and resilient.

### ***NPO services***

All the 35 surveyed organisations that are part of the homeless sector logically develop services aimed at people experiencing homelessness. Of the 125 organisations outside of the sector, around half (66) offer specific services to people experiencing homelessness among their public. Of the voluntary based non sector organisations of Type 3, 10 of the 23 organisations do so. Four of them provide food and look for places to sleep in their own network. When taking into account the surveyed voluntary based organisations (Type 1 to 4), about half of them look for sleeping places in the organisations network.

However, the services that NPOs provide to the people experiencing homelessness and inadequate housing are not limited to material support. On the contrary, the main services offered address intangible needs, such as referral to appropriate services, socio-cultural activities, social contacts, and moral support. These four kinds of support score the highest among the 49 professionalised non sector organisations of Type 5 that provide services to people experiencing homelessness. Nevertheless, the results seem to indicate that the more informal NPOs offer a wider range of services. For example, compared to other NPOs, the rather informal NPOs of Type 1 and 4 offer food aid more often. A place to sleep in the organisation's network was also provided relatively more frequently by NPOs of Types 1, 2, and 4. 'Help with finding accommodation' was in the top three of services offered by Type 1, 2, and 6 NPOs, suggesting that this service is provided by organisations at both ends of the informality-formality spectrum.

**Figure 4. Chart Showing the Types of Services Provided to Homeless and Inadequately Housed People**



## Conclusion

---

The aim of our study was to investigate the role played by a diverse sample of NPOs in supporting people experiencing homelessness and inadequate housing, including the support offered by informal NPOs and NPOs outside of the homeless sector. It distinguishes six types of NPOs, which vary in terms of sector, legal status, and level of professionalisation. The Brussels-Capital Region served as a research context.

A first hypothesis suggested that NPOs, through their service role, encounter people in various situations of homelessness and inadequate housing and provide them with supportive services. The results of our study confirm this hypothesis. Out of the full sample, 139 NPOs (or 86.9%) identified the presence of at least one homelessness situation among their constituents. Overcrowding and sofa surfing are the two most commonly identified situations. As a consequence, most organisations provide supportive services aimed at people experiencing homelessness and inadequate housing.

There is no clear confirmed intersection between the types of NPOs on the one hand and the presence of support for people experiencing homelessness and inadequate housing on the other. More than half of the sampled organisations not identifying as an organisation for the homeless still develop services for people experiencing homelessness, including organisations in all surveyed fields of activity.

In terms of the kind of services they provide towards people experiencing homelessness and inadequate housing, the results show that these services are mainly focusing on social, psychological, and moral needs. Food banks for people who are experiencing homelessness often seem to operate on a volunteer basis. Offering sleeping places in the organisation's network is also quite common among the voluntary based organisations. Yet, the assertion that those small charity oriented interventions are drawing vulnerable individuals away from existing professional services is partly contradicted, as several of them indicate that they refer people experiencing homelessness toward specialist support services.

A second hypothesis argued that different types of NPOs could be confronted with various categories of homelessness. We find this only partly true. First, as could be expected, NPOs with paid staff and defining themselves as being part of the homelessness sector (Type 6) are more familiar with traditional forms of rooflessness and houselessness: people in an accommodation, using night shelters, or living on the streets. Second, some of the more informal NPOs reach proportionally more individuals residing in faith communities. Yet, the second hypothesis is largely contradicted by the observation that for both formal and

non-formal, and for both the homeless sector and non-homeless sector NPOs, sofa surfers and people in squats make up a significant proportion of the people experiencing homelessness they reach.

The descriptions of profile characteristics of the reached people experiencing homelessness were diverse. However, migration-related aspects are mentioned most frequently by the respondents. Various categorisations of migration homelessness (Busch-Geertsema et al., 2014) are made, including people with foreign backgrounds, intra-European migrants, people with a refugee status, and, especially, undocumented migrants. The results of this research suggest that the latter are part of the visitors of all types of NPOs. Both informal and formal NPOs support undocumented migrants in precarious living and housing conditions.

## Discussion

---

The originality of this exploratory study is its inclusion of both NPOs outside the traditional homeless sector and informal NPOs, beyond faith-based organisations and squats (Lancione, 2014; Mudu and Chattopadhyay, 2018; Sanchez, 2010). In particular, the functioning and service role of de facto and non-homeless sector organisations remain underexplored in research on homelessness.

As we cannot guarantee that the NPOs reached constitute a representative sample of the broader NPO landscape in Brussels, and due to the relatively limited number of respondents, the results of this survey cannot be generalised to the entire Brussels-Capital Region or beyond. Nonetheless, our sample allows us to draw up a theoretically representative typology of the NPOs that reach people experiencing homelessness and inadequate housing, both individuals and families, the type of activities they offer, and the support they provide.

An important point that emerges from our research is how Brussels's housing crisis widely affects the constituencies of NPOs. While organisations focusing on sport or culture are less focused on the housing issue, they also notice an increased presence of people that severely struggle with housing issues. They consequently develop various forms of support to people experiencing homelessness and inadequate housing. In this way, the detection and support of people experiencing homelessness goes beyond the traditional homeless sector. We distinguish at least two consequences.

A first relevant consequence concerns the reliability of the census of people experiencing homelessness and inadequate housing that is biannually organised in the Brussels-Capital Region. The data provided by homeless sector reception structures is accurate and given the thoroughness of the point-in-time count, the number of

people on the street also reflect reality. Yet, the current study shows that the involvement of only a few informal and non-homeless sector NPOs among the accommodation and reception structures affects the reliability of the census. Our study confirms that it is not possible to involve all relevant NPOs in the count, given the enormous magnitude of this sector. A possible solution may be to work out a sample of a large number of organisations in different fields of activity and of different types, with attention for voluntary-based organisations. In addition to squatting collectives, this sample could include sports clubs, religious organisations representing different traditions, poverty organisations, family services, etc. The figures from this sample can be presented separately from the more precise figures gathered from formal reception structures and by the point-in-time street count.

Second, for coalitions tackling homelessness it may be relevant to involve NPOs that previously remained out of their sight. These informal and non-sector NPOs may be important in preventing rooflessness and houselessness, since informal social protection often precedes street based sleeping and possibly also access to the formal homeless sector NPOs.

Involving these informal and non-homeless sector NPOs in censuses of homelessness and strategies to combat homelessness would add value, as they identify aspects of homelessness that often remain out of sight of policymakers, social services, and the general public. Yet, any form of involvement should happen after careful thought and there might be ethical objections. While some NPOs are eager to broaden their network, they are often reluctant to be instrumentalised for processes they cannot control. The services they provide are often ad hoc and sometimes improvised. Cooperation with more powerful government structures and formal organisations could break these fragile dynamics, preventing organisations from taking up their informal but essential roles. Moreover, NPOs sometimes see their services as a way of exposing the gaps left by the Government. As a result, they are reluctant to get any official recognition, because that would mean accepting the current state of affairs.

To end with, charity directed at people experiencing homelessness has been criticised for “being with people who are homeless, but without ambition or activity to end their homelessness” (Parsell, 2019, p.16). While the findings suggest that some small voluntary based organisations do refer people to more specialised organisations, this remains a point of attention that deserves further empirical research. Here it is relevant to consider to what extent the considerable presence of undocumented migrants among the Brussels homeless population impacts the possibilities of NPOs to guide toward more sustainable housing-oriented solutions. Our

study confirms the intersections between migration and homelessness (Hermans et al., 2020). Brussels-based NPOs keep their finger on the pulse of these phenomena that shape contemporary homelessness.

## **Funding**

---

This article is part of a project that is financially supported by a PWO-grant of Odisee, provided by the Flemish Government, co-financed by Kenniscentrum Welzijn, Wonen, Zorg.



## ► References

- Ambrosini, M., Van Hootegem, A., Bevelander, P., Daphi, P., Diels, E., Fouskas, T., Hellström, A., Hinger, S., Hondeghem, A., Kováts, A., Mazzola, A., Mescoli, E., Rea, A., Reidsma, M., Roblain, A., and Stern, V. (2019) *The Refugee Reception Crisis: Polarized Opinions and Mobilizations* (Brussels: ULB).
- Amore, K., Baker, M., and Howden-Chapman, P. (2011) The ETHOS Definition and Classification of Homelessness: An Analysis, *European Journal of Homelessness* 5(2) pp.19-37.
- Anheier, H.K. (2005) *Nonprofit Organizations: Theory, Management, Policy* (London: Routledge).
- Banque Nationale de Belgique (2017) *Comptes nationaux. Compte satellite des institutions sans but lucratif 2009–2014* [National accounts. Satellite account of non-profit institutions 2009-2014] (Brussels: National Bank of Belgium). Available at: [http://ccss.jhu.edu/wp-content/uploads/downloads/2019/03/Belgium\\_SatelliteAccount\\_Francais\\_2014.pdf](http://ccss.jhu.edu/wp-content/uploads/downloads/2019/03/Belgium_SatelliteAccount_Francais_2014.pdf).
- Biernaux, O., Lemaire, P., and Volon, H. (2020) *Le poids économique des institutions sans but lucratif en Belgique (édition 2020)* [The economic weight of non-profit institutions in Belgium (2020 edition)] (Brussels: King Baudouin Foundation).
- Busch-Geertsema, V., Benjaminsen, L., Hrast Filipovič, M., and Pleace, N. (2014) *Extent and Profile of Homelessness in European Member States, a Statistical Update* (4th ed.) (Brussels: FEANTSA).
- Carlier, L. (2020) Experience of Urban Hospitality: An Ecological Approach to the Migrants' World, *Urban Planning* 5(3) pp.241-251.
- Cooper, R. (2018) *What is Civil Society, its Role and Value in 2018? K4D Helpdesk Report* (Birmingham: University of Birmingham). Available at: <https://gsdrc.org/publications/what-is-civil-society-its-role-and-value-in-2018/>
- Crul, M. (2016) Super-diversity vs. Assimilation: How Complex Diversity in Majority-minority Cities Challenges the Assumptions of Assimilation, *Journal of Ethnic and Migration Studies* 42(1) pp.54-68.
- De Keersmaecker, M.-L. and Zimmer, P. (2019) *Le logement à Bruxelles: Entre héritage et perspectives* [Housing in Brussels: between heritage and perspectives] (Louvain-la-Neuve: Presses universitaires de Louvain).
- Deleu, H., Schrooten, M., and Hermans, K. (2021) Hidden homelessness: A scoping review and avenues for further inquiry, *Social Policy and Society* 0(0) pp.1-17.

- Depraetere, A. and Oosterlynck, S. (2017) 'I finally found my place', a Political Ethnography of the Maximiliaan Refugee camp in Brussels, *Citizenship Studies* 21(6) pp.1-17.
- Dessouroux, C., Bensliman, R., Bernard, N., De Laet, S., Demonty, F., Marissal, P., and Surkyn, J. (2016) *Housing in Brussels: Diagnosis and challenges*, BSI synopsis n°99 (Brussels: Brussels Studies).
- Dewanckel, L., Schiettecat, T., Hermans, K., Roose, R., Van Lancker, W., and Roets, G. (2021) Researching the Non-Take up of Social Rights: A Social Work Perspective, *The British Journal of Social Work*, 52(3) pp.1416-1434.
- Enfaltungen, L. (2001) Taxonomy and Unfolding, in: R. Bunschoten and T. Hoshino (Eds.) *Urban Flotsam: Stirring the City*, pp.265-345. (Rotterdam: 010 Publishers).
- FEANTSA (2005) *ETHOS Typology on Homelessness and Housing Exclusion* (Brussels: FEANTSA). Available at: <https://www.feantsa.org/en/toolkit/2005/04/01/ethos-typology-on-homelessness-and-housing-exclusion>
- FPS Chancellery of the Prime Minister (2010) *Non-Profit Organisation (ASBL/VZW)* (Brussels: Business.belgium.be). Available at: [http://procedures.business.belgium.be/en/managing\\_your\\_business/setting\\_up\\_your\\_business/company\\_types/non\\_profit\\_organisation/](http://procedures.business.belgium.be/en/managing_your_business/setting_up_your_business/company_types/non_profit_organisation/)
- Frantzeskaki, N., Dumitru, A., Wittmayer, J., Avelino, F., and Moore, M.-L. (2018) To Transform Cities, Support Civil Society, in: C. Griffith, D. Maddox, D. Simon, M. Watkins, N. Frantzeskaki, P. Romero-Lankao, S. Parnell, T. Elmqvist, T. McPhearson, and X. Bai (Eds.) *Urban Planet: Knowledge towards Sustainable Cities*, pp.281-302. (Cambridge: Cambridge University Press).
- Gillespie, T., Hardy, K., and Watt, P. (2021) Surplus to the City: Austerity Urbanism, Displacement and 'Letting Die', *EPA: Economy and Space* 53(7) pp.1713-1729.
- Goldman, H. (2015, March 1) *Un militantisme d'État? [State Activism?]* (Brussels: Politique). Available at: <https://www.revuepolitique.be/un-militantisme-detat/>
- Guio, A. and Vandenbroucke, F. (2018) *Armoede en Deprivatie bij Belgische Kinderen [Poverty and Deprivation among Belgian Children]* (Brussels: King Baudouin Foundation).
- Hermans, K., Dyb, E., Knutagård, M., Novak-Zezula, S., and Trummer, U. (2020) Migration and Homelessness: Measuring the Intersections, *European Journal of Homelessness* 14(3) pp.13-22.

Horvat, N. and Striano, M. (2021) *Dénombrement des personnes sans-abri et mal logées en Région de Bruxelles-Capitale. Sixième édition, 9 novembre 2020* [Census of homeless and inadequately housed people in the Brussels-Capital Region. Sixth edition, 9 November 2020] (Brussels: Bruss'help).

Hustinx, L., Marée, M., De Keyser, L., Verhaeghe, L., and Xhaufclair, V. (2015) *Le volontariat en Belgique. Chiffres-clés* [Volunteering in Belgium. Key figures] (Brussels: King Baudouin Foundation).

Janssens, R. (2008) *Language use in Brussels and the Position of Dutch. Some Recent Findings* (Brussels: Brussels Studies).

Kazepov, Y. (2010) Rescaling Social Policies Towards Multilevel Governance in Europe: Some Reflections on Processes at stake and Actors Involved, in: Y. Kazepov (Ed.) *Rescaling Social Policies: Towards Multilevel Governance in Europe*, pp.35-72. (Oxford: Routledge).

Kessler, F., Oechler, M., and Schröder, T. (2020) Charity Economy and Social Work, in: F. Kessler, W. Lorenz, H. Otte and S. White (Eds.) *European Social Work—A Compendium*, pp.361–378. (Leverkusen: Barbara Budrich).

Kramer, R. (1981) *Voluntary Agencies in the Welfare State* (Berkeley: University of California).

Lancione, M. (2014) Entanglements of Faith: Discourses, Practices of Care and Homeless People in an Italian City of Saints, *Urban Studies* 51(14) pp.3062-3078.

Malherbe, A., Moriau, J., Rosa, E., and Wagener, M. (2019) *Homelessness in Brussels: Limits of Multi-Level Governance in the application of the Principle of Spatial Justice* (Brussels: Spatial Justice). Available at: [https://www.jssj.org/wp-content/uploads/2019/10/JSSJ\\_13\\_6\\_MALHERBE\\_EN2.pdf](https://www.jssj.org/wp-content/uploads/2019/10/JSSJ_13_6_MALHERBE_EN2.pdf)

Meert, H. and Bourgeois, M. (2005) Between Rural and Urban Slums: A Geography of Pathways Through Homelessness, *Housing Studies* 20(1) pp.107-125.

Metraux, S., Manjelievskaia, J., Treglia, D., Hoffman, R., Culhane, D.P., and Ku, B.S. (2016) Posthumously Assessing a Homeless Population: Services Use and Characteristics, *Psychiatric Services* 67(12) pp.1334-1339.

Morales, L. and Giugni, M. (Eds.) (2011) *Social Capital, Political Participation and Migration in Europe* (London: Palgrave Macmillan).

Moriau, J. (2016) Les Quatre étapes de la Gestion Publique du Secteur Associatif à Bruxelles (1945-2015) [The Four Stages of Public Management of the Voluntary Sector in Brussels (1945-2015)], *Echos Bruxelles Laïque* 96 pp.8-11.

Mudu, P. and Chattopadhyay, S. (2018) *Migration, Squatting and Radical Autonomy* (Oxfordshire: Routledge).

Mumtaz, Z. (2022) Informal social protection: A conceptual synthesis, *Social Policy & Administration* 56(3) pp.394-408. Noy, C. (2008) Sampling Knowledge: The Hermeneutics of Snowball Sampling in Qualitative Research, *International Journal of Social Research Methodology* 11(4) pp.327-344.

Ogden, J. and Avades, T. (2011) Being Homeless and the Use and Nonuse of Services: A Qualitative Study, *Journal of Community Psychology* 39(4) pp.499-505.

Parsell, C. (2019). Growing Wealth, Increasing Homelessness, and More Opportunities to Exercise Our Care to the Homeless, *European Journal of Homelessness* 13(2) pp.13-26.

Parsell, C. and Watts, B. (2017) Charity and Justice: A Reflection on New Forms of Homelessness Provision in Australia, *European Journal of Homelessness* 11(2) pp.65-76.

Pauly, R., Verschuere, B., De Rynck, F., and Voets, J. (2021) Changing Neo-corporatist Institutions? Examining the Relationship between Government and Civil Society Organizations in Belgium, *Public Management Review* 23(8) pp.1117-1138.

Paxton, P. and Rap, R. (2016) Does the Standard Voluntary Association Question Capture Informal Associations?, *Social Science Research* 60 pp.212-221.

Pemberton, S., Phillimore, J., Bradby, H., Padilla, B., Lopes, J., Samerski, S., and Humphris, R. (2019) Access to Healthcare in Superdiverse Neighbourhoods, *Health and Place* 55 pp.128-135.

Phillimore, J., Bradby, H., Brand, T., and Padilla, B. (2021) *Exploring Welfare Bricolage in Europe's Superdiverse Neighbourhoods* (Oxford: Routledge).

Phillimore, J., Bradby, H., Knecht, M., and Padilla, B. (2018) *Welfare Bricolage in Different Health Regimes: Motivations, Logics and Tactics* (Birmingham: University of Birmingham).

Righard, E. and Boccagni, P. (2015) Mapping the Theoretical Foundations of the Social Work–Migration Nexus, *Journal of Immigrant and Refugee Studies* 13(3) pp.229–244.

Salamon, L.M. and Sokolowski, S.W. (2004) *Global Civil Society: Dimensions of the Nonprofit Sector* (2nd ed.) (Bloomfield: Kumarian press).

Salamon, L.M. and Sokolowski, S.W. (2016) Beyond Nonprofits: Re-conceptualizing the Third Sector, *Voluntas* 27(4) pp.1515-1545.

Salamon, L.M., Sokolowski, S.W., and List, R. (2003) *Global Civil Society: An Overview* (Baltimore: Johns Hopkins Center for Civil Society Studies).

Sanchez, D. (2010) Civil Society Responses to Homelessness, *Development Southern Africa* 27(10) pp.101-110.

Schrooten, M. (2021) Transnational Social Work: Challenging and Crossing Borders and Boundaries, *Journal of Social Work* 21(5) pp.1163-1181.

Schrooten, M. and Meeus, B. (2020) The Possible Role and Position of Social Work as part of the Arrival Infrastructure, *European Journal of Social Work* 23(3) pp.414-424.

Searing, E.A.M. and Lecy, J.D. (2021) Growing Up Nonprofit: Predictors of Early-Stage Nonprofit Formalization, *Nonprofit and Voluntary Sector Quarterly* OnlineFirst pp.1-19.

Simone, A. (2021) Ritornello: "People as Infrastructure", *Urban Geography* 42(9) pp.1341-1348.

Swyngedouw, E. (2004) Globalisation or 'glocalisation'? Networks, Territories and Rescaling, *Cambridge Review of International Affairs* 17(1) pp.25-48.

Swyngedouw, K. (2019) Informele netwerken als welzijnsactoren rond verborgen thuisloosheid in het Brussels Gewest [Informal networks as welfare actors on hidden homelessness in the Brussels Region], in: P. Debruyne, M. Schrooten and R. Thys (Eds.) *Sociaal schaduwwerk, over informele spelers in het welzijnslandschap*, pp.31-44. (Brussel: Politeia).

Thys, R. (2017) *Opportunities, Obstacles and Resistances. The Political Participation by Brussels based Belgian Moroccan, Belgian Turkish and Belgian Congolese Organisations* (Brussels: ULB).

Toepler, S. (2003) Grassroots Associations Versus Larger Nonprofits: New Evidence from a Community Case Study in Arts and Culture, *Nonprofit and Voluntary Sector Quarterly* 32(2) pp.236-251.

Van Dam, S. and Raeymaeckers, P. (2017) Migrants in the Periphery: Migrant Organisations and their Networks, *European Journal of Social Work* 20(6) pp.921-934.

Vandevoordt, R. (2019) Eroding Rights, Crafting Solidarity? Shifting Dynamics in the State-Civil Society Nexus in Flanders and Brussels, *Social Inclusion* 7(2) pp.106-117.

Vermeulen, S. (Ed.) (2015) *The Brussels Canal Zone: Negotiating Visions for Urban Planning* (Brussels: VUB Press).

Weisbrod, B.A. (1986) Toward a Theory of the Voluntary Nonprofit Sector in a Three-Sector Economy, in: S. Rose-Ackerman (Ed.) *The Economics of Nonprofit Institutions*, pp.21-44. (Oxford: Oxford University Press).

Zufferey, C. (2016) Homelessness in Western cities, in: C. Williams (Ed.) *Social Work and the City*, pp.215-233. (London: Palgrave Macmillan).



# Research Notes



***Part B***

---





---

# Not Just a 'Youth Problem': LGBT+ Experiences of Homelessness Across the Life Course in Fife, Scotland

---

Briege Nugent, Caryn Nicolson and Joe Doherty

Independent research consultant and Honorary Research Fellow, University of Salford  
Frontline Fife, Scotland

School of Geography and Sustainable Development, University of St. Andrews

➤ **Abstract\_** *While it is widely recognised that LGBT+ people are over-represented in the homeless population, research on their circumstances and experiences is limited. Scotland has a well-deserved reputation for progressive homeless legislation, yet in policy documents LGBT+ people are barely mentioned. This paper presents the results of a study in Fife, the third largest Local Authority in Scotland, focusing on 14 in-depth interviews with LGBT+ people from across age groups who had experience of or been at risk of homelessness. The findings bring to the fore that rejection by family and partners for 'coming out' is common to all age groups and not just a youth problem, and is a unique reason for LGBT+ people becoming or being at risk of homelessness. The research highlights the complexity of LGBT+ life courses, with fluidity and confusion around gender identity colluding with poverty and rurality to exacerbate the experience of homelessness. This paper calls for data collection in this area so that the extent of the problem no longer remains unknown and easily ignored and more inclusive dialogue between policy makers and those affected by policy, a message which needs to resonate beyond this field and indeed beyond Scotland.*

➤ **Key Words\_** *LGBT+, Homelessness, Life Course, Rural, Identity*

## Introduction

---

The actual extent of LGBT+ homelessness is unknown and there are significant knowledge gaps in this area with the focus on this as being a youth problem (Ecker, 2019). The European Union Agency for Fundamental Rights estimates that in the EU 1 in 5 LGBT+ young people experience homelessness, rising to 1 in 3 for trans people and nearly 40% for intersex people (Ritosa et al., 2021). In the UK, while only 5% of people identify as LGBT+, it is estimated that they make up a quarter of all homelessness (Fraser et al., 2019; Nolan, 2017). It is important to recognise however that all of these studies are estimates and focused on youth and the variations are wide (Shelton, 2017).

Inequality and homophobia continue to exist. The European Union Agency for Fundamental Rights (2020) report that of the 140 000 respondents from across Europe, 43% of LGBT+ respondents above 18 years old and 60% of trans people felt discriminated against in their everyday life. LGBT+ hate crime in Scotland, where this research took place, has risen by 24% between 2019 and 2020 (Crown Office and Procurator Fiscal Service, 2020).

The study of LGBT+ people as an identity group is relatively new and they remain invisible in the data (Moore, 2015). LGBT+ invisibility in homelessness is not just about the lack of data collection, but also young people not seeing themselves as homeless or minimising their situation, being unwilling to use accommodation services, and to reveal their sexual identity (Norris and Quilty, 2020). The consequence of this invisibility is that the portrayal of LGBT+ as affluent and well-housed has endured, whereas the reality is that the majority of LGBT+ people are living in poverty (Matthews et al., 2019). The LGBT+ specific research, which sits outside of the main datasets, shows that this population experience higher rates than the general population of problematic substance use, self-harm, suicide, poor mental health (Bachmann and Gooch, 2018), and isolation (Teuton, 2018). Healthcare and service provision for LGBT+ people in the UK is inadequate and in some cases hostile (Government Equalities Office, 2018).

Poverty is the main driver of homelessness and how this intersects with sexuality, ethnicity, racism, substance use, and mental health issues are important to recognise (Fraser et al., 2019). Rejection by others for 'coming out' is the main cause of homelessness for LGBT+ and is a unique factor to this population (Ecker, 2019; Abramovich, 2012). Fraser et al. (2019) draw attention to 'systematic failures' such as sexual abuse, foster care, and stigma that all contribute towards homelessness. They caution however, that focusing only on the negative aspect of LGBT+ is to provide a one-dimensional understanding of the issue and to undermine this

population. Bryan and Mayock (2012) carried out the first study in Ireland exploring LGBT+ lives and mental health, and also caution against making linear conclusions, but instead to recognise the diversity and complexity of accounts.

In 2017, the European Pillar of Social Rights set out to define a common framework for the social rights of European Citizens. The European Commission announced the launch of a European Platform on Combatting Homelessness (FEANTSA and the Abbe Pierre Foundation, 2021). However, the UK is no longer part of the European Union, despite the Scottish people voting largely to remain, and therefore these developments do not apply any longer to where this research has taken place. In 2018, the UK Government Equalities Office (2018) launched an *LGBT Action Plan*, committing the UK Government to address, among many other issues, the causes of LGBT+ homelessness (Lawrence and Taylor, 2020). However, because of devolved responsibilities, much of the plan is only applicable to England. While at the present time in Scotland there appears to be no plan of equivalent scope, in 2018 the Scottish Government launched its *Ending Homelessness Together High Level Action Plan* which recognises 'sex, gender reassignment, and sexual orientation' as 'protected' groups (together with age, disability, race, and religion or belief). Following this directive, all Local Authorities were tasked with putting in place local *Rapid Rehousing Transition Plans*. These plans emphasise the need for fair access for all to stable, secure housing and place high importance on providing services that are person-centred and founded on rights and lived experience. While many groups at risk of homelessness were identified in these plans (Dun, 2020), LGBT+ communities regrettably received scant attention.

This paper is structured to set out the aims, scope, and methods of the research before turning to report on the findings based on interviews with 14 LGBT+ individuals from across age groups who had experience of or were at risk of homelessness. This highlights that rejection for coming out was the main reason for homelessness and is not just a youth problem.

## **Aims and Scope of the Research**

---

Fife is Scotland's third largest Local Authority area by population (approx. 372 000). In 2016, a *LGBT Community Needs Assessment* for Fife was published (Greenwood and Olsson, 2016). This showed that LGBT+ people are significantly disadvantaged when using health and support services which rarely recognise or take account of their specific needs. The report further concludes that LGBT+ people are unable to live openly and do not feel sufficiently comfortable or safe 'to be themselves'. It highlights the absence of LGBT+ specific social activities and venues in much of Fife, which severely limits opportunities to connect with peers, contributing to

isolation and negatively impacting on health and wellbeing. Fife is a mixed area geographically with two out of three people living in an urban area, one in six in a small town, and the remainder in rural areas or small villages (Fife Centre for Equalities and Fife Council Research Team, 2019).

The research reported on in this paper was commissioned by Frontline Fife, a charity that provides a range of services addressing immediate housing needs and support for early intervention around homelessness.<sup>1</sup> The study set out to identify the challenges experienced by LGBT+ who have had direct experience of homelessness or been at risk of homelessness, and for this to inform service development (Nugent, 2021).

## Methods

---

This was a qualitative study with semi-structured interviews conducted (Cousin, 2009). Fieldwork took place between August 2019 and April 2020. Drawing on the work of Nowell et al. (2017) a thematic analysis was carried out, and this involved six phases, namely becoming familiar with the data; generating initial codes; searching for themes; reviewing themes; defining and naming themes; and finally, producing the report. One of the main challenges in qualitative research is people being able to tell it like it is (Holloway and Jefferson, 2000), and of their own understanding of their situation and context. It was challenging gaining access to people with lived experience of homelessness, and awareness was raised by meeting local LGBT+ groups. The call was also extended to other Local Authorities, with two interviewees coming from outside Fife. It is important to be mindful of intersectionality and the uniqueness of individual experiences, and all interviewees' views are their own. The number of participants is small and not representative of a wider group, with the focus on providing depth and to promote discussion around this area.

### *LGBT+ Voices*

Although a small sample, the extraordinary individual stories of these 14 participants not only illustrate themes commonly reported in the literature, but, importantly, also raise issues that are relatively neglected and 'new' to the published research. A profile of individual interviewees is provided in Table 1. The names of interviewees were changed to ensure confidentiality.

---

<sup>1</sup> To learn more about the charity please go to <https://www.frontlinefife.co.uk>.

**Table 1: Profile of interviewees**

*TA = temporary accommodation LA = living outside Fife*

ID	LGBT+ Identity	Age	Based	Housing Situation at time of Interview	Engagement with Housing Services and overall views
Brian	Trans man	16-24	Small Town	Back with parents, 'evicted' after coming out and sofa surfed.	No, was unaware of support.
Cheryl	Trans woman	50-59	Large Town	Own tenancy, relationship ended when came out.	Yes, through other service, positive, but chose not to stay in TA.
Dan	Trans man	16-24	Small village, LA	Own tenancy, 'evicted' by parents after coming out.	Yes, through other service. TA – Negative reactions.
Fiona	Cisgender Gay Woman	25-29	Small village, LA	Still in TA after split with partner.	Yes, positive experience.
Finn	Trans man	16-24	Small village	Own tenancy, 'evicted' after 'came out' by parents.	Yes, through other service. Positive, unaware of TA.
Gerry	Cisgender Gay man	40-49	Small village	Own tenancy after split from partner.	Yes, positive but chose not to stay in TA.
Iain	Cisgender Gay man	16-24	Rural area	With parents and recently 'came out', had been concerned of risk.	No experience of services and unaware.
Janet	Trans woman	50-59	Small village	Own tenancy, homeless as used finances to transition.	Yes, and positive.
Layla	Trans woman	30-39	Large Town	At risk, as lost long-term job due to transphobia.	No contact and unaware of support.
Maura	Cisgender Bi-sexual Woman	16-24	Small village	With parents and not 'out' because of risk.	No experience and unaware.
Neil	Cisgender Bi-sexual Man	40-49	Large Town	Sofa surfing, 'evicted' after coming out to long-term partner.	Aware but unengaged as views TA as 'unsafe'.
Susan	Trans woman	40-49	Small village	With partner but at risk for coming out.	Aware but no contact with housing services.
Tim	Cisgender Gay man	40-49	Small village	Own tenancy. Had split up with partner and moved back in with parents.	Aware but unengaged as views TA as 'unsafe'.
Viv	Cisgender Gay Woman	25-29	Small Town	Own tenancy, did not come out to parents when younger.	No experience but aware.

**Summary of Table 1**

N.B. Not all participants disclosed *both* their gender and sexual identities.

*LGBT+ identity*: Seven participants identified as cisgender – two as gay women, three as gay men. One woman and one man identified as bisexual. Seven interviewees identified as trans – four as trans women and three as trans men.

*Age*: Five respondents were under 25, and six were aged 40 or over; of the latter two were 50 or over.

*Residence*: Four interviewees lived in a large or small town, 10 lived in a small village, and one in a rural area.

*Housing Situation*: At the time of interview seven interviewees had their own tenancies.

## Findings

---

The following findings present an analysis based on the interviewees' responses. There are three main sections recounting (i) experience of homelessness, (ii) engagement with support services, and (iii) assessment of support provision.

### *Experience of homelessness and risk of homelessness*

#### **Struggle with sexual / gender identity and experiences of homophobia**

The vulnerability of LGBT+ homelessness is closely aligned to the discomfort of being queer in a heteronormative society (Matthews and Poyner, 2017). All interviewees described being aware of being 'different' and in a minority. Trans people reported feeling particularly vulnerable to stigma and were noticeably lacking in self-acceptance and confidence. Several trans respondents identified the stalling of consultations over the 2004 Gender Recognition Act and the continuing contemporary debate regarding the rights of trans people in UK society (Doward, 2020) as symptomatic of the barriers they faced in achieving an accepted place in society. All interviewees described struggling with their identity and viewed revealing who they are to others, particularly in the initial stages of 'coming out', as a 'gamble' – for fear of exclusion.

*I moved to London and was finally able to live the life that I wanted, but then when I came back to live with my parents, I kept that part of my life in a box, literally in a box and could only be me when I went to visit friends in Glasgow.*  
(Layla, Trans woman)

The detailed picture of individual experiences reveals complexity. For example, Viv and Tim only came out to their parents when they were older and had their own tenancies. Iain only revealed his sexual identity to his parents when he was concerned it was otherwise going to be disclosed through Facebook. Maura, at the time of interview had still not told her parents about her sexual orientation because she was concerned how they might react.

#### **Mental health, abuse, and violence**

Four interviewees who grew up in and continued to live in a small village or rural area reported not 'coming out' until they were much older and felt that throughout that time they 'hid from themselves' which had an adverse impact on their mental wellbeing. Gerry felt his lack of self-acceptance was clearly a contributory factor to his mental health problems and played a role in his marriage breakup, leading to homelessness. Brian and Gerry had both been physically attacked because of their sexual identity and Brian reported suffering from post-traumatic stress disorder (PTSD) as a result. Finn and Dan faced transphobic abuse from their families for years. Not knowing where to get help, they felt trapped and experienced mental

trauma resulting in being hospitalised on several occasions. All interviewees reported experiencing stigma and being abused either physically or on-line because of their LGBT+ identity.

*I have had negative attention, people spitting at me. It was a younger person than me and they told me to kill myself... I had a drunk guy push me and ask 'Are you a boy or a girl?' (Finn, Trans man)*

*I have had a lifetime of stress related problems and looking back on it, it is all linked to me needing to be me, and up until now not being able to. (Cheryl, Trans woman)*

### **Rejection**

Four were put at risk of homelessness and eight became homeless because of rejection by family or partners after coming out. The fear of personal rejection by family, friends, and a potentially hostile and homophobic society dominated the narratives of all the interviewees and across age groups underpinning struggles with self-acceptance of a queer identity. This was especially apparent among those interviewees who lived in small villages and rural communities without easy recourse to safe and protected environments. The varied background stories of the participants further highlight how LGBT+ people are not a homogeneous group, presenting a challenge to the designation of LGBT+ as a 'community', with trans people in particular feeling on the margins.

*I think it is harder for people when they live in rural areas. I watch what I do when I am in certain places... I wouldn't move away though because this is my home. (Gerry, Gay man)*

*I think a lot of trans people become estranged by family, friends and isolated... Since I have come out I have lost my male friends. (Susan, Trans woman)*

### **Isolation and rurality**

Echoing findings from the *Fife Needs Impact Assessment* (Greenwood and Olsson, 2016), the 10 rural/small village based interviewees reported feeling an acute lack of acceptance, no sense of community, and having to strictly regulate their behaviour. Among these, four trans people recorded that local residents were resistant to recognising anything but their birth assigned identity, making them feel both estranged from and rejected by the wider community.

*It is hard in X (small village) that sometimes people still refer to you as the person you were before, they use my dead name. (Finn, Trans man)*

While LGBT+ individuals living in larger settlements frequently have access to known, visible, safe, and inclusive or dedicated spaces for LGBT+ people, for most living in rural communities such access is not the norm. For rural based LGBT+ individuals the ability to seek out informal support is therefore limited, other than online, compounding further their isolation and disconnection.

### **Safety and security**

All felt 'unsafe' to be themselves and the perception and experience of the prejudice of others towards them as LGBT+ and the risk of abuse was a particular barrier to seeking help. Six interviewees who now had their own tenancies acknowledged that here they felt safe and secure, and this was transformational as they were finally able to live the life they wanted, and that this had had a positive impact on their mental health. By contrast, Neil who was sofa surfing and Layla who was at risk of losing her home for financial reasons, did not feel at all secure. Maura felt that by not telling her parents 'the truth' about her sexual identity she was 'living a lie' and worried they would find out from someone else and ask her to leave. Susan feared her partner might ask her to move out because they were finding it difficult to cope with her 'new' gender identity. All described the pressure they felt and had underlying concerns about how their situations were affecting their general wellbeing.

*The main challenge for people who are LGBT+ is being judged, heterosexual people can walk down the street and hold hands, if you do that when you are two men or two women people stare. (Tim, Gay man)*

### **Complexity**

The 14 in-depth interviews conducted for this research bring to the fore the complexity of the interaction between sexual/gender identity and housing (Matthews et al., 2019). This study shows that LGBT+ homelessness is not just a youth problem: five of our sample were under 25 years, and six over 40, two of whom were 50 or over. Maura, at the age of 17, highlights further levels of complexity as she was confused about her sexual identity, and not sure if she was bi-sexual or asexual. As Matthews (2020) shows, being conflicted over queer identity is not helped by the many categories that now make up the '+' part of the 'LGBT+' acronym – which itself is a heteronormative derived classification. Without access to support mechanisms (informal or formal), the impact of not having the opportunity to explore identity over time will amplify negative feelings of insecurity and lack of self-acceptance.

*I am bi-sexual but also potentially asexual. I have not told my parents because I am worried they will kick me out... My brother is gay and my Dad hasn't been great about it, so I have been worried about saying. (Maura)*



### **Backdrop of Poverty**

Our research reaffirms the findings of *Hard Edges Scotland*, and previous to this *Hard Edges England* reports, that there is a strong and direct correlation between homelessness and poverty (Bramley et al., 2015; 2019). Yet, in common with findings in previous studies around poverty, most of the participants in our research only hinted at living with deprivation (Walker, 2014). Only one person was open about their struggle to survive and how living rurally made this even more challenging.

*Living rurally, travel as well is expensive, so it can mean you having to decide if you are going to eat or go somewhere. (Dan, Trans man from the Borders)*

LGBT+ identity, however, was shown to have a direct relationship with poverty for two people. Janet had invested all her money to travel abroad and pay for her transition, as this was not available on the NHS at the time. She was, as a consequence, effectively homeless upon return. Layla lost her job because of her ex-employer's transphobia and was at risk of homelessness as a result.

### **Resilience and hope**

As well as challenges, the life stories of our interviewees demonstrate the incredible resilience of some individuals, albeit born out of necessity. All felt hopeful that societal progress with increasing acceptance of non-binary sexual identities would continue and that inclusion would be promoted. It was strongly felt by respondents that young people are less closed-minded than older generations, being more questioning of heteronormativity and accepting of difference. Overall, despite reservations about support services as is discussed below, interviewees were very positive about Fife 'being an accepting place'. All felt that the teaching of LGBT+ rights in schools and the creation of safe spaces, such as is in Kirkcaldy High School, were significant indicators of the progress made.

*I think it is harder in rural areas, but I think things are really improving and I think younger people will have it easier than we did. (Cheryl, Trans woman)*

### **Engagement with Support Services**

---

The responses of the LGBT+ interviewees created three categories in relation to engagement with services. Namely, four were *unaware of support services*, four were *aware but wary*, and finally, six were *aware and engaged*. Those unaware or aware but wary of services lived the most precarious lives and had experienced the most unsafe situations, having to sofa surf or even having to rely on family or partners that had rejected them. Those wary had negative perceptions about the quality of housing they could access and also how others might react to their sexuality and the risk of abuse, and the impact this would have on their mental health.

*I don't want to stay in temporary or hostel accommodation. I know the reputations of those places. I am not scum. I know me, with my drinking, if I fall in with those people I will fall down with them. (Neil, Bi-sexual man)*

The variable levels of engagement of interviewees with housing support services highlights the need for their positive promotion as both inclusive and empathetic and as demonstrating understanding of the diversity of LGBT+ identities. Access to such services at a much earlier point in a crisis cycle can prevent homelessness from occurring.

### **Assessment of housing support services**

---

The six LGBT+ interviewees who had first-hand experience of housing services reported having generally positive interactions with support staff, but also felt that LGBT+ training would ensure that staff were not only more informed and confident about their interactions, but would also help to challenge heteronormative attitudes. All felt that asking about gender and sexual identity should be 'up front' and the 'responsibility' of support agencies to inform plans and ensure they are not erroneously being classified as 'intentionally homeless'.<sup>2</sup> Echoing views recorded in other research (England, 2019), all interviewees who engaged with housing support lamented the unpreparedness and inflexibility of applicant procedures and recording systems. These experiences reflect the dominant heteronormativity of administrative processes, underlining the conclusion of Matthews (2020) that the change needed is not just about adding 'a box', but cultural and structural.

*I think they should ask about your sexual identity. It is my main reason for being homeless so it should be noted. When I went to the Council the lady said they didn't have a form for me, as if I was really abnormal. She said 'I have never had to deal with this.' (Finn, Trans man)*

---

<sup>2</sup> A person is intentionally homeless if it is deemed that they deliberately did or failed to do anything which led to the loss of accommodation which it was reasonable for them to continue to occupy. In these cases the Local Authority has no duty to provide permanent housing.

## Discussion and Conclusion

---

This research brings to the fore that rejection by family and partners for ‘coming out’ is common to all age groups and crucially not just a youth problem, and is a unique reason for LGBT+ people becoming homeless or being at risk of homelessness. The stories told by LGBT+ participants emphasise the complexity of LGBT+ life courses, with fluidity and confusion around gender identity colluding with poverty and rurality to exacerbate the experience of homelessness. LGBT+ people are at particular risk of hidden homelessness; a result of the combination of a reluctance on the part of some to be open about their identity through fear of intolerance and abuse, a lack of knowledge about and suspicion of the role of support services, and, critically, the absence of systematic recording of sexual and gender identity in housing and homelessness records.

This study reveals ‘new’ insights into the lives of LGBT+ people, and especially trans men and women living in rural areas or smaller settlements. Isolation, aggravated by being cut off from immediate and easy access to a supportive community, is compounded by the constant fear of ‘exposure’. For some this meant not ‘coming out’ until they were much older, which had an adverse effect on mental health, leading even to hospitalisation. These accounts clearly demonstrate feelings of acute isolation and lack of acceptance, and the complex interaction between the fluidity and confusion that can exist around gender/sexual identity on the one hand and rurality and housing on the other.

Access to LGBT+ support groups emerged strongly as being especially important in affirming a positive identity and achieving a sense of belonging – a sense of belonging that had been achieved for the six LGBT+ participants who had their own tenancies. Each had lived through periods of homelessness, insecurity, and relative poverty and bore testimony to the sense of wellbeing that access to safe and habitable shelter conferred. Having a stable secure home and one’s own space is the foundation from which to thrive and can be fundamental in establishing a place in the community. For LGBT+ people, home can be an especially important, if not crucial, space for self-acceptance of one’s identity (Di Feliciano and Dagkouly-Kyriakoglou, 2020).

May (2011, p.3) states that “we come to understand who we are partly on the basis of where and with whom we belong, which is why belonging is of fundamental importance to the self.” Routes out of homelessness in research conducted by Matthews et al. (2019) are associated with people becoming more comfortable with their identities, and that the vulnerability of homelessness is closely aligned to the discomfort of being queer in a heteronormative society. The acceptance of oneself could even be regarded as a private form of ontological security and this study demonstrates how challenging this can be especially for LGBT+ people.

'LGBT+' and 'homeless' are discrete 'labels' or 'shibboleths' provoking stigma and prejudice. Together they compound the social ills of the 'roofless queer'. Both need to be addressed, but combatting the prejudice and stigma associated with LGBT+ identity is arguably the most problematic. Evidence from this study suggests that there is a need for LGBT+ training and data collection in this area so that the extent of the problem no longer remains unknown and easily ignored. Although this study was conducted in Scotland and with a small group of participants, it brings to the fore the need for a more inclusive dialogue between policy makers and those affected by policy, and this is a message which needs to resonate beyond this field and indeed beyond Scotland. While this research places a spotlight on LGBT+ identity, it is recognised that 'identity' matters for all and should be an integral part of person-centred care and public service delivery and policy development.

#### *Acknowledgment*

Frontline Fife commissioning the study; St Andrews University Students Charitable Trust for providing the unrestricted funds which resourced this research. To the Frontline Fife LGBT+ working party for timely advice and support.

## ► References

Abramovich, I. (2012) No Safe Place to Go LGBTQ Youth Homelessness in Canada: Reviewing the Literature, *Canadian Journal of Family and Youth* 4(1) pp.29-51.

Bachmann, C. and Gooch, B. (2018) *LGBT in Scotland: Health Report* (London: Stonewall). Available online at: [https://www.stonewallscotland.org.uk/sites/default/files/lgbt\\_in\\_scotland\\_-\\_health\\_report.pdf](https://www.stonewallscotland.org.uk/sites/default/files/lgbt_in_scotland_-_health_report.pdf).

Bramley, G., Fitzpatrick, S., Edwards, J., Ford, D., Johnsen, S., Sosenko, F., and Watkins, D. (2015) *Hard Edges: Mapping Severe and Multiple Disadvantage in England* (London and Edinburgh: Lankelly Chase with Heriot-Watt University).

Bramley, G., Fitzpatrick, S., Wood, J., Sosenko, F., Blenkinsopp, J., Littlewood, M., Frew, C., Bashar, T., McIntyre, J., and Johnsen, S. (2019) *Hard Edges Scotland* (Heriot-Watt University, I-SPHERE; Lankelly Chase; The Robertson Trust). Available online at: <https://lankellychase.org.uk/resources/publications/hard-edges-scotland>.

Bryan, A. and Mayock, P. (2012) Speaking Back to the Dominant Constructions of LGBT Lives: Complexifying 'at Riskness' for Self-Harm and Suicidality Among Lesbian, Gay, Bisexual and Transgender Youth, *Irish Journal of Anthropology* 15(2) pp.8-15.

Cousin, G. (2009) *Researching Learning in Higher Education: An Introduction to Contemporary Methods and Approaches* (London: Routledge).

Crown Office and Procurator Fiscal Service (COPFS) (2020) *Hate Crime In Scotland 2019-20* (Edinburgh: COPFS). Available at: <https://www.copfs.gov.uk/images/Documents/Statistics/Hate%20Crime%20in%20Scotland%202019-20/Hate%20Crime%20in%20Scotland%202019-20.pdf>.

Di Felicianantonio, C. and Dagkouly-Kyriakoglou, M. (2020) The Housing Pathways of Lesbian and Gay Youth and Intergenerational Family Relations: A Southern European Perspective, *Housing Studies* DOI: 10.1080/02673037.2020.1807471.

Doward, J. (2020) *Polarised Debate on Gender Recognition is Harming the UK* (*The Guardian* 8 August, 2020).

Dun, L. (2020) *Rapid Rehousing Transition Plans: A Scottish Overview* (Edinburgh: Crisis). Available at: [https://www.crisis.org.uk/media/241640/crisis\\_rapid-rehousing-report\\_web\\_spreads\\_v2.pdf](https://www.crisis.org.uk/media/241640/crisis_rapid-rehousing-report_web_spreads_v2.pdf).

Ecker, J., Aubry, T., and Sylvestre, J. (2019) A Review of the Literature on LGBTQ Adults Who Experience Homelessness, *Journal of Homosexuality* 66(3) pp.297-323.

England, E. (2019) *Homelessness Among Trans People in Wales* (Swansea: Shelter Cymru Head Office).

The European Union Agency for Fundamental Rights (2020) *A Long Way to go for LGBTI Equality* (Vienna: European Union Agency for Fundamental Rights).

Fife Centre for Equalities and Fife Council Research Team (2019) *Leave No One Behind*. Available online at: <https://centreforequalities.org.uk/wp-content/uploads/2019/11/Lets-leave-no-one-behind-Nov-2019-report-FINAL.pdf>.

FEANTSA and the Abbé Pierre Foundation (2021) *Sixth Overview Of Housing Exclusion In Europe 2021*. Available at: <https://www.feantsa.org/en/report/2021/05/12/the-6th-overview-of-housing-exclusion-in-europe-2021>.

Fraser, B., Pierse, N., Chisholm, E., and Cook, H. (2019) LGBTQ+ Homelessness: A Review of the Literature, *International Journal of Environmental Research and Public Health* 16(15) pp.2677.

Government Equalities Office (2018) *LGBT Action Plan* (London: Government Equalities Office). Available online at: <https://www.gov.uk/government/publications/lgbt-action-plan-2018-improving-the-lives-of-lesbian-gay-bisexual-and-transgender-people/lgbt-action-plan-2018-improving-the-lives-of-lesbian-gay-bisexual-and-transgender-people>.

Greenwood, M. and Olsson, S. (2016) *Fife LGBT Community Needs Assessment Report* (Edinburgh: LGBT Health and Wellbeing). Available online at: <http://www.lgbthealth.org.uk/wp-content/uploads/2016/03/Fife-LGBT-Community-Needs-Assessment-SUMMARY-REPORT-FINAL.pdf>.

Holloway, W. and Jefferson, T. (2000) *Doing Qualitative Research Differently: Free Association, Narrative and the Interview Method* (London: Sage).

Lawrence, M. and Taylor, Y. (2020) The UK Government LGBT Action Plan: Discourses of Progress, Enduring Stasis, and LGBTQI+ Lives 'Getting Better', *Critical Social Policy* 40(4) pp.586-607.

Matthews, P. and Poyner, C. (2017) *Homelessness Support for LGBT+ People* (Stirling: University of Stirling). Available at: <https://www.google.com/search?client=firefox-b-d&q=Matthews%2C+P.+and+Poyner%2C+C.+%282017%29+Homelessness+support+for+LGBT%2B+people>.

Matthews, P., Poyner, C., and Kjellgren, R. (2019) Lesbian, Gay, Bisexual, Transgender and Queer Experiences of Homelessness and Identity: Insecurity and Home(O)Normativity, *International Journal of Housing Policy* 19(2) pp.232-253.

Matthews, P. (2020) Debate: LGBTQ Rights in Public Services — A Battle Won?, *Public Money & Management* 40(6) pp.423-425.

May, T. (2011) *Connecting Self to Society: Belonging in a Changing World* (London: Palgrave Macmillan).

Moore, M. (2015) LGBT Populations in Studies of Urban Neighborhoods: Making the Invisible Visible, *City and Community* 14(3) pp.245-248.

Nolan, E. (2017) *LGBTIQ Homelessness. Homeless in Europe, Autumn Edition* (Brussels: European Federation of National Organisations Working with the Homeless (FEANTSA)).

Norris, M. and Quilty, A. (2020) Unreal, Unsheltered, Unseen, Unrecorded: The Multiple Invisibilities of LGBTQI+ Homeless Youth, *Critical Social Policy* 41(3) pp. 468-490.

Nowell, S., Norris, J., White, D., and Moules, N. (2017) Thematic Analysis: Striving to Meet the Trustworthiness Criteria, *International Journal of Qualitative Methods* 16 pp.1-13.

Nugent, B. (2021) *LGBT+ Experiences of Homelessness in Fife*. Available at: [https://www.frontlinefife.co.uk/site/assets/files/1027/lgbt\\_report\\_2021.pdf](https://www.frontlinefife.co.uk/site/assets/files/1027/lgbt_report_2021.pdf).

Ritosa, A., Shelton, J., Stakelum, R., Van Roozendaal, B., Hugendubel, K., and Dodd, S.J. (2021). *Perceptions: Comparative Findings from a Study of Homeless Service Providers and LGBTI-Focused Organisations About LGBTIQ Youth Homelessness in Europe* (FEANTSA, ILGA-Europe, True Colors United, and the Silberman Center for Sexuality and Gender at Hunter College).

Scottish Government (2020) *Ending Homelessness Together: Updated Action Plan – October 2020* (Edinburgh: Scottish Government).

Scottish Government (2018) *Ending Homelessness Together High Level Action Plan* (Edinburgh: Scottish Government). Available online: <https://www.gov.scot/publications/ending-homelessness-together-high-level-action-plan/>.

Shelton, J. (2017) *The True Colors Fund: Addressing LGBT Youth & Young Adult Homelessness in the United States, Homelessness in Europe* (Brussels: FEANTSA).

Teuton, J. (2018) *Social Isolation and Loneliness in Scotland: A Review of Prevalence and Trends* (Edinburgh: National Health Service Scotland).

Walker, R. (2014) *The Shame of Poverty* (Oxford: Oxford University Press).





---

# Peace Polls as a Source of Inspiration for Homelessness Research

---

Jan Váně<sup>1</sup> and František Kalvas

Department of Sociology, University of West Bohemia, Czech Republic

---

## Introduction

---

In the present study, we aim to acquaint the public with the results of the research on those experiencing homelessness in the city of Pilsen, which is the fourth largest city in the Czech Republic. The significance of our contribution is in the application of the methodological approach of the so-called Peace Polls used to address the issue of homelessness. This research note introduces the environment and situation in which the research was conducted. We also describe in great detail our research design, work progress, and findings.

A number of studies focusing on homelessness have been carried out in the Czech Republic over the last decade. Almost all of them concentrate on one specific city, comparing two at most. In principle, these studies are primarily focused on the largest cities in the Czech Republic, such as Prague, Brno, Ostrava, and Pilsen (cf. e.g. Vágnerová et al., 2018; Váně and Kalvas, 2021; Vašát, 2021), all of which have areas of homeless encampments. The most extensive quantitative research in the Czech Republic so far was carried out in 2019, conducted by Nešporová et al. (2019). It was a representative finding of the basic characteristics of the census categories for people experiencing homelessness, such as gender, age, place to sleep, and length of stay “without a roof” and without a home. The results of this survey show that there are 21 230 adults experiencing homelessness in the Czech Republic, as well as 2 600 homeless children, most of whom lived in shelters. This research did not factor in individuals accommodated in temporary commercial hostels and in residential facilities for refugees.

---

<sup>1</sup> Direct all correspondence to: Jan Váně (ORCID 0000-0002-5109-505X), Department of Sociology, Faculty of Philosophy and Arts, University of West Bohemia, Sedlackova 15, 306 14 Plzen, Czech Republic, email: vanejan@kss.zcu.cz.

The Czech Republic, with 10 million inhabitants, has approximately 21 000 people living on the streets. At first glance, this seems to be a rather small group, relative to the total population. However, sociological research estimates that 10% of the population live on the brink of income poverty. Additionally, throughout the nation, people experiencing homelessness represent the poorest relational class, which comprises *the vulnerable class and the 'in need' class*. Both social classes make up almost 40% of the Czech population. In principle, people experiencing homelessness are almost exclusively those working in unskilled jobs, such as factory workers or sales people. Education and the conditions under which this education takes place have the strongest influence on (un)successful life trajectories and the chances of maintaining/losing housing. Homelessness in the Czech Republic is principally associated with low levels of education (Prokop, 2019; Váně and Kalvas, 2021; Vašát, 2021).

In addition to this brief outline of the situation from which homelessness arises in the Czech Republic and the size of the homeless population, the fact that the Czech Republic has long been associated with the highest level of homelessness results in a stigma among European countries, which plays a key role in efforts to address their situation. For example, while in the Czech Republic almost 36% of respondents think that it is best not to help the homeless at all, in other European nations, this opinion is shared by only approximately 20% of the adult population (Vávra, 2013). These attitudes then influence both official proceedings and everyday interactions between those experiencing homelessness and the majority of society (Vašát, 2020). A clear example of this influence was the declaration of a state of emergency on 12 March 2020 in response to the spread of Covid-19 and the need to address the pandemic through Constitutional Act No. 110/1998 Coll. on the Security of the Czech Republic. The announcement set a number of restrictions, such as a ban on free movement and restrictions in public places, which directly affected all citizens, including those experiencing homelessness. In response to the declaration of a state of emergency, some Czech cities decided to set up temporary camps for their homeless populations. Despite the widespread stigma, the experiences throughout the camps varied, with different results in different cities. In the city of Pilsen, however, it was true that the implementation of the tent city only strengthened the public's negative reactions. Overall, there was an escalation of tension between city officials and the NGOs dealing with homelessness.

## Researching Homelessness: Peace Polls

---

In this strained climate, the City of Pilsen decided to turn to the Department of Sociology (University of West Bohemia) in Pilsen, or more specifically, to the authors of this research note, to prepare a project that would improve the situation. Previous research on homelessness in the Czech Republic used some qualitative (ethnography, interviews) or quantitative approaches (questionnaire—census, quota collection, etc.), but overlooked the important perspective of the public. The surveys were either focused on policy makers or those experiencing homelessness, and there was a lack of knowledge and support concerning public attitudes. Politicians do not typically want to make radical, if any, decisions when it comes to tackling the problems associated with homelessness, mostly with reference to the negative public attitudes towards those experiencing homelessness. Therefore, in preparation for our project, which resulted not only in hard data and findings, but also in the design of a solution concept, we were inspired by the research and conflict resolution that was presented and developed by Irwin (2012; 2020). Given the limits of the text, we will summarise the ideological basis of Peace polls, including: “(1) all parties to a conflict should draft and agree to all the questions, (2) all the communities and peoples to the conflict should be asked all the questions, and (3) all the results should be made public” (Irwin, 2020, p.4).

Peace polls is a useful tool for communication and the search for consensus between groups that do not otherwise communicate with each other, and therefore do not have a chance to find a consensus. Peace polls represent a comprehensive system that consists of a combination of public opinion research and public/mass communication. Opinion polls look at the problem in groups that do not communicate with each other, and who therefore have no chance of reaching a consensual solution. This research focuses both on the perception of the problem itself and on the preference for its solution by each of the affected groups, which is to participate in the process of finding a consensus. Furthermore, the research can be focused on the conditions in which individual groups live, and what difficulties the problem causes them.

However, research alone is not enough. The next necessary step is to publish it, so that all of the groups concerned may learn about the views, conditions, difficulties, and preferred solutions of all of the other groups. The method of publication must be subject to the nature of the problem and the groups concerned, e.g. the problem approached by Peace polls in our text – solving the problems of those experiencing homelessness – cannot just be published in the press and on the internet; these are tools that are sufficient for just two sides of the problem: the public and the

policy-makers. For those experiencing homelessness, we chose a public exhibition in the open air, near places where people experiencing homelessness often meet and congregate in the centre of Pilsen.

If the Peace polls do not identify an appropriate degree of agreement after the first iteration, it is advisable to repeat them. The next iterations therefore show how the opinions of the affected groups develop, depending on the published/communicated opinions of the other groups from the previous iterations. Peace polls therefore become a communication platform; a bridge that connects otherwise disconnected groups. The whole process of Peace polls ends at the point where the groups concerned agree, to a sufficient extent, on solutions to their common problem.

We framed the situation in the city of Pilsen utilising Irwin's Peace polls as reference to an ideological Belfast. There are irreconcilable opponents to offering any help to those experiencing homelessness, who are perceived and interpreted as 'spongers'. Conversely, there are those who approach the issue of homelessness with a strong messianic undertone, blaming the situation on the city representatives (structural impacts), calling for help to be offered without any conditions with reference to humanity and humanitarianism. We therefore established the following objectives:

- (a) Address the attitudes of the general public, because without the public and in spite of it, the situation will not be possible;
- (b) Address the attitudes of those experiencing homelessness as they are directly affected; and
- (c) Address the attitudes of policy makers<sup>2</sup>, because without them it will be impossible to improve the situation in the city.

The aim of the study was to find intersections between the groups concerned, establishing points of contact that would be acceptable for all the actors in some form, and would make it possible to change the homeless populations' situations so that all parties to the conflict were willing to participate in the agreement. In other words, we were looking for elements of (possible) co-existence, which all parties agree on, provided that there is an equal right to comment on the situation and the proposed solutions. The aim was to establish a dialogue between the parties in an environment of a stalemated, highly strained situation. We asked ourselves the following questions, which framed the research preparation process:

---

<sup>2</sup> This group includes both NGO staff and politicians, whose agendas include those experiencing homelessness in the city (representatives of the municipality—social policy department, safety department, housing department), mayors, and their authorised employees in individual districts of the city of Pilsen. Pilsen has 10 departments and a total of 170 000 inhabitants. The estimated number of people living on the street oscillates between 300-500 people (Váně and Kalvas, 2021).

- (a) Under what conditions would the majority of society be willing to reconsider, at least in part, its attitudes, and allow the situation of those experiencing homelessness to improve?
- (b) Under what conditions are those experiencing homelessness willing to reconsider, at least in part, their attitudes and participate in the rules conformed to by the majority society?

## **Research Field, Methodology, and Results**

---

Based on the preceding ideological parameters, we prepared the following research design, which took place from November 2020 to September 2021. In the first phase of the research (November 2020–April 2021), we conducted in-depth interviews with people experiencing homelessness, social workers for non-profit organisations, municipal staff, politicians, and police officials. In addition, there was a meta-analysis of documents—the current concepts of the city—and previously processed research. We conducted a total of 29 in-depth interviews with policy makers (politicians, experts—a total of 1 665 min). Furthermore, we conducted 15 interviews (635 min) with people living on the streets. This was followed by data analysis, for which we used thematic analysis. A total of 219 primary codes from 2846 coded segments were analysed. The topics that appeared in the interviews were as follows: education, competences, time on the street (or hostel), life trajectories, feelings, current situations, public access to people experiencing homelessness (and for the homeless, on the contrary, their relationship to the public), the role of the police, requirements, needs, solutions proposed by those experiencing homelessness, and obstacles. The most fundamental problems from the perspectives of the interviewees include: who should deal with the problem of homelessness in the city, detecting existing sources of help, the locations/places where homelessness occurs and the most popular places where those experiencing homelessness gather, reciprocal behavioural expectations (which applies to both the public/homeless populations), possible problems/silent assumptions, and experiences in the tent city during the Covid-19 pandemic.

In keeping with the principles of Peace polls, the knowledge we acquired was continuously published and presented to the public. We subsequently created three focus groups (FG). The selection criterion for the FG was to create one composed of opponents to helping the homeless, and one composed of people with an ambivalent or more positive approach to addressing homelessness. The findings of the in-depth interviews and the FG subsequently served as the basis for the

preparation of the survey. The most important aspect of the research was finding solutions. There were a little over 50 proposed solutions, and we will present several examples to illustrate the situation.

**Those experiencing homelessness** suggested the possibility of occupying unrepaired houses, participating in repairs, having a contract with the city, moving to a smaller city, setting up hostels in the city, increasing social housing, legalising the drug market, offering support through municipal jobs, and providing container housing that they could take care of and stay in.

**Politicians** mostly proposed, for example, a law banning residence after three offences, banning alcoholic drinks in public, introducing a law on home rights, increasing the capacity of social services, introducing a so-called wet house (an asylum for working with people on the streets who are dependent on alcohol), increasing non-governmental organisations due to mutual competition, increasing the city budget in favour of social services, introducing container houses and social hospitals, securing work (cleaning work), expanding shelters, controlling employment agencies, strengthening the city police (so-called “beat cops”), and taking a more proactive approach to the enforcement of public peace.

**Experts**, primarily social workers, proposed creating shelters with a low-threshold in combination with a day centre and site selection for a day centre, creating a women’s shelter and day centre, creating a soup kitchen using surplus food, establishing a wet house, actively implementing the Housing First concept, educating the general population to improve their understanding of the role of public space, ensuring hygiene is maintained in public spaces, controlling hostels, changing the framing of the problem (it is not a security matter, but a social issue), increasing the number of shelters/hostels, supporting the construction of social housing, increasing the amount of warm places for people without homes, providing street medicine, and forgiving part of the homeless populations’ debt effectively motivating efforts to actively reintegrate into mainstream society.

Based on continuous feedback from the homeless and public populations regarding the ongoing publication and presentation of our findings, and specifically based on the results of the public FG, we included in the questionnaire and survey nine solutions. As these solutions were based on the qualitative portion of the research, it seems likely that there was at least a degree of approval from respondents. These were the solutions:

**SOLUTION 1:** Low-threshold day centre—a place where people experiencing homelessness could go during the day, heat their food, sit, wash, or have a shower. The location would have a small library, but social workers would also be present and able to work with the homeless.

SOLUTION 2: Soup kitchen— people experiencing homelessness could go to a mobile kitchen for one hot meal a day, every day, and meals would be available during the winter (October 30<sup>th</sup> – March 30<sup>th</sup>).

SOLUTION 3: Shelter/overnight hostel—the city would set up and provide more shelters and hostels, where people experiencing homelessness could sleep for CZK 50 (approximately €2) per night.

SOLUTION 4: Wet House—an asylum house with intensive social therapeutic work leading to a reduction in alcohol consumption and a return to society and the labour market.

SOLUTION 5: Social housing—the city would significantly increase the number of flats intended for people experiencing homelessness or those at risk of losing their homes. They would pay the rent, be in regular contact with social workers, and maintain good relations with their neighbours.

SOLUTION 6: Container house—the city would provide people experiencing homelessness with container housing, which they would have to take care of, maintain, and repair.

SOLUTION 7: Free showers—the city would set up several free public showers where people experiencing homelessness could wash at any time, without having to report in advance and make an appointment.

SOLUTION 8: Low-threshold day centre for women—a place where women experiencing homelessness could go during the day, heat their food, sit to keep warm in the winter, wash or have a shower, etc.

SOLUTION 9: Alcohol-free zones—a space in a city where no one is allowed to drink any alcohol.

The survey consisted of two parts: a survey of both people experiencing homelessness and the public. We interviewed people experiencing homelessness in front of the food and clothing bank on Cukrovarská Street in Pilsen, on Wednesday June 2<sup>nd</sup> and Wednesday June 9<sup>th</sup>, 2021, the days when food and clothing are given to individuals in need. We chose this strategy to interact with those that depend on the help of institutions to support their diet and nutrition. Above all, their opinion on potential solutions was of interest to both us and the research sponsors. Another assumption was that those who rely on food aid live mainly on the streets and lack housing. This assumption was proven correct, as the results showed that 87.3% of the respondents lived on the streets. Only 12.7% declared in our survey that they live somewhere, even in uncertain conditions (in a hostel, with friends, etc.). We contacted all the individuals who came for food or clothes and offered them 100 CZK (approximately €4) for an interview and a reward. On both days, we contacted a total of 325 people, 43 rejected

us and 282 people were interviewed. We asked the sample of 282 about their demographic, street time, livelihood, work experience and interest in specific jobs, their physical and mental health, their experiences and relationships to drugs and alcohol, their relationships, and, above all, their views and interests in possible solutions to their situation and ways of helping from the public.

The public sample consisted of two parts: a representative sample of Pilsen citizens aged 18–65 years, constructed using an online panel (313 respondents), and face-to-face (F2F) interviews using four quota samples. These four quota samples were collected in the four largest districts of Pilsen and constructed using bound age and gender quotas. Respondents were interviewed personally with the help of trained interviewers (F2F) and are representative of each district, aged 18–80 (441 respondents). Public participation was not financially remunerated in any way. The two parts were finally combined and weighted into a single sample. Based on the district of their residence, age, and gender, each individual was assigned a weight. The total sample was representative of the inhabitants of Pilsen (resp. Municipal Districts 1–4) aged 18–80. In addition to residence and other demographic data, all respondents were asked about the type of housing they live in, their household financial situation, willingness to contribute to people experiencing homelessness, contact and experience with people experiencing homelessness, conditions of support for individual solutions to problems people experiencing homelessness face, preferences for these solutions, and finally, whether they are inclined to solve the obstacles that people experiencing homelessness face and thereby save, or deal with, the problem and allocate resources towards it.

The online aspect of the study was carried out by Nielsen adMosphere from June 15<sup>th</sup> to July 1<sup>st</sup>, 2021, using its own online panel of respondents to recruit even more respondents that were randomly selected so the resulting sample would be representative of the inhabitants of the city of Pilsen, aged 18–65 years. Other questions included in the questionnaire established whether the respondent lived in one of the four largest districts where solutions would be implemented, or whether they often travel around at least one of these districts. If the person did not move or stay in the perimeter often, they were excluded from the sample. In total, 313 people were sampled from the online panel.

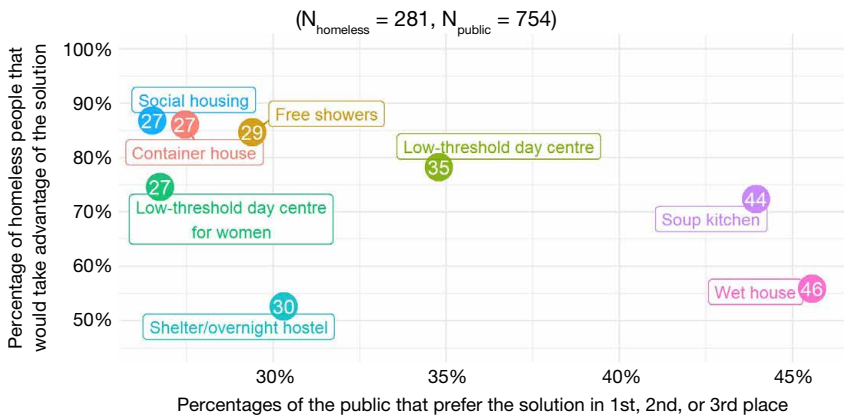
Personal interviews were conducted by our trained interviewers, mostly students from the Department of Sociology at the University of West Bohemia in Pilsen. The surveys took place from Tuesday, June 29<sup>th</sup>, to Thursday, July 1<sup>st</sup>, 2021 in the four largest districts of Pilsen. Interviewers contacted people on the street, moving smoothly through the districts to avoid possible spatial distortions. When selecting people, the interviewers adhered to the bound quotas according to age and sex, determined according to the population data from each district as of December



31<sup>st</sup>, 2020, so that at least 100 respondents were selected from each area. The resulting sample was representative of the relevant districts by age and sex for people aged 18-80. A total of 108, 109, 120, and 104 interviews were conducted in Municipal Districts No. 1–4. However, the interviews were not conducted exclusively with the inhabitants of the relevant city districts, but also with those who often move around the districts. The number of such interviewed inhabitants of individual Municipal Districts No. 1–4 was therefore 121, 111, 106, and 73; the population surveyed in this way from other districts (No. 5-10)<sup>3</sup> was 30. This aspect of the public survey thereby ensured sufficient and representative views of the relevant 441 respondents—people staying or often moving through districts where solutions to homelessness would be implemented.

The results and findings are represented in over 116 graphs, formed and based on the variables created during the questionnaire surveys. We will present our most important findings concerning the intersections and agreements in preferences for anticipated solutions on the part of the public and people experiencing homelessness.

**Figure 1. Solutions for homeless people, according to the percentages of the public that prefer the solution in 1st, 2nd, or 3rd place, and the percentage of homeless people that would take advantage of the solution**



Note: The solutions are listed on the labels.  
The white numbers refer to the percentages of the public, rounded to the nearest whole number.

<sup>3</sup> Pilsen has 10 Municipal Districts.

Respondents were asked about nine solutions, but in the last part of the battery, they were asked to determine which three solutions they preferred. As the public chose three solutions out of nine potential solutions (see their presentation above), the average solution support was about 33%. The ninth solution, 'an alcohol-free zone', is not shown in the graph.

From our perspective, we consider it most important that the 'wet house' and the soup kitchen have the highest public support, with more than half of the people experiencing homelessness declaring that they would use these solutions ('wet house' 55.9% and soup kitchen 72.4%). This finding is very significant. Sufficient public support meets here with sufficient interest from people experiencing homelessness. The fact that people experiencing homelessness show relatively little interest in these two solutions, which are a priority for the public, does not change anything—although it has almost the least interest, there is still enough interest among people experiencing homelessness, and it is suitably complemented by public support. We can say that Peace polls here find a point of agreement and a peaceful solution that one party sufficiently supports and the other party will make sufficient use of.

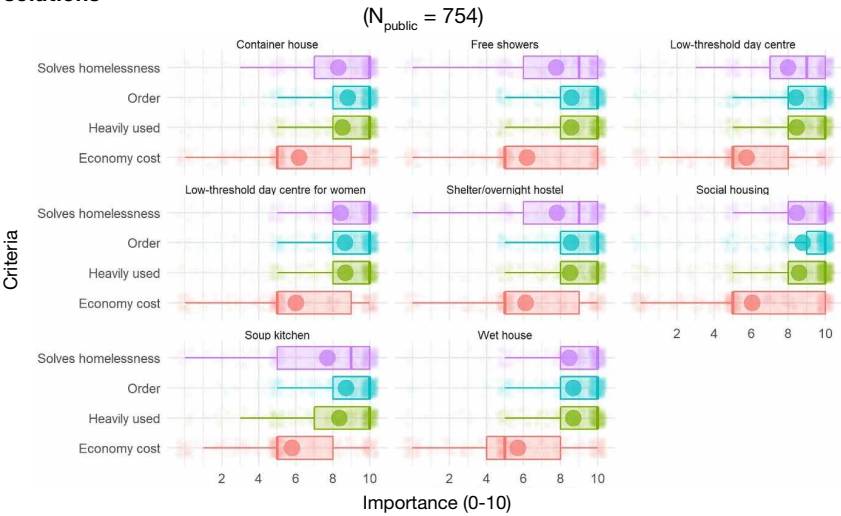
Another point of agreement concerns shelters/overnight hostels. Respondents experiencing homelessness indicated that shelters/overnight hostels were the solution they wanted to use the least, and the public offered the solution low levels of support. Both parties agree that they do not want shelters/overnight hostels, although we must not lose sight of the fact that it was still one of the nine profiled solutions taken from more than 50 proposals during the qualitative part of the research.

Furthermore, in the graph, we notice the trend of indirect proportionality: the higher the interest among people experiencing homelessness concerning the solution, the less public support it has; the higher the public support, the less interest there is among people experiencing homelessness. An exception to the trend is the shelter/overnight hostel option, which has low interest and low support. Social housing, container houses, and free public showers are solutions that would be used by approximately 85% of people experiencing homelessness, but only 27% or 29% of the public support them. Day centres (both general and for women-only) would be used by approximately 75% of the people for whom they are intended, but public support is average (35% for general) to below average (27% for women). We have already mentioned solutions with high public support and relatively little (but absolutely enough) interest from people experiencing homelessness. No systematic influence can be observed behind the trend of indirect proportionality between the interest in the solution and its support. We find both ends of this trend organisationally challenging, time-consuming, and financially demanding solutions (social housing [homeless: 86.8% / public: 26.5%])

versus ‘wet houses’ [homeless: 55.9% / public: 45.6%]), but also cheaper and less demanding solutions (showers [homeless: 84.7% / public: 29.4%] versus soup kitchens [homeless: 72.4% / public: 43.9%]).

The results and findings were repeatedly presented to the public and the groups concerned. As a supporting argument, we enclosed Graph No. 2 (see below), which shows that the public is very sensitive in its support of solutions. The financial side is only secondary, although still important. Public support is very much dependent on whether the solution really helps homeless people, whether the homeless will really use it, and whether the solution disturbs the order in which it is implemented (the average value on a scale of 0-10 was very close to the maximum).

**Figure 2. The importance of the selected criteria for supporting the selected solutions**



Note: Large dark circles represent averages, the boxes show distribution, and small, light circles show individual observations

## Conclusion

---

In addition to presenting the results to the public, which includes publication in the media, the research also included an educational exhibition focused on addressing public knowledge and prejudices against people experiencing homelessness. While conducting research, photo documentation was created, which was transformed into a large exhibition in a well-exposed location in the city centre.<sup>4</sup> Its aim was not only to visually represent fellow citizens who are experiencing homelessness, but also to redirect the exhibition visitors to a specially created website via QR codes on the panels. Through the website, they could become acquainted with more detailed information on homelessness, including key research results in the form of interactive graphs. The idea behind the exhibition was to present the three basic forms of homelessness (progression, regression, and cyclicity) and the causes of these processes. We believe that the approach we present here can inspire other researchers around the world, and that Peace polls achieve far more than simply public support. In our opinion, its significance lies in the following: Peace polls first appeared during the resolution of the tense situation in Northern Ireland in the 1990s. All of the cases so far have one thing in common – it is a conflict between two very strong groups that do not communicate with each other. However, we present here an application to the problem of people experiencing homelessness, where the public and policy-makers are undoubtedly a much stronger group than the people experiencing homelessness. Therefore, our text can be seen as an attempt to apply the proven method of Peace polls to the area of problems between groups whose power is very asymmetrically distributed. We show how it could be possible to apply Peace polls to problems where some of the groups concerned are forgotten, and either do not get a vote, or their voice is not heard.

---

<sup>4</sup> Homelessness in Pilsen – What do we see? What do we want to see? (bezdomovectvi.cz). The authors of the exhibition are Jan Váně, Nikol Kubátová, Jakub Václavů, and Petr Vašát. The title of the exhibition was “Homelessness. What do we see? What do we want to see?” and the exhibition space was in Šafaříkovy sady in the City of Pilsen, from 29.9 – 5.11.2021.

## ► References

- Irwin, C. (2012) *The People's Peace. 'Pax Populi, Pax Dei'. How Peace Polls are Democratizing the Peace Making Process* (Scott Valley, C.A: Create Space).
- Irwin, C. (2020) *The People's Peace 2<sup>nd</sup> Edition* (Scott Valley, C.A: Create Space).
- Nešporová, O., Holpuch, P., Janurová, K., and Kuchařová, V. (2019) Sčítání osob bez domova v České republice 2019. [Census of Homeless Persons in the Czech Republic 2019]. (Prague: VÚPSV, v. v. i. – Research report).
- Prokop, D. (2019) *Slepé skvrny. O Chudobě, vzdělávání, populismu a dalších výzvách české společnosti*. [Blind spots. About Poverty, Education, Populism, and Other Challenges of Czech Society]. (Brno: Host).
- Váně, J. and Kalvas, F. (2021) *Homelessness. Probes to Excluded Environments* (Pilsen: University of West Bohemia Press).
- Vašát, P. (2020) Making City-zbases: Homeless Places, Poverty Management, and Urban Change in Pilsen, Czechia, *Urban Geography* doi.org/10.1080/02723638.2020.1826752.
- Vašát, P. (2021) *Na jedné lodi. Globalizace a bezdomovectví v Českém městě* [All in the same boat. Globalization and homelessness in the Czech city]. (Prague: Academia).
- Vágnerová, M., Marek J., and Csémy, L. (2018) *Bezdomovectví ve středním věku: Příčiny, souvislosti a perspektivy* [Middle Aged Homelessness: Causes, Context, and Perspective]. (Prague: Karolinum).
- Vávra, M. (2013) Jak vnímáme lidi bez domova? Postoje, názory a aktivity veřejnosti [How Do We Perceive Homeless People? Attitudes, Opinions, and Activities of the Public], *FÓRUM Social Policies* 7(5) pp.13-20.



---

# Visual Research Methodologies for Homelessness: A Synthesis of the Literature

---

Quinn Tyminski, Vicky Hung, and Ronald Drummond

Washington University School of Medicine

➤ **Abstract** *Visual research methodologies have been utilised to provide depth and context to complex subjects that cannot be captured by words alone. The use of qualitative visual data can also serve as a means to empower participants to share their unique stories. Although researchers have begun to integrate visual research methodologies for a variety of marginalised populations, there is a lack of literature that discusses the use of this methodology specific to homeless populations. This literature review aims to examine the benefits and concerns of using visual research methodologies with individuals experiencing homelessness, as well as attempts to provide some guidelines for their use within this population. Utilising visual research methodologies requires a distinct focus on ethical and legal considerations to ensure data is not compromised by forced changes (e.g. blurring faces) or omitting data. Yet, the use of visual data among homeless populations could provide richer data to explain phenomena or understand lived experiences.*

➤ **Keywords** *visual research methodologies, homelessness, Photovoice*

## Introduction

---

An increasing number of researchers have chosen to utilise visual research methodologies to describe phenomena across a wide range of subjects and contexts. Visual research methodologies can be described as qualitative research methodologies that implement the use of photograph, film, video, and art, to explore and/or understand experiences (Glaw et al., 2017). More explicitly, visual research methods are defined as “systematic ways in which visual materials are gathered or

generated and worked with to understand, explain, or express phenomena – a process that is in constant development” (Asaba et al., 2014, p.155). In the past several decades, the literature has seen a boom in the use of these methodologies with particular emphasis being paid to visual methodologies in the concentrations of social science, healthcare, and psychology (Pain, 2012). See Table 1 below for explanation of several visual methodologies.

Type of Visual Methodology	Uses
Photo-elicitation interviewing	Data collection technique to create a comfortable space for discussion (Epstein et al., 2006). Self-expression of perceptions, values, and meaning related to interview questions (Bigante, 2010).
Visual ethnography	Study cultural contexts and ideations (Barrantes-Elizondo, 2019). Reflection of memories or experiences difficult to articulate (Harris and Guillemin, 2012).
Participant driven photography/ Photovoice	Health promotion by examining daily routines (Nykiforuk et al., 2011). Enhance community engagement, expand community resources, and improve self-efficacy (Israel et al., 2010). Develop sense of community/social support (Budig, 2018).
Visual mapping	Defining relationships and connecting ideas (Mammen and Mammen, 2018). Analyse data to create themes (Burgess-Allen and Owen-Smith, 2010).
Art (calligraphy, clay modelling, doll-making, drawing)	Providing psychological insight into life experiences (Huss et al., 2013). Promoting awareness about personal, community, and societal barriers (Huss et al., 2012).
Film making	Promoting advocacy efforts (Baumann et al., 2020). Providing insight into novel health practices (Baumann et al., 2020).

In conjunction with the recent uptick in usage of visual research methodologies, several articles have explored the benefits and concerns related to the use of these methodologies. Yet, few of these articles focus explicitly on the use of visual methodologies within marginalised populations or explore the use of such research methods within a population experiencing homelessness, specifically. Thus, this research aims to provide an overview of the current literature available regarding the use of visual research methodologies (Photovoice, mapping, textual analysis of visual media, etc.) and their use within a population experiencing homelessness, including barriers and facilitators to the use of these tools.



## Existing Use of Visual Research Methodologies in Researching Homelessness

---

At present, several publications have utilised various visual research methodologies to explore the experience of homelessness. Johnsen et al. (2008) argue that auto-photography complements other, more traditional, research methodologies in providing a deeper understanding of how individuals experiencing homelessness (IEH) utilise public spaces. Seventeen homeless individuals in England were interviewed in-depth about their personal histories, asked to take photos of the places they utilised in their everyday lives or that were important to them, and interviewed after the auto-photography exercise to discuss the photos that were taken (Johnsen et al., 2008). Most of the photos depicted spaces that participants use for everyday activities (e.g. sleeping, eating, earning money), making clear that the needs of IEH were very similar to those of the housed social majority. Furthermore, photos taken by IEH were able to challenge stereotypes typically associated with homelessness, illuminating similarities between IEH and the housed public. Alternatively, participants were able to demonstrate what they view as the key differences between themselves and the housed public, such as the unique conditions in which they sleep. The photos taken by IEH provided insights into aspects of their lives that are otherwise rarely discussed or not well-understood.

In another study, Padgett et al. (2013) utilised photo elicitation interviewing (PEI) with formerly homeless individuals also experiencing serious mental illness. In PEI, participants are asked to take photos and discuss the meaning behind the photos in one-on-one interviews. This methodology differs from Photovoice as PEI is more individualised, allowing participants to feel more comfortable sharing personal or sensitive information. In the study by Padgett et al. (2013), participants first engaged in a verbal-only baseline interview. They were then asked to take photos that depicted both positive and negative aspects of their lives, and interviewed based on those photos. Using PEI, researchers were able to compare the information they obtained through the verbal-only interview with the PEI interview, and found that the PEI interviews led to more elaborate and comprehensive discussions. The photos allowed participants to have control over what they wanted to capture, and to show information that was not mentioned during the verbal-only interviews. Stories and experiences that individuals were reluctant to talk about during the verbal-only interviews were captured in the photos taken during the PEI process, and were able to be drawn on in the post-interviews. In addition, participants saw PEI as a form of therapy, and as a way for them to connect with people and places that were important to them. Taking the photos also gave these participants an activity to occupy their time and allowed them to reflect on their lives.

When discussing visual methodologies, representation of IEH in photographs, movies, and videos is an important consideration. Schmidt (2015) argues that the way in which IEH are portrayed in the media creates a powerful and fixed lens through which IEH are seen by the public. Photographers often do not capture the truth; instead, they capture their own perspectives, which happens to be the perspective of the social majority. As a result, the same photos with the same perspectives are produced over and over again. For example, one genre of photography is social documentary photography, which focuses on depicting homelessness in a wider societal context. Common themes that are present in social documentary photography include IEH sleeping or begging in public, cardboard homes, and living in tents. While these photographs claim to depict the everyday lives of IEH, they instead reinforce and perpetuate negative stereotypes associated with homelessness and are portray the entire IEH population as the 'other', in opposition to the housed social majority.

Schmitt (2015) offers two examples of this phenomenon. The first example, created by a local newspaper in Berlin, attempted to decrease stigma associated with IEH. The project consisted of portrait photographs of IEH presented in public exhibitions in railway stations. Despite the intended goal of the project, there were many underlying problems including:

- the environment of the photoshoot (a makeshift railway station) further perpetuating negative associations with homelessness,
- the associated discourse surrounding the images using words and phrases that clearly separated IEH from the housed social majority (i.e. "the invisible among ourselves")
- the exhibitions themselves in the railway stations were made invisible, and
- the power imbalances between the participants and the photographer with the photographer and the journalists engaging in all the media attention.

Schmidt (2015) presents an alternative example through a study in which IEH were involved in reflexive photography, where IEH were engaged in taking the photos, followed by conversations about the photos. This study found that reflexive photography by the IEH allowed for a perspective that is different from that of the housed social majority. These photos revealed the contrast between the stereotypes of IEH imposed upon them by the public, and the actual intentions of the IEH. Thus, it become apparent that varieties of visual research methodologies exist to explore the experience of homelessness. Yet, all methodologies should be used with caution and full acknowledgement of the facilitators and barriers of each tool.

## Facilitators of Visual Research Methodologies: The Case of Photovoice

---

Visual research methodologies present a unique opportunity for researchers to explore phenomenon with greater depth and nuance leading to increased understanding of subject matter. Some visual research methodologies including the use of ethnographic video and photo place the researcher on the outside of the experience, as an observer of the participants and phenomenon. While other methodologies can be categorised as participatory visual methodologies (e.g. Photovoice), involving the subjects and researcher in the study. Regardless, the purpose of visual research methodologies can be considered to either tell a story, elicit a story, or as a story itself (van den Scott, 2018). The use of photos or other visual methods adds richness to understanding and often clarify muddy concepts.

One currently trending visual methodology is Photovoice, which involves participant-driven photography, followed by discussions and interviews regarding the photos. Photovoice was initially developed in the 1990s with the aim to provide a qualitative methodology to conduct research in marginalised populations. Validated in a variety of populations, including women living in rural China (Wang et al., 1996), sex workers (Desyllas, 2013), youth experiencing homelessness (Bender et al., 2017), and individuals with mental illness (Creighton et al., 2018), Photovoice is a visual methodology with the goal to empower communities to share their stories with others to create change (Wang and Burris, 1997). Photovoice has been touted as a research methodology that can create accessibility for all individuals within the research process both as interested participants and as consumers of research, due to the photographic nature of the data (Golden, 2020). Thus, Photovoice has been utilised to provide data on a variety of research questions across disciplines within the homeless population (Bukowski and Buetow, 2011; Cheezum et al., 2019; Moya et al., 2017; Pruitt et al., 2018).

There are many reasons as to why visual research methodologies are a good fit in conducting research with vulnerable populations, and specifically with IEH. One such reason is that visual research methodologies reduce the risk of re-traumatising individuals who have past experiences with trauma due to the increased autonomy provided through some visual research methods. For example, one study that used auto-driven photo elicitation methods to study experiences of homeless women found that giving the women the ability to make choices about the content of the photos allowed them to participate in research in ways where they would not have to relive traumatic experiences they had previously faced in their lives (Phipps et al., 2020). Another reason why visual research methodologies are effective in research with vulnerable populations is that they leave participants with feelings of enhanced self-confidence, self-efficacy, peer status, quality of life, and persistence

to achieve their goals (Wang et al., 2000; Bender et al., 2017). Furthermore, visual research methods engage consumers in research, taking an often lofty and cerebral concept and making it easily accessible in nature. The ability for IEH to share their photos or videos with the public allows them to raise awareness of homelessness, educate the public on homelessness, and advocate for themselves (Wang et al., 2000; Bender et al., 2017; Rodriguez et al., 2019). In turn, the public is given the opportunity to learn about the lives of these individuals, consider issues surrounding homelessness from the perspectives of IEH, develop deeper empathy for the adverse experiences of the homeless population, and self-reflect on their own privilege (Wang et al., 2000; Bender et al., 2017).

Research regarding the use of participatory visual methodologies has demonstrated the ability to reduce stigma in marginalised populations. For example, Bender et al. (2017) conducted a study in which Photovoice was used as an intervention method with homeless youth. The participants documented their lives, openly discussed with researchers and completed journal entries regarding their experiences, and shared the photos with the community in a public exhibit. Through this process, the homeless youth reported feeling like they were a part of a larger community, and realising that they were not alone, and felt the exercise helped them address much of the shame they felt from being homeless. Another study that utilised Photovoice to explore the experiences of homeless youth who identify as Lesbian, Gay, Bi-sexual, Trans, Queer, etc. (LGBTQ+) found that the methodology provided a unique and creative way for the participants to push back against the stigma they faced based on their identities as homeless and LGBTQ+ (Forge et al., 2018).

For visual research methodologies focused on engaging research participants, the use of narratives can provide a unique insight into the individual's daily life, specifically the daily activities, environments, people, and/or customs they find most meaningful. For example, one study that used Photovoice with IEH living in Taipei found that the photos taken by the participants focused on things that mattered to them and that brought joy and satisfaction to their lives, such as food and their companions (Cheng, 2021). The same study found that the open-ended nature of photos allowed for further explorations of the topics during the discussion phase of Photovoice, through which more information about the participants' lives were able to be drawn out. Visual research methodologies that engage participants in the research process can be utilised by service providers as form of assessment or intervention within their clinical practice. Disciplines such as case management, social work, occupational therapy, and psychology may choose to utilise such participatory visual research methodologies as a means to encourage participant self-discovery and promote cognitive and psychological processing through critical reflection (Brown and Egan, 2019). As an assessment measure, participatory visual methodologies provide an opportunity for a researcher to gain qualitative data on

an entire population or community, while simultaneously exploring the specific experiences of each participant. Further, the use of visuals as a means to express the topic allows for better understanding of the lived experiences of participants, that individuals may find difficult to express through clinical assessment or verbalisation (Brown and Egan, 2019). Participants who create visual data elicit knowledge of their daily lives into qualitative data that may have remained unveiled through quantitative research methods such as surveys (Guillemin, 2004). Creating visual data through participatory visual methodologies also benefits participants with low literacy skills, as they are able to express their thoughts as opposed to answering questions on traditional data collection methodologies (Jurkowski, 2008).

It is clear that there are many benefits associated with conducting research with IEH using visual research methodologies. Yet, visual research methodologies, including Photovoice, carry limitations and should be used carefully in practice.

## **Concerns with Visual Research Methodologies**

---

Researchers have raised ethical concerns regarding visual research methodologies, including concerns over privacy of participants and those in participant photos/videos, capturing of illegal activities and concerns with appropriate interpretation of visuals. When collecting any data, researchers are held to ethical and legal standards enforced by Institutional Review Boards, grant agencies, or other private/public institutions. However, the use of visual data collection methods (e.g. photographs and videos) that are not intending to be destroyed, but rather are themselves the data, results in a myriad of limitations. First, when using photographic methods, like Photovoice, in which participants are asked to collect visual data, there is a concern of privacy for those who may appear in the pictures or video. While participants may have signed a print release for their likeness to appear, subjects in their photos may not have had this opportunity. Thus, researchers desiring to use strong visual data, which depicts non-consenting individuals, are forced to pixelate or blur faces to preserve anonymity, resulting in a loss of some of the meaning attached to the visual research data (Wiles et al., 2008). This creates a barrier by putting focus on the altered portion of the photo and decreasing the empowerment that the photo possesses. Oftentimes, facial expressions are used to depict the meaning and overall attitude of a photo, which can create a negative connotation for the visualisation when it is blurred (Woodgate et al., 2017).

Another limitation of visual data comes in the form of the subject of the visuals. Due to ethical and legal concerns, limitations are often placed on what is acceptable to be depicted in photos. Due to the nature of visual research methodologies as a means to tell stories that may be difficult to explain or verbalise, many researchers

aim to use these methodologies with marginalised populations or to answer research questions that are not easily observed through other qualitative means. Often, these studies result in images that may depict 'illegal' activities, such as substance use, sex work, or violence (Woodgate et al., 2017). The presentation of 'illegal' activities within the data must be handled carefully by the researcher, ensuring the proper consent was obtained, use of the visuals was appropriately explained to the subject prior to engagement in the study, and that all measures are taken to protect the anonymity of those in the visuals. In addition, the use of visual data has the potential to create, rather than reduce, stigma of certain populations (Copes, 2020). In a series of studies examining methamphetamine use in rural America, Copes et al. (2019) note that the use of photographs told a story that words alone could not, and publishing photographs in his final manuscript allowed the reader to take the subject matter from abstract to concrete. Yet, the research team reported getting push back from other academics who questioned issues of participant's ability to consent, as well as, the research team's motives and sense of empathy toward the population. In response to these comments, Copes et al. (2019) writes, "By properly contextualizing the photographs included in our research, we hope to minimize the ability to misrepresent these images and to depict the 'truth' as revealed by our data and analysis" (p.14).

One option for ensuring proper contextualisation of visual data can include feedback from subjects on the researcher's conclusions. Yet, too often materials and data are under-analysed because the interpretation of the data is determined by the researcher(s) or author(s) without subject or participant input (Mannay, 2010). Even in the event that researchers should include subjects in the final data analysis, some exceptions may still result in incomplete pictures of the data. Participants may be unable to be located to provide their opinion on the analysis or may struggle to understand what is being asked. For example, participants who have impaired cognitive function may have difficulty understanding the study or producing appropriate visual data (Jurkowski, 2008). And in studies involving IEH, researchers were often not able to recover cameras they had passed out to participants due to the transient nature of this population (Packard, 2008). Furthermore, participants may produce visual data that has no symbolic value to the audience as the meaning is dependent based on the photographers' interpretations (Nykiforuk, 2011). Thus, the researcher may be left to interpret visual data on their own, relying on their own positionality and critical reflexivity of the subject matter.

As with all research methods, qualitative and quantitative, the positionality and critical reflexivity of the researcher is an essential component of the study affecting the data in a variety of means. At present, it is common for researchers to define their positionality related to the subject within their accompanying manuscript. Yet, a simple statement of positionality may not provide enough information for readers

and can serve as a disservice to the research. Rather, the act of critical reflexivity, defined as “the process of exploring the ways in which researchers and their subjectivities affect what is and can be designed, gathered, interpreted, analyzed and reported in an investigation” (Gemignani, 2016, p.185) may be of greater importance than simply the positionality of the researcher. Thus, understanding the researcher and subjects influence over the results must move beyond a statement to an active experience of navigating the complex social and cultural experiences of all involved and the resulting effect on the data.

Moreover, the success of using visual research methodologies with IEH may be dependent on the structure of a study. Packard (2008) conducted a photo-elicitation study with IEH, where the researcher handed out disposable cameras to participants and asked them whether they knew how to use the cameras. While most participants were quick to express that they knew how to use the camera, when the cameras were recovered, the researcher found that most photos were unusable due to fingers blocking the lens, blurry photos, and photos that were too dark to see any content. On the other hand, Wang et al. (2000) conducted a Photovoice study with men and women living in homeless shelters where participants first attended workshops on proper camera usage before going out and taking pictures. This study turned out vastly different from the previous study, and both the participants and the researchers found great value from having been a part of this study. As a result, the knowledge of the participants must be taken into account before using visual research methodologies in order to obtain usable data.

Finally, for visual research methodologies that focus on empowerment of populations and communities, the promise of systemic change with little results can be viewed as an ethical limitation (Golden, 2020). The use of empowering visual methodologies, such as Photovoice, can be inherently problematic. When researchers promote their position as one who can enable empowerment for participants, there is an assumption that the population is powerless without the researcher intervention. Instead, researchers must recognise the current ways and ways their study may lead to empowerment without an assumption of such ability. In addition, researchers must be transparent and honest about their ability to create large-scale change from a single or series of studies.

## **Recommendations for the Use of Visual Research Methodologies in Researching Homelessness**

---

In this research note, we have presented both the benefits and concerns of the use of visual research methodologies. Visual research methodologies have the potential to depict phenomenon with greater depth, ground knowledge in concrete understanding, and can provide a voice to marginalised populations. Yet, ethical and legal limitations for visual methodologies exists which could serve to cause harm to the populations being studied. Issues of legal representation in photographs, ethical data analysis, and transparency surrounding change lead to the use of caution when employing these methodologies.

Specifically with a population of IEH, the use of visual research methodologies may be a powerful tool in understanding the unique culture, society, and experiences of this group. Based on the benefits and limitations of such methodologies, we propose the following suggestions for completing research using visual methodologies in a population of IEH:

- When determining which visual research methodology to use, it is essential to acknowledge the cognitive capacity and literacy level of the participants. Capacity of the participants has the potential to influence the outcome of research; particularly when asking participants to capture images which convey meaning or assign meaning to images.
- Another consideration for use of all methodologies within the homeless population is the transient nature of the population, including visual methodologies that may result in multiple contact points with participants over time. Researchers must consider options to locate and meet participants for multi-stage research. Available resources and transportation should be explicitly considered for participants, including having researchers meet participants where they are rather than requiring participants to travel to a specific site.
- Researchers must clearly outline the ethics of using visual research methodology with participants by delineating appropriate visuals and items that may render images unusable. It may be helpful to provide some examples of the desired visual data to prevent poor quality photos, blurred photos, and photos that violate ethical considerations. Further, practice with using visual capturing tools (e.g. cameras, phones, recorders, etc.) may be beneficial for clients experiencing the use of these items as novel.



- Visual research methodologies can create an intimate experience for participants and researchers by allowing researchers to glimpse private moments of individual's lives. Researchers should strive to building rapport with participants at the beginning of and throughout the process to make participants feel comfortable exposing the private details of their lives.
- Another way to add to the participant comfort level is to ensure to discuss the purposes and intended use of visuals created during the research with participants. Researchers should provide transparency about how the project can both result in their images being used for advocacy efforts (e.g. social media accounts, art exhibits, etc.) and being presented in academic texts. Participants may also feel more reassured by having some amount of approval over the final images, any generated captions, and their intended use.
- When using methodologies that focus on empowerment and social change for marginalised populations, it is essential to allow participants to describe their experiences in their own words and generate captions for what is depicted in the visual data. This participatory experience can allow the researcher to capture fully the meaning of the data collected. It may also be necessary to ensure a plan is in place to capture the meaning of images that contain ethical concerns without implicating participants or violating institutional review policies.

Visual research methodologies in marginalised populations can serve to be both a means and an ends to empowerment. The act of engaging in research that utilises visuals can feel inherently empowering for IEH. Many IEH report a distinct desire to give back to their community and support others with similar experiences (Barker and Maguire, 2017). Thus, the act of engaging in research that is designed to create change for the future can feel like a meaningful way for IEH to contribute to the future of their experience. In addition, literature demonstrates that IEH experience high levels of boredom and engagement in activities that individuals find meaningful can increase overall mental health and wellbeing (Marshall et al., 2019). Therefore, while the use of visual methodologies is often only considered in terms of benefits to the researcher or the population, engagement in participatory research methodologies may also benefit the individuals engaged in the research while they actively participate.

Visual research methodologies can be utilised in marginalised populations to better understand the daily life experiences. While research has attempted to understand the daily life of IEH, engagement in participatory visual methodology could elaborate the activities they are participating in. Tyminski et al. (2020) concluded that those who do not experience homelessness engage in similar activities as IEH such as finding or using drugs, dealing with legal issues, and seeking resources. Although the study found all participants engaging in the same activities, the ways in which

they engaged in the activities differed. By using participatory visual methodologies, research can expand on how IEH engage in certain activities. Literature on homeless populations suggest that prolonged experiences of homelessness and substance use can impact cognition, which may adversely affect how IEH communicate or explain aspects of their lives (Schutt et al., 2007). Visual research methodologies, such as Photovoice, could add context to how IEH report during interview and survey questions.

## Conclusion

---

Visual research methodologies can be an important tool for exploring the unique experience of homelessness, particularly for those who do not have the cognitive capacity or literacy skills. For marginalised populations, it can be difficult to understand and recognise the barriers they experience in their daily lives, especially when it may not be easily portrayed with words. Using visual research methodologies provides depth to qualitative data collected in traditional methodologies (e.g. surveys, interviews, focus groups) and can enrich the discussions. Furthermore, visual research methodologies give participants autonomy to be creative in expressing their lived experiences in addition to an otherwise traditional verbal expression. Visual methodologies are particularly advantageous to participants who have a difficult time with cognitive function and literacy because they can conceptualise their experiences within their own means to do so.

Visual research methodology can create a wealth of qualitative data to benefit results; however, the ethical and legal considerations must be addressed to ensure retainable data can be created without disruption. It is essential to file the proper consent forms and follow ethical guidelines in visual research to prevent unusable content after collection has concluded. The communication and understanding between researchers and participants must be clear, which might be difficult when working with varying levels of cognitive function. Participants may need to develop on-going check-ins to determine if the data being collected follows the proper guidelines. Additionally, researchers must be able to acknowledge the limitations of participants to facilitate meaningful and valid data. The benefits of visual research methodologies allows participants to share life experiences that may be too difficult to do so using traditional means and the results can change how we study and understand daily living.

## ► References

- Asaba, E., Laliberte Rudman, D., and Mondaca, M. (2014) Visual Methodologies: Photovoice in Focus, in: S. Naya and M. Stanley (Eds.) *Qualitative Research Methodologies for Occupational Science and Therapy* pp, 155-174. (Thorofare, NJ: Routledge).
- Barker, S.L. and Maguire, N. (2017) Expert by Experience: Peer Support and its Use with the Homeless, *Community Mental Health Journal* 53(5) pp.598-612.
- Barrantes-Elizondo, L. (2019) Creating Space for Visual Ethnography in Educational Research, *Revista Electronica Educare* 23(2) pp.361-375.
- Baumann, S.E., Lhaki, P., and Burke, J.G. (2020) Collaborative Filmmaking: A Participatory, Visual Research Method, *Qualitative Health Research* 30(14) pp.2248-2264.
- Bender, K., Barman-Adhikari, A., DeChants, J., Haffejee, B., Anyon, Y., Begun, S., Portillo, A., and Dunn, K. (2017) Asking for Change: Feasibility, Acceptability, and Preliminary Outcomes of a Manualized Photovoice Intervention with Youth Experiencing Homelessness, *Children and Youth Services Review* 81 pp.379-389.
- Bigante, E. (2010) The Use of Photo-Elicitation in Field Research November 2010. Accessed from: <http://echogeo.revues.org/11622>.
- Brown, C. and Egan, B.E. (2019) Introduction to the Person, in C. Brown, V.C. Stoffel, and J.P. Munoz (Eds.) *Occupational Therapy in Mental Health: A Vision for Participation*, 2<sup>nd</sup> ed., pp.85-95. (Philadelphia, PA: F.A. Davis).
- Budig, K., Diez, J., Conde, P., Sastre, M., Hernan, M., and Franco, M. (2018) Photovoice and Empowerment: Evaluating the Transformative Potential of a Participatory Action Research Project, *BMC Public Health* 18(432) pp.739-746.
- Bukowski, K. and Buetow, S. (2011) Making the Invisible Visible: A Photovoice Exploration of Homeless Women's Health and Lives in Central Auckland, *Social Science & Medicine* 72(5) pp.739-746.
- Burgess-Allen, J. and Owen-Smith, V. (2010) Using Mind Mapping Techniques for Rapid Qualitative Data Analysis in Public Participation Processes, *Health Expectations* 13(4) pp.406-415.
- Cheezum, R.R., Rosso, M.T., Niewolak, N., and Cobb, T. (2019) Using Photovoice to Understand Health Determinants of Formerly Homeless Individuals Living in Permanent Housing in Detroit, *Qualitative Health Research* 29(7) pp.1043-1055.

Cheng, Y. (2021) Sleepless in Taipei: The Application of Photovoice Method to Explore the Major Challenges Perceived by Homeless People Facing Multifaceted Social Exclusion, *Critical Social Policy* 41(4) pp.606-627.

Copes, H. (2020) Visual Criminology with...Qualitative...Criminology, *Journal of Qualitative Criminal Justice & Criminology*.

Copes, H., Tchoula, W., and Ragland, J. (2019) Ethically Representing Drug Use: Photographs and Ethnographic Research with People Who Use Methamphetamine, *Journal of Qualitative Criminal Justice and Criminology* 8(1) pp.21-36.

Creighton, G., Oliffe, J.L., Ferlatte, O., Bottorff, J., Broom, A., and Jenkins, E.K. (2017) Photovoice Ethics: Critical Reflections from Men's Mental Health Research, *Qualitative Health Research* 28(3) pp.446-455.

Desyllas, M.C. (2013) Using Photovoice with Sex Workers: The Power of Art, Agency, and Resistance, *Qualitative Social Work* 13(4) pp.477-501.

Epstein, I., Stevens, B., McKeever, P., and Baruchel, S. (2006) Photo Elicitation Interview (PEI): Using Photos to Elicit Children's Perspectives, *International Journal of Qualitative Methods* 5(3) pp.1-11.

Forge, N., Lewinson, T., Garner, B.M., Braxton, C., Greenwald, L., and Maley, O. (2018) "Humbling Experiences": A Photovoice Project with Sexual and Gender-Expansive Youth Experiencing Homelessness, *Journal of Community Psychology* 46(6) pp.806-822.

Glaw, X., Inder, K., Kable, A., and Hazelton, M. (2017) Visual Methodologies in Qualitative Research: Autophotography and Photo Elicitation Applied to Mental Health Research, *International Journal of Qualitative Methods* 16 pp.1-8.

Gemignani, M. (2016) Toward a Critical Reflexivity in Qualitative Inquiry: Relational and Posthumanist Reflections on Realism, Researcher's Centrality, and Representationalism in Reflexivity, *Qualitative Psychology* 4(2) pp.185-198.

Golden, T. (2020) Reframing Photovoice: Building on the Method to Develop More Equitable and Responsive Research Practices, *Qualitative Health Research* 30(6) pp.960-972.

Guillemin, M. (2004) Understanding Illness: Using Drawings as a Research Method, *Qualitative Health Research* 14(2) pp.272-289.

Harris, A. and Guillemin, M. (2012) Developing Sensory Awareness in Qualitative Interviewing: A Portal into the Otherwise Unexplored, *Qualitative Health Research* 22(5) pp.689-699.

Huss, E., Kaufman, R., and Siboni, A. (2013) Children's Drawings and Social Change: Food Insecurity and Hunger Among Israeli Bedouin Children, *British Journal of Social Work* 44(7) pp.1857-1878.

Israel, B.A., Coombe, C.M., Cheezum, R.R., Schulz, A.J., McGranaghan, R.J., Lichtenstein, R., Reyes, A.G., Clement, J., and Burris, A. (2010) Community-Based Participatory Research: A Capacity-Building Approach for Policy Advocacy Aimed at Eliminating Health Disparities, *American Journal of Public Health* 100(11) pp.2094-2102.

Johnsen, S., May, J., and Cloke, P. (2008). Imag (in) ing 'Homeless Places': Using Auto-Photography to (Re) Examine the Geographies of Homelessness, *Area* 40(2) pp.194-207.

Jurkowski, J.M. (2008) Photovoice as Participatory Action Research Tool for Engaging People with Intellectual Disabilities in Research and Program Development, *Intellectual and Developmental Disabilities* 46(1) pp.1-11.

Mammen, J.R. and Mammen, C.R. (2018) Beyond Concept Analysis: Uses of Mind Mapping Software for Visual Representation, Management, and Analysis of Diverse Digital Data, *Research in Nursing & Health* 41(6) pp.583-592.

Mannay, D. (2010) Making the Familiar Strange: Can Visual Research Methods Render the Familiar Setting More Perceptible?, *Qualitative Research* 10(1) pp.91-111.

Marshall, C.A., Davidson, L., Li, A., Gewurtz, R., Roy, L., Barbic, S., Kirsh, B., and Lysaght, R. (2019) Boredom and Meaningful Activity in Adults Experiencing Homelessness: A Mixed-Methods Study, *Canadian Journal of Occupational Therapy* 86(5) pp.357-370.

Moya, E.M., Chavez-Baray, S.M., Loweree, J., Mattera, B., and Martinez, N. (2017) Adults Experiencing Homelessness in the US–Mexico Border Region: A Photovoice Project, *Frontiers in Public Health* 5 pp.1-12.

Nykiforuk, C.I., Vallianatos, H., and Nieuwendyk, L.M. (2011) Photovoice as a Method for Revealing Community Perceptions of the Built and Social Environment, *International Journal of Qualitative Methods* 10(2) pp.103-124.

Packard, J. (2008) "I'm Gonna Show You What It's Really Like Out Here": The Power and Limitation of Participatory Visual Methods, *Visual Studies* 23(1) pp.63-77.

Pain, H. (2012) A Literature Review to Evaluate the Choice and Use of Visual Methods, *The International Journal of Qualitative Methods* 11(4) pp.303-319.

- Padgett, D.K., Smith, B.T., Derejko, K.S., Henwood, B.F., and Tiderington, E. (2013) A Picture Is Worth...? Photo Elicitation Interviewing With Formerly Homeless Adults, *Qualitative Health Research* 23(11) pp.1435-1444.
- Phipps, M., Dalton, L., Maxwell, H., and Cleary, M. (2020) Combining Self-Determination Theory and Photo Elicitation to Understand the Experiences of Homeless Women, *Issues in Mental Health Nursing* 42(2) pp.164-171.
- Pruitt, A.S., Barile, J.P., Ogawa, T.Y., Peralta, N., Bugg, R., Lau, J., Lamberton, T., Hall, C., and Mori, V. (2018) Housing First and Photovoice: Transforming Lives, Communities, and Systems, *American Journal of Community Psychology* 61(1-2) pp.104-117.
- Rodriguez, K.L., Broyles, L.M., Mitchell, M.A., Wieland, M.E., and True, G. (2019) "Build a Bridge So You Can Cross It:" A Photo-Elicitation Study of Health and Wellness Among Homeless and Marginally Housed Veterans, *The Qualitative Report* 24(2) pp.371-394.
- Schmidt, K. (2015) Seeing the 'Homeless City'? Some Critical Remarks on the Visual Production of Homelessness Through Photography, *European Journal of Homelessness* 9(2) pp.283-303.
- Schutt, R.K., Seidman, L.J., Caplan, B., Martsinkiv, A., and Goldfinger, S.M. (2007) The Role of Neurocognition and Social Context in Predicting Community Functioning Among Formerly Homeless Seriously Mentally Ill Persons, *Schizophrenia Bulletin* 33 pp.1388-1396.
- Tyminski, Q.P., Drummond, R.R., Heisey, C.F., Evans, S.K., Hendrix, A., Jaegers, L.A., and Baum, C.M. (2020) Initial Development of the Activity Card Sort-Advancing Inclusive Participation from a Homeless Population Perspective, *Occupational Therapy International* 2020(9083082) pp.1-8.
- van den Scott, L.J.K. (2018) Visual Methods in Ethnography, *Journal of Contemporary Ethnography* 47(6) pp.719-728.
- Wang, C., Burris, M.A., Ping, X.Y. (1996). Chinese Village Women as Visual Anthropologists: A Participatory Approach to Reaching Policymakers, *Social Science & Medicine* 42(10) pp.1391-1400.
- Wang, C. and Burris, M.A. (1997) Photovoice: Concept, Methodology, and Use for Participatory Needs Assessment, *Health Education & Behavior* 24(3) pp.369-387.
- Wang, C., Cash, J.L., and Powers, L.S. (2000) Who Knows the Streets As Well As the Homeless? Promoting Personal and Community Action Through Photovoice, *Health Promotion Practice* 1(1) pp.81-89.

Wiles, R., Prosser, J., Bagnoli, A., Clark, A., Davies, K., Holland, S., and Renold, E. (2008) Visual Ethics: Ethical Issues in Visual Research August 2008. Accessed from: <https://eprints.ncrm.ac.uk/id/eprint/421/1/MethodsReviewPaperNCRM-011.pdf>.

Woodgate, R.L., Zurba, M., and Tennent, P. (2017) Worth a Thousand Words? Advantages, Challenges and Opportunities in Working with Photovoice as a Qualitative Research Method with Youth and Their Families, *Forum: Qualitative Social Research* 18(1) pp.1-24.





---

# Implementing Refugee Integration Policies in a Transit Country: The HELIOS Project in Greece

---

Nikos Kourachanis

Panteion University of Social and Political Sciences, Athens, Greece

➤ **Abstract** *This paper examines the social impact of the HELIOS programme which aims at the social integration of refugees in Greece. The Greek state has, for decades, been a transit country that refugees cross to settle in wealthier European countries. Following the EU-Turkey statement, Greece became a country of forced settlement of refugees. The findings of the field research show that the predominance of the neoliberal philosophy of responsible citizenship, the reluctance of refugees to stay in Greece, as well as the shortages in the housing, education, and employment services offered by HELIOS result in an insufficient impact on the social integration of the HELIOS beneficiaries.*

➤ **Keywords** *EU Migration Policy; Responsible Citizenship; Housing; Education; Employability*

## Introduction

---

This article attempts an examination of the HELIOS project (Hellenic Integration Support for Beneficiaries of International Protection), which has been implemented in Greece since 2019 for the social integration of recognised refugees. Immigrants, Asylum Seekers, and Refugees are considered as a category of homelessness. According to the ETHOS Typology, these populations are classed as ‘houseless’ (immigrants in reception or short-term accommodation due to their immigrant status) (FEANTSA, 2005).

In 2015, the European Union experienced a huge influx of asylum seekers. Accommodation systems for asylum seekers and refugees vary considerably across EU countries: in some countries there are well-developed, whereas other

countries are less developed and may also be inadequate. Some initiatives, like those in Greece, Hungary, and Italy, were struggling to cope with the numbers of people they were being asked to process, though this could reflect both their resource levels – described as inadequate – and the relative scale of demand (European Observatory of Homelessness, 2016).

This paper examines the social impact of the HELIOS programme which aims at the social integration of refugees in Greece. HELIOS is the first organised intervention for the integration of refugees in Greek society, which is especially important given how the increase of refugees in the summer of 2015 created a new imperative for their management by the Greek State (Parsanoglou, 2020). Greece is a country in Southern Europe which for the last three decades has been receiving massive migratory and refugee inflows (Christopoulos, 2020). The Greek State has always dealt with the immigration phenomenon through a philosophy of repression, forcing the immigrant populations to the social margins. The lack of any integration policy for immigrants or refugees resulted in them being housed in poor conditions with severe overcrowding (Kourachanis, 2018a, Papatzani et al., 2021), their inability to access fundamental elements of social integrations, such as Greek learning language or cultural familiarity (Daskalaki et al., 2017), and their being channeled into undeclared work with low wages, high risk, and serious job insecurity (Kapsalis, 2018).

The increase in refugees in 2015 opened a new chapter for the reception policies of immigrant and refugee populations in Greece. This chapter is strongly permeated by the EU's influence on refugee management (Scipioni, 2018). Since the 1990s, EU immigration policy has been marked by the repression of migrants and refugees. The security of the external borders is the main concern of these policies, which are shaped by and implemented under repressive, militarised, and controlling conditions (Kaunert, 2018).

The 2016 EU-Turkey Statement sharpened biopolitical and death policy practices against refugees, establishing hotspots as a central tool of reception and identification services and making it clear that their focus is not on developing social integration but on repression (Dhesi et al., 2018). In the context of the Europeanisation of migration policy, residual social interventions have been strongly intertwined with the control and strengthening of external borders (Balzacq and Carrera, 2006).

The EU's anti-social refugee management policy has intersected with wider cuts in European welfare states, especially after the Great Recession of 2008 (McBride et al., 2016). The prevalence of a neoliberal perception places more emphasis on the responsibilities of the individual to meet their social needs (Clarke, 2005; Lister, 2011). The predominance of the concept of individual responsibility legitimises the resignation of the neoliberal welfare state from the development of social actions to ensure a dignified human life (Kourachanis, 2020). In the context of state social

policy residualisation, significant social actions are organised and funded by supra-national organisations and implemented by local or non-governmental organisations (Williams and Mooney, 2008; Arapoglou and Gounis, 2017).

At the same time, a series of social policy interventions have been shaped according to this individual-centred approach, with the aim of making the beneficiary responsible and of having obligations (Lister, 2011). But this is extremely difficult to achieve for vulnerable groups who have been excluded from the possibility of social participation (Turner, 2016). Fundamental initiatives for social integration are developed according to this spirit. Thus, housing actions often take the form of housing subsidies, entrusting the beneficiaries directly with finding housing and managing housing costs on their own, something that in countries with a residual housing policy does not seem to work (Colburn, 2019). Actions for education take the form of investing in the beneficiary's human capital (Sorgen, 2015) and employability practices are considered to provide the appropriate skills for the beneficiary to be able to look for a job on their own (Lakes, 2011).

In the Greek reality, the tangible policy response for the refugees from 2015 onwards was the formation of a framework for the reception and identification of asylum seekers which had strong elements of repression and anti-social treatment (Christopoulos, 2020). The majority of asylum seekers are accommodated in camps (either in hotspots on the Aegean islands upon arrival, or in the mainland) (Kourachanis, 2018a). The most vulnerable asylum seekers joined the ESTIA programme, which offered housing in social apartments, although without any social integration actions (Kourachanis, 2018b, Papatzani et al., 2021).

Due to the lack of adequate support measures from the Greek State, the refugees rely on informal forms of solidarity, such as migrant networks, for their survival. The role of migrant networks is crucial in adapting and promoting the processes of social integration. This phenomenon is strongly observed during their settlement in urban centres (Kobia and Cranfiel, 2009). Among other things, through the networks, migrants and refugees learn about how to meet their social needs, such as finding housing, access to goods and services, and finding employment in the host society (Beirens et al., 2007).

HELIOS proclaims that it is a programme that aims at developing actions for the social integration of refugees (IOM, 2021a). This programme is being implemented in a country which, until recently, was a transit zone for asylum seekers (Christopoulos, 2020). Several scholars have emphasised that social integration is a two-way process between immigrants and the host society (Berry, 1997). The majority of asylum seekers and refugees consider Greece as a transit country, through which they pass in order to settle permanently in other European countries. HELIOS therefore aims at the social integration of refugees in Greece, at a time

when the majority of them want to settle permanently in more wealthy European countries (Kourachanis, 2018b). Based on these considerations, the following sections describe the characteristics of HELIOS, the field research methodology, the findings, and conclusions, with the aim of providing an initial assessment of the social impact of the project during the first two years of its implementation.

## The Characteristics of the HELIOS Project

---

The HELIOS project started in June 2019 and is implemented throughout Greece under the supervision of the International Organization for Migration (IOM) in collaboration with local and non-governmental partners.<sup>1</sup> It is funded by the Directorate-General of the European Commission for Migration and Home Affairs. This is a pilot intervention that aims to support recognised refugees after 01/01/2018 to integrate into Greek society. The programme offers social integration measures such as rental subsidies, integration courses, employability support, and integration monitoring (IOM, 2021a).

More specifically, as mentioned on the official website<sup>2</sup> of the programme, HELIOS includes the following interventions: first, actions to support the housing of beneficiaries in apartments with a lease in their name with a minimum duration of six months and a maximum of twelve. Second, Integration Courses at Integration Learning Centres (ILCs) lasting six months, including modules related to learning the Greek language, cultural orientation, the degree of readiness for work, and other skills. Third, enhancing employability through the provision of consulting services, access to job-related certifications, and networking with potential employers. In parallel with these actions, procedures are provided to monitor the progress of the integration of the beneficiaries and to raise the awareness of the host communities.

---

<sup>1</sup> The implementation partners of the HELIOS project were: Catholic Relief Services (CRS), Danish Refugee Council Greece (DRC Greece), Greek Council for Refugees (GCR), Solidarity Now, INTERSOS, Municipality Development Agency Thessaloniki S.A (MDAT), Metadrasi, PLOIGOS, and Social Enterprise of the Municipality of Livadia (KEDIL).

<sup>2</sup> <https://greece.iom.int/el/hellenic-integration-support-beneficiaries-international-protection-helios>

**Table 1: HELIOS Housing Benefits**

Household Size	First instalment of the initial disbursement (consists of partial amount of contribution to start-up of independent living)	Second instalment of the initial disbursement (consists of remaining amount of contribution to start-up of independent living plus first month of contribution to rental costs)	Contribution to rental costs provided after the initial disbursement (month two and onwards)
	Released upon submission of lease agreement and other documents	Released upon confirmation of exit from Reception System and proof of payment of the first rent	Released monthly upon proof of payment of rental costs
1	€301	€301	€162
2	€569.50	€569.50	€309
3	€688	€688	€396
4 to 5	€838	€838	€504
6+	€1 060	€1 060	€630

Source: IOM (2021a)

According to the available statistics from the HELIOS Factsheet, by December 10, 2021, 33 889 beneficiaries had participated in the programme, coming mainly from camps (36.61% from sites and 17.05% from reception and identification centres) and from the ESTIA programme (32.23%). The countries of origin of the beneficiaries are mainly the Syrian Arab Republic (34.5%), Afghanistan (33.6%), and Iraq (12.2%); 54% of the beneficiaries are men and 46% are women. The geographical distribution of the beneficiaries with lease agreements per region is mainly in Attica (51.2%), Central Macedonia (18.73%), and Crete (6.45%). There have been 6 459 enrolments in Integration Courses and 6 945 job counselling sessions (IOM, 2021b) in the field of employability.

## Field Research Methodology

The focus of the field research was the analysis of the social impact of HELIOS through the perceptions and experiences of the staff involved in the implementation of the programme. For this purpose, the development of quality research methods was chosen and, more specifically, the preparation of semi-structured interviews with representatives of the partners at a local and non-governmental level. The main criterion used in the selection of the respondents was to ensure the greatest possible representation of the agencies involved in the implementation of the HELIOS project. This method was adopted so that the respondents could be directed by the researcher in key areas related to the discussion, thus enabling them to develop their views (Robson, 2002).

The main axes of the interview guide were related to the philosophy and characteristics of the HELIOS program, as well as the description of the main strengths and weaknesses of the rent subsidy, integration courses, and employability actions. Based on these findings, 14 semi-structured interviews were conducted with representatives of partners involved in the implementation phase and working in the Integration Learning Centres (ILCs) who are responsible for the implementation of HELIOS throughout Greece. Specifically, four interviews were conducted with ILCs' coordinators, three with accommodation support officers, two with integration courses officers, two with employability support officers, and three with integration monitoring officers. The results of the field research are presented below.

## Field Research Findings

---

### *HELIOS innovative elements*

A first point that emerges from the comments of the interviewees is the elements of innovation that characterise HELIOS. Although Greece has been a host country for migrant populations for three decades, until recently it did not have a structured social integration programme (Kourachanis, 2018b). The fact that the implementation of the programme is carried out by an international organisation and by municipalities and NGOs highlights the consequences of devolution (Williams and Mooney, 2008), as well as the significant deficits of state social policy in Greece (Dimoulas and Kouzis, 2018).

Clearly the existence of these programmes run by the international organisations is a result of the non-existence of social policy in Greece. I can imagine such a programme from an international organisation in Turkey or Jordan, but I cannot imagine it in Sweden or Germany. (ILC Coordinator)

The planning and implementation of the HELIOS programme is an original action that indirectly emphasises the significant delays in the social integration policies of the Greek State. In particular, the originality of the programme is that it combines actions that cover important social needs of refugees (rent subsidy, learning the Greek language, preparation for entry into the Greek labour market). Similar projects have only recently been implemented for other groups suffering from extreme poverty in Greece, such as the homeless (Kourachanis, 2017), yet there have still only been a few such projects.

At the planning level, there is no corresponding programme in Greece that is responsible for the integration of recognised refugees. They have the opportunity to rent their own house for a while and to learn Greek and get acquainted with Greek culture and the Greek labour market. (ILC Integration Monitor Officer)

***Emphasis on individual responsibility coexists with deficiencies in social benefits***

HELIOS places great emphasis on the individual responsibility of refugees. Previous housing programmes, such as ESTIA, were criticised for the passivation of beneficiaries, as they did not include social integration policies (Kourachanis, 2018b). According to the interviewees, HELIOS leaves the beneficiaries completely free to fulfil all the requirements. They are responsible for looking for and finding the apartment to rent, while the lease agreement will be in their own name, as will all the household bills. At the same time, they must attend Greek language courses, as well as job counselling seminars to enhance their skills so that they can seek work on their own. The plan of the programme is very reminiscent of the logic of responsible citizenship (Lister, 2011), the fulfilment of which, however, is extremely demanding for people with increased vulnerability (Turner, 2016).

First, the beneficiary has to find a home. When he finds it, he has compulsory Greek lessons and must attend job counselling courses. They fall into a pattern of having to deal with their residence permit and official documents themselves, pay their bills, go to the services on their own. (ILC Coordinator)

The prospects of the successful fulfilment of the obligations borne by the beneficiaries upon their entry into HELIOS are made even more difficult by two important factors. The first is the lack of preparatory procedures for their entry into HELIOS and the second is the very low levels of social benefits offered by the programme itself.

According to the informants, the refugees have not learned how to look for a home on their own and they are not familiar with interacting with the Greek public administration and social services on their own. Such skills had not been developed during their stay in the camps or in ESTIA as asylum seekers (Kourachanis, 2018a; 2018b).

This population is not ready from the previous programmes they were on to know how to act on their own. How easy it is to find a home in Athens now, especially if you are a refugee? And how easily can you combine learning the Greek language and finding a job in Greece in six months? (ILC Integration Monitor Officer)

The informants see the financial and temporal aspects of HELIOS as insufficient. The total number of beneficiaries of the programme is considered extremely limited compared to the total number of recognised refugees in Greece. By December 10, 2021, a total of 33 889 beneficiaries had registered on the programme (IOM, 2021b), while a total of 85 371 (65 589 as refugees and 19 782 as beneficiaries of subsidiary protection) were recognised as refugees or beneficiaries of subsidiary protection in the same period (January 2018 to November 2021) and a total of 98 544 since 2016 (77 424 as refugees and 21 120 as beneficiaries of subsidiary protection)

(Ministry of Migration and Asylum, 2021). It is therefore estimated that only about 30% of all recognised refugees have been HELIOS beneficiaries. Equally negative for them are the level of the rent subsidy, as well as the timing of the programme. These two points usually lead, as will be discussed below, to the refugees being settled in poor housing conditions with severe overcrowding.

HELIOS was meant to be a vehicle to exit ESTIA. In order for people to leave ESTIA they were told that HELIOS would take place. It also did not have the capacity to receive the population housed in ESTIA (once their numbers had reached 27 000). In proportion to the number of recognised refugees, only a small section become beneficiaries on HELIOS. (ILC Integration Monitor Officer)

The allowances are very low. They are not enough for someone to live alone. For this reason, many people are forced to live together or even many families together. (Accommodation Support Officer)

### ***Refugees are not interested in joining HELIOS: The “German Dream”***

The inadequate social benefits of HELIOS do not seem to be the main reason for the lack of interest on the part of the refugees in benefitting from it. From the answers given by the interviewees, it appears that the refugees are not interested in participating in a Greek social integration programme as their desire is to settle in other, more economically developed, European countries (Christopoulos, 2020).

The majority of refugees see Greece as a transit country from which they will leave as soon as the right opportunity is found (Kourachanis, 2018b). The discouragement of their participation in HELIOS stems from reasons related to their intention to relocate to another European country. One reason is the rumour that if they register on the HELIOS programme, then they lose any chance of moving to another European country. In other cases, refugees who have reached the end of their maximum stay in the camps and the ESTIA program, end up joining HELIOS for a short period of time, so that they have somewhere to stay until they leave for abroad. Finally, some refugees register with HELIOS so that they will receive the first instalments of the rent subsidy, after which they then leave for abroad without notice.

Leaving Greece directly to go to Germany is the main goal of refugees as soon as they become refugees, so they are not interested in joining a programme to integrate into Greek society. Even those who enter HELIOS tell us clearly: we entered the programme to get the rent subsidy until we leave for another country. (ILC Coordinator)



There was fake news that the registration of recognised refugees in HELIOS would prevent them from going abroad. Second, many beneficiaries agreed to a fictitious rent contract to get a down payment of the rent allowance and then they went abroad. (ILC Integration Monitor Officer)

The above findings are strongly reminiscent of the two-way process of social integration (Berry, 1997). The will of the subjects themselves and their intention or not to remain in the host society are very important aspects for the successful achievement of social integration policies.

***Assessing the HELIOS Pillars:  
Rent subsidy – integration courses – employability***

The findings regarding the three pillars of HELIOS show that in its current form it does not contribute adequately to the beneficiaries' prospects of social integration. More specifically, the low level of rent subsidy forces refugees to be housed in poor housing conditions and, often, forces them to live in overcrowded conditions with other compatriots. Greek language courses, although an important activity, do not interest the beneficiaries as most want to settle in wealthier countries. The pillar of employability does not substantially contribute to the labour market integration of refugees, leading them to be channeled into undeclared, unskilled, and dangerous jobs in sectors where the Greek economy needs a cheap labour force. This set of dimensions is analysed below.

## **Rent subsidy**

---

The housing subsidy is the starting point for activating the programme for each beneficiary, as it is followed by the other actions. In order to receive the allowance, the beneficiaries are required to look for and find an apartment that they can manage at their own risk. The most important aspects of this dimension are the geographical location, the methods used to find a home, and, finally, the conditions of the housing which they will eventually occupy.

The interviews show that the beneficiaries look for housing exclusively in urban centres. This phenomenon is observed both for the metropolitan areas and for the provincial cities. This dimension is very apparent in the area of Athens, which is the main focus of the search for housing by HELIOS beneficiaries. The refugees usually look for apartments in areas that already dangerous jobs previously settled migrant and refugee populations, such as Omonia Square, Victoria Square, Kypseli, and Patisia. These are areas where cheaper apartments are located and many ethnic businesses operate, such as grocery stores, restaurants, and other shops offering

basic necessities. This enables refugees to find products of their choice, such as food at cheap prices and, at the same time, to enjoy the informal solidarity of migrant networks.

At the same time, due to the high level of social marginalisation that is concentrated within them, many NGOs are active in these areas, offering support to vulnerable groups, such as medical care and psychosocial support services. The refugees can therefore turn to these organisations to meet any of their fundamental social needs. Also, since they are located in city centre areas, it is easier for them to travel by public transport as well as to look for work from here. Finally, an equally important criterion for searching for an apartment in the city centre is their immediate access to Athens International Airport in order to travel abroad, as discussed in the previous section.

Usually, the refugees choose to stay in the centre of Athens and mainly in areas where other migrants already live, so that there are ethnic shops, migrant networks, as well as social services. They also find work through migrant networks, to earn an income. They are also able to move easily with public transport. Finally, it is very important that they want to be in Athens in order to have direct access to the airport to escape abroad. (ILC Accommodation Support Officer)

The above testimony recalls the crucial role of migrant networks for the provision of support and solidarity within their community (Beirens et al., 2007). This parameter seems to be very important for finding housing under the HELIOS programme, as information on available and affordable housing is obtained through them. Also, the important role played by the settlement of refugees in urban centres in terms of their labour and social integration is strongly emphasised (Kobia and Cranfield, 2009).

Of particular interest are the findings on the methods and strategies developed by HELIOS beneficiaries to find housing. Within the programme, a special online platform has been created called “HELIOS Home”, where various apartment owners can register and advertise their property for rent to the refugees. This platform is intended as a support for refugees seeking housing, as this is their individual responsibility. The interviews showed, however, that the “HELIOS Home” platform contributes little to the housing of refugees, as few advertisements are registered and the rents are considered very high for the quality of the apartments on offer. Thus, the main way in which the beneficiaries of the programme find housing is through informal channels. In this case, too, migrant networks perform the most important functions of disseminating information about available affordable apartments for rent (Beirens et al., 2007). The beneficiaries communicate with their compatriots to find apartments through personal contacts and through special online groups on social media, such as on Facebook. In addition, it is often the case

that the migrant networks end up hosting a compatriot, for a small financial contribution, until they manage to find a better apartment. These informal communication and housing practices are prevalent.

Although there is a programme website (“HELIOS Home”) that includes apartments available for rent to refugees and is also supported by the programme staff, the beneficiaries mainly get information and find homes through the migrant networks. The site has only a few and expensive apartments. Whereas, from the migrant networks they can find cheap housing or they will find compatriots to share the expenses. (ILC Accommodation Support Officer)

With the implementation of HELIOS in provincial cities, such as in Crete and Larissa, it seems that the main goal of the refugees is to rent a house in the city centre. This is attributed by the interviewees to reasons similar to those of Athens, namely that there is easier access to social services, they are better networked and receive more support from migrant networks, they can find the products they need more easily and at better prices, and they also do not have to travel long distances, as in the provinces public transport can be very limited and tickets are expensive. Finally, the preference for city centres in the provinces is always connected to the need to be able to easily reach a port or airport, in order to travel abroad.

At HELIOS most refugees prefer to find a home in the centre of the provincial town, as it is close to the asylum service and other social services and is also close to the port, so can leave whenever they want for Athens, or get on a plane and go to another country. (ILC Integration Monitor Officer)

The methods that the refugees use to find housing in the provinces appear to follow the same pattern as those in Athens, although it seems that here the conditions are more controlled. The beneficiaries of the programme search in areas where their compatriots live and small or large migrant communities have already been created, in order to enjoy the security of mutual support. To a large extent, they learn about available accommodation from their compatriots, either through personal contacts or through social media. However, in the case of the provincial towns, there are stronger personal contacts with both the local community and the HELIOS staff. HELIOS staff in small towns are personally acquainted with the staff of other municipal social services and other agencies. Also, they are responsible for a smaller number of beneficiaries compared to the programme in Athens. This gives them a great opportunity to mediate in order to locate apartments for rent or to resolve any problems that may arise. Thus, in the case of provincial cities, there are opportunities for easier and faster renting of houses for the beneficiaries.

In the provinces, the HELIOS staff are more involved and offer greater support to the beneficiaries. In small towns, the social relationships and contacts are closer. Although the programme does not provide case management, there are no NGOs and there are not enough interpreters to assist the beneficiaries. The staff therefore turn to social services through their personal contacts, to support them. (ILC Coordinator)

The last dimension that emerges from the findings of the interviews regarding the effect of the rent subsidy is related to the housing conditions that the HELIOS beneficiaries find themselves in. In all the evidence available, there is a common assumption that the conditions of the apartments they rent are extremely poor. This is primarily due to the low level of rent subsidy, which does not allow them to find accommodation that offers decent housing conditions; after all, the programme itself does not set any minimum standards for the apartments to be rented. The financial inadequacy of the housing allowance has two main negative consequences. First, the rented houses are old and the buildings in poor condition. Second, the phenomenon of overcrowding is very common as refugee families are forced to live together in order to manage housing costs (Kourachanis, 2018b).

The houses that are rented by almost all the beneficiaries are old and in poor condition. They can be basements, on the ground floor or, at most, apartments on the first floor. (ILC Accommodation Support Officer)

There are no minimum specifications on what house they will rent. They can rent any house they want. But when the criteria are to be cheap and close to the town centre, then it is definitely not adequate housing. It will usually be in a small house. It can be a house of 40 sq.m. with five people living inside: parents with three children for example. And in fact, in areas, such as Kypseli or Omonia. (ILC Accommodation Support Officer)

I have come across cases where two or three families live in the same house together. I have come across other cases where they have gone to stay in the same house informally and other people who whose own HELIOS allowance has expired also stay there because they have nowhere else to go. (ILC Integration Monitor Officer)

From the above testimonies, it can be seen that there are significant inadequacies in the housing dimension provided to HELIOS beneficiaries. The level of the rent subsidy is low, as a result of which the beneficiaries settle in apartments with poor housing conditions, forced cohabitation, and overcrowding. Below are the findings for the integration courses and employability actions.

## Integration courses

---

The HELIOS staff commented that the Greek language courses are the most beneficial intervention provided by the programme. Knowledge of the language of the host society is considered a valuable integration factor as it can free refugees in their day-to-day dealings with public services, their interactions in their neighbourhood and with locals, and significantly strengthen their prospects for labour market and social participation (Sorgen, 2015). This action acquires added value if we bear in mind that it is the first organised educational intervention for the teaching of Greek to foreign adult populations. The framing of the Greek language courses with additional soft skills acquisition actions relating to the Greek way of life and human rights seems to offer substantial support.

I would describe HELIOS as a school. Because education is the only pillar of the programme that can really benefit them, as they enter into the mandatory programme logic – three-hour lessons every day. And soft skills courses are positive in terms of learning to live in Greece. (ILC Integration Courses Officer)

The field research revealed several factors that during the implementation phase seem to weaken this interesting action. The main issue is related to what was mentioned in the previous section. The beneficiaries are opposed to the prospect of compulsory Greek language courses, as they wish to leave Greece. As a result, they do not want to spend three hours a day in class. The result of this reluctance is that only a very small part of the beneficiaries enter the process of learning Greek. The majority of the trainees only took the education courses because they are a mandatory HELIOS action.

There is no desire to learn Greek. Most refugees want to go abroad, so they do not want to invest in learning Greek. Most clearly say that I would like to get my travel documents and leave Greece. All this together leads to the fact that they do not want to learn Greek. So they do it solely to get the rent subsidy. (ILC Integration Courses Officer)

Some weaknesses in the design of the Greek courses were pointed out by a member of staff responsible for the educational pillar of HELIOS. The most important relates to the lack of teacher trainer and, moreover, to training in an intercultural education approach. This oral testimony states that the programme instructors simply followed the guidelines in a handbook and did not attend intensive seminars on how to teach the Greek language to foreigners.

There was no expert in intercultural education who did the language and educational planning, trained the educators and monitored the implementation of integration courses. The educators were just following a handbook. They were not properly prepared for intercultural adult education. It was a fundamental shortcoming of the language curriculum. (ILC Integration Courses Officer)

The Covid-19 pandemic further weakened the prospects for the usefulness of educational activities, as lessons were now conducted remotely. This created additional problems. Many beneficiaries did not have laptops or internet access to attend the lessons and the possibility of direct interaction between teacher and trainee in the classroom was lost. The educational process was further degraded.

## Employability

---

The action that completes the range of HELIOS pillars is that of employability. This is a process that aims to familiarise the beneficiaries of the programme with the Greek labour market. The philosophy of the intervention is not to offer a job but to teach refugees how to look for employment. It is therefore a counselling process that aims at the capacity of refugees to be employable (Bagavos and Kourachanis, 2021), in order to achieve their own labour market integration (Lakes, 2011). In this context, the main dimensions are actions such as learning to write a CV or preparing for an interview to fill a job vacancy.

The programme does not find you a job. It teaches you how to look for a job. (Employability Support Officer)

The interviewees noted that job counselling in fact has a limited social impact. It appears that the specific means and tools used (curriculum vitae, interview) are not enough to create a sufficient matching between the skills of the refugees and the Greek labour market. On the contrary, the absence of mechanisms for channelling the beneficiaries to those sectors of the labour market that match their qualifications results in their placement in areas of the Greek economy that need a cheap workforce.

Basically, the employability activities teach them how to write a CV and how to talk in a job interview. However, the majority of them are channeled into low-paid, unskilled jobs. (Employability Support Officer)

There are rigidities in employability. The logic of promoting refugees in the labour market based on their skills doesn't exist, instead they end up working in undeclared work (for example, agricultural work). Employability activities end up not having any substantial effect on the employment of refugees. (Employability Support Officer)

Regarding employability, the employment consultants make informal attempts to reach out to employers who are looking for employees for their companies. The interviews show that the interest mainly comes from those offering jobs in the unskilled, poorly paid, uninsured, and precarious jobs in sectors of the Greek economy who want to take advantage of cheap labour, such as immigrants and refugees. In this way, the recognised refugees of HELIOS end up being channeled into the same sectors of the labour market into which the immigrant labour force has traditionally been channeled into in Greece for the last three decades. That is, in areas such as restaurants, tourism, agricultural work, and personal social care services (Kapsalis, 2018).

Through a platform an employer can contact us to ask for employees. Those who have a professional background will not find a job in their field. They only find unskilled jobs. (Employability Support Officer)

Beneficiaries usually manage to find jobs, for the men, in sectors like agriculture, restaurants, hotels and, the women, in domestic social care services: care of the elderly or babies or cleaning. I will never forget the phrase that a restaurant owner said to me, when we were in communication to find a job for our beneficiaries: “In customer service I want Greek employees, and in the kitchen and cleaning I want refugees.” (Employability Support Officer)

## Conclusions

---

The objective of this research was to examine the social impact of HELIOS after two years of its operation. Its planning and implementation have taken place within the structural environment of a neoliberal welfare state and repressive migration policy that prevail as fundamental components of the EU policy and which the Greek State embraces for the management of social problems. Fundamental dimensions such as individual responsibility, social policy privatisation, and neoliberal actions such as housing benefits for the extreme poor, investment in human capital, and employability are found in the philosophy of this programme.

More specifically, HELIOS is the first organised intervention for the social integration of refugees in Greece, although this is a country that has been receiving large numbers of immigrants and refugees in the last three decades. The fact that this initiative was designed by an international organisation and implemented by local and non-governmental organisations is further proof of the structural inadequacies of the social policy of the Greek State for ensuring a dignified life for population groups experiencing extreme social marginalisation, such as refugees. This programme is therefore a welcome start, after decades of delays.

The findings of the field research show that HELIOS does not significantly contribute to the social integration of refugees. This is due to reasons related to the philosophy of the programme, the will of the beneficiaries, but also to inadequacies in the planning and implementation of its specific social actions.

HELIOS was originally designed as a short-term programme based on a philosophy that emphasises individual responsibility. A prerequisite of the programme is that beneficiaries carry out the necessary administrative procedures themselves, without receiving corresponding support actions from the host programmes (such as ESTIA or, even more so, accommodation in camps) and, mainly, without having learned the Greek language. This, combined with its limited duration (usually six months), makes any beneficial effect difficult to achieve.

The prospect of social integration is significantly hampered by the reluctance of refugees to stay permanently in Greece. Greece is a transit country for refugees, who aim to settle in European countries with higher levels of development. They are therefore not interested in participating in a social integration programme, except to temporarily benefit from its social actions. This situation leads to their nominal participation in the actions of HELIOS, with the consequence that the benefits of such social support diminish.

The above two dimensions interact negatively with the obvious social inadequacies of the specific pillars of HELIOS. The amount of the rent subsidy is extremely low, especially in a period when housing costs in the Greek rental market have increased greatly, with the result that the beneficiaries settle in apartments with poor housing conditions, forced cohabitation, and overcrowding. The choice not to include organised support in for finding a home in the design of HELIOS, forces the refugees to seek apartments through migrant networks, which are the main mechanism of informal solidarity and support. The inadequacy of the housing allowance is also highlighted by the fact that once it expires, many refugees are informally accommodated in the homes of their compatriots or return to the camps where they lived, or they manage to move to another European country.

The pillar of Greek language learning is the most fruitful aspect of HELIOS. This is the first organised action for teaching Greek to adult refugees and it can effectively promote the project of social integration. However, the intention of the refugees not to stay permanently in Greece, quite reasonably makes them reluctant to attend classes.

Finally, the pillar of employability does not seem to be synchronised with the real needs of the refugees and the reality of the Greek labour market. There is no organised effort to connect their skills to their occupational prospects in Greece. In contrast, limited work counselling tools, such as a narrow focus on learning how



to write a curriculum vitae or prepare for a job interview, have no social impact. Due to the structural deficiencies of the employability pillar the vast majority of refugees end up being channeled into unskilled, poorly paid, uninsured, and precarious jobs in sectors of the Greek economy that employ a cheap workforce, such as restaurants or personal social care services.

In conclusion, although HELIOS is ostensibly presented as a social integration programme, it actually seems to contribute to the welfare marginalisation of refugees by following the paths of previous interventions (such as camp accommodation and the ESTIA programme). It is therefore another intervention that is fully linked to the deterrent nature of EU immigration policy. The inadequacy of the social benefits from HELIOS forces refugees to seek support from migrant networks or to be channeled into undeclared employment until they can emigrate to the European country they wish to settle in. It is therefore a programme that mainly aims to extend the stay of refugees in a transit country, such as Greece, rather than their social integration into it.

## **Acknowledgments**

---

This paper has partially funded by the research project “Inclusive Cities: Infrastructures of Social Integration and Refugee Settlement”, University of Crete, Greece. Special thanks to Professor Vassilis Arapoglou for his valuable support.

## ► References

- Arapoglou, V. and Gounis, K. (2017) *Contested Landscapes of Poverty and Homelessness in Southern Europe. Reflections from Athens* (London: Palgrave Macmillan).
- Bagavos, C. and Kourachanis, N. (2021) Civil Society Organizations and Labour Market Integration for Refugees and Asylum Seekers in Greece, *VOLUNTAS: International Journal of Voluntary and Nonprofit Organizations* 32(1) pp.1-32.
- Balzacq, T. and Carrera, S. (2006) Introduction: Policy Convergence, in: Balzacq, T. and Carrera, S. (Eds.) *Migration, Borders and Asylum. Trends and Vulnerabilities in EU Policy*, pp.1-4. (Brussels: Center for European Policy Studies).
- Beirens, H., Hughes, N., Hek, R., and Spicer, N. (2007) Preventing Social Exclusion of Refugee and Asylum Seeking Children: Building New Networks, *Social Policy and Society* 6(2) pp.219-229.
- Berry, J.W. (1997) Immigration, Acculturation and Adaptation, *Applied Psychology* 46 pp.5-68.
- Christopoulos, D. (2020) *If the Refugee was a Problem, there would be a Solution* (Athens: Polis (in Greek)).
- Clarke, J. (2005) New Labour's Citizens: Activated, Empowered, Responsibilized, Abandoned?, *Critical Social Policy* 25(4) pp.447-463.
- Colburn, G. (2019) The Use of Markets in Housing Policy: A Comparative Analysis of Housing Subsidy Programs, *Housing Studies* 36(1) pp.46-79.
- Daskalaki, I., Tsioli, S., and Androulakis, G. (2017) Ethnographic Approaches of Refugees' Education in Greece, in: *Proceedings of the 9th International Conference in Open and Distance Learning* 9, (4A) pp.19-33 (in Greek).
- Dhesi, S., Isakjee, A., and Davies, T. (2018) Public Health in the Calais Refugee Camp: Environment, Health and Exclusion, *Critical Public Health* 28(2) pp.140-152.
- Dimoulas, C. and Kouzis, I. (Eds.) (2018) *Crisis and Social Policy. Deadlocks and Solutions* (Athens: Topos (in Greek)).
- European Observatory on Homelessness, (2016) *Asylum Seekers, Refugees and Homelessness. The Humanitarian Crisis and the Homelessness Sector in Europe, EOH Comparative Studies on Homelessness* (Brussels: FEANTSA).
- FEANTSA (2005) *ETHOS Typology on Homelessness and Housing Exclusion* (Brussels: FEANTSA).
- IOM (2021a) *HELIOS. Project Regulations Handbook* (Athens).

IOM (2021b) *HELIOS Factsheet, 10/12/2021* (Athens). Available at:

<https://greece.iom.int/sites/greece/files/>

HELIOS%20Factsheet%20December%202021%20W2.pdf

Kapsalis, A. (2018) *Immigrant Workers in Greece* (Athens: Topos (in Greek)).

Kaunert, C. (2018) *European Internal Security: Towards Supranational Governance in the Area of Freedom, Security and Justice* (New York: Palgrave Macmillan).

Kobia, K. and Cranfield, L. (2009) *Literature Review: Urban Refugees* (Carleton University, Canada).

Kourachanis, N. (2017) Homelessness Policies in Crisis Greece: The Case of Housing and Reintegration Program, *European Journal of Homelessness* 11(1) pp.59-80.

Kourachanis, N. (2018a) Asylum Seekers, Hotspot Approach and Anti-Social Policy Responses in Greece (2015-17), *Journal of International Migration and Integration* 19(4) pp.1153-1167.

Kourachanis, N. (2018b) From Camps to Social Integration? Social Housing Interventions for Asylum Seekers in Greece, *International Journal of Sociology and Social Policy* 39(3/4) pp. 221-234.

Kourachanis, N. (2020) *Citizenship and Social Policy. From Post-war Development to Permanent Crisis* (London: Palgrave Macmillan).

Lakes, R. (2011) Work-Ready Testing: Education and Employability in Neoliberal Times, *Journal for Critical Education Policy Studies* (9)1 pp.318-340.

Lister, R. (2011) The Age of Responsibility: Social Policy and Citizenship in the Early 21st Century, *Social Policy Review* 23 pp.63-84.

McBride, S., Mahon, R., and Boychuk, G. (Eds.) (2016) *After '08: Social Policy and the Global Financial Crisis* (UBC Press).

Ministry of Migration and Asylum (2021) *Report A, November 2021. Reception, Identification and Asylum Procedures* (Athens). Available at: [https://migration.gov.gr/wp-content/uploads/2021/12/Report\\_A\\_November\\_-2021\\_International-Protection.pdf](https://migration.gov.gr/wp-content/uploads/2021/12/Report_A_November_-2021_International-Protection.pdf)

Papatzani, E., Psallidaki, T., Kandylis, G. and Micha, I. (2021) Multiple geographies of precarity: Accommodation policies for asylum seekers in metropolitan Athens, Greece, *European Urban and Regional Studies* 29(2) pp.189-203.

Parsanoglou D. (2020) Volunteering for Refugees and the Repositioning of State Sovereignty and Civil Society: The case of Greece, *Citizenship Studies* 24(4) pp.457-473.

Robson C. (2002) *Real World Research* (Oxford: Blackwell).

Scipioni, M. (2018) Failing Forward in EU Migration Policy? EU Integration after the 2015 Asylum and Migration Crisis, *Journal of European Public Policy* 25(9) pp.1357-1375.

Sorgen, A. (2015) Integration through Participation: The Effects of Participating in an English Conversation Club on Refugee and Asylum Seeker Integration, *Applied Linguistics Review* 6(2) pp.241-260.

Turner, B. (2016) We are All Denizens Now: on the Erosion of Citizenship, *Citizenship Studies* 20(6-7) pp.679-692.

Williams, C. and Mooney, G. (2008) Decentring Social Policy? Devolution and the Discipline of Social Policy: A Commentary, *Journal of Social Policy* 37(3) pp.489-507.

---

# Longitudinal Study of the Homeless Population in Valencia

---

Nadia Rondino and Juan Manuel Rodilla

St. John of God, Valencia, Spain

➤ **Abstract** *This Research Note presents the results of a longitudinal study of people experiencing homelessness in Valencia. The use of longitudinal studies in researching people experiencing homelessness are relatively rare in the European context and improving knowledge on homelessness service providers effectiveness in the European context should be a priority. The research is focused on the trajectory of a sample of Housing-Led programme users two years after leaving the programme. The study aims to identify which factors either facilitated or impeded people in exiting homelessness. Following Pleace's theoretical framework, the findings of the study confirm that both formal and informal support are two of the main factors that contribute to exiting homelessness. Finally, detailed information regarding the methodology used for the longitudinal study will be provided in order to be replicated by service providers wishing to provide evidence-based practices.*

➤ **Keywords** *Homelessness, risk factors, longitudinal study, Housing-Led, effectiveness, housing stability*

## Introduction

---

The Spanish National Comprehensive Homelessness Strategy 2015-2020 (ENI-PSH) was approved in 2015, making it the second southern-European country to adopt a National Strategy (Baptista, 2016). Among the strategic lines to eradicate homelessness, ENI-PSH highlights the role of Housing-Led approaches (strategic line 6 and strategic line 7) and the importance of improving knowledge, information exchange, and evaluation (strategic line 13). The success of Housing-Led

approaches in Europe has been widely discussed (Pleace and Bretherton, 2013), and the importance of improving knowledge on homelessness and homelessness programmes' evaluation in the European, and specifically in Spain, context is the focus of this research note.

This necessity of improving knowledge on homelessness in the European context has been highlighted over the years by Philippot et al. (2007) and Toro (2007), and more recently, Pleace (2016). Improving the knowledge of homelessness in Europe would lead to the application of more adequate policies, not necessary relying upon mostly American findings. Longitudinal studies of homelessness are scarce (Klodawsky et al., 2009), and specifically within the Spanish context are rare (Panadero et al., 2021). The evaluation of the Habitat Programme (Bernard and Yuncal, 2016), with  $n=62$  for 12 months, or the longitudinal study of women experiencing homelessness in Madrid (Galvan, 2018), with  $n=138$  for 12 months, are some examples. Longitudinal studies are considered crucial because of their capacity to provide essential information by identifying pathways in and out of homelessness (Benjaminsen et al., 2005). They have been also recommended in order to evaluate the housing situation of migrant populations (Hernandez and Pascual, 2013) and pointed as useful to identify risks and factors triggering homelessness (Basque Country Homeless Strategy 2018-2021).

Cross-sectional research methods, on the other hand, continue to be widely used as one of the main tools of homelessness analysis, despite the long-standing identification of the limitations of this methodology for understanding homelessness. Cross-sectional research is criticised for using biased data samples such as point-in time surveys (Shinn and Khadduri, 2020), and for contributing to the myth of the elevated rate of people experiencing homelessness who are mentally ill and/or have elevated rates of substance use than the general public (O'Sullivan, 2020).

This study aims to provide a longitudinal methodology in order to test evidence-based practices of homeless service providers. The study uses Pleace's theoretical framework by highlighting three factors that, if missing, increase the risk of homelessness. These factors are personal capacity, informal support, and formal support. Personal capacity could be understood as the combination of personal factors (education, health, resilience, personal history, etc.) that define yourself as a person and condition your capacity to fend for yourself. Informal support could be represented by family, friends, or partners that, in the case of basic necessity, could temporarily help a person. Finally, the formal support is the economic, health, housing, or welfare structures in a certain society that could support a person in case of crisis. These formal support structures vary from country to country, and specifically in Spain, from region to region.

|||||

This longitudinal study tries to identify and track the evolution of two of these factors, informal support and formal support, in a group of 30 individuals who accessed a Housing-Led programme in Valencia. During the interviews we keep track of the informal supports by tracking their social network of friends, family, and partners providing support to the person. As for the formal support, it will be identified as the income coming from government welfare programmes. During the longitudinal study, we identify changes in these two factors and observe the variation in the housing stability of people.

### **Study Objective**

---

This longitudinal study examines the housing trajectories of people two years after leaving the homeless Housing-Led programme of St. John of God Valencia. The study reviews the housing, employment, economic, and informal support of people at three points in time, the moment when they access the programme, the moment when they leave the programme, and two years later. The study aims to understand the temporal dimension of homelessness in Valencia, being transitional, episodic, or chronic (Nooe and Patterson, 2010) and tries to identify factors that could facilitate or impede people's ability to achieve housing stability. These factors will be related with the ones highlighted as increasing the risk of homelessness if lacking: that is, access to informal support, access to formal support, and personal capacity (Pleace, 2016). In this longitudinal study, we aim to improve the understanding of the housing trajectories of people experiencing homelessness in Valencia. By understanding the mechanisms used to exit homelessness, more successful strategies using Housing-Led programs could be designed.

### **Housing-Led Programme Service Provision**

---

The longitudinal study is developed among participants of the Housing-Led programme of St. John of God Valencia. St. John of God is a private, non-profit institution dedicated to providing comprehensive care for people experiencing homelessness. The Housing-Led programme has 53 single rooms distributed across 17 shared apartments scattered around the city of Valencia. Fifteen of the apartments are dedicated to men and two are dedicated to women. Users can access the service free of charge through the Roofless Assistance Center (CAST) of the Valencia City Council. The nature of the service provided is a client-centred case management approach providing housing, substance use disorders treatment, assistance in accessing government benefits, connection to the public structure of health, and access to training and employment. The Housing-Led programme of

St. John of God Valencia assisted 83 people during 2019. Among them, 30 people left the programme during 2019. The sample of this study consist of the 30 service users that left the programme in 2019.

## Method

In order to clearly define the residential status of the study group, the FEANTSA definition of homelessness was adopted. FEANTSA developed the European typology of homelessness and residential exclusion (ETHOS), classifying people experiencing homelessness according to their residential situation as roofless, houseless, with insecure housing to inadequate housing. The group participating in this study correspond to people who were living on the street (operational category 1) and accessed the Housing-Led programme of Saint John of God Valencia.

### *Study sample*

The sample consisted of 30 adults experiencing homelessness:

- 26 were men (87%)
- 4 were women (13%)
- Average age: 48 years old
- 22 were Spanish (73%)
- 8 were non-Spanish (26%)
- 47% with current addictions
- 45% with current mental health pathologies
- 44 days as the average time homeless

The sample (n=30) seem to have similar characteristics to the total number of people assisted in the Housing-Led programme during 2019 (n=83) in term of age, gender, origin, and addictions; they were slightly higher in terms of mental health pathologies (45% vs 25%).

	Sample	Programme service users 2019
<b>Number of people</b>	30	83
<b>Average age</b>	48	47
<b>% Men</b>	87%	88%
<b>% Foreigners</b>	26%	27%
<b>% Addictions</b>	47%	41%
<b>% Mental health</b>	45%	25%



Of the original 30 people, 21 (68%) were able to be contacted and interviewed two years later.

- 19 were men (90%)
- 2 were women (10%)
- Average age: 50 years old
- 14 were Spanish (67%)
- 7 were non-Spanish (33%)
- 47% present with current addictions
- 52% present with current mental health pathologies
- 20 days as the average time homeless

Follow-up respondents (n=21) seem to have similar characteristics to the original sample (n=30) in terms of age, gender, and addictions; and slightly different in terms of mental health pathologies (45% vs 52%) and origin (73% vs 67% Spanish). The response rate (68%) has been comparable to other longitudinal studies developed internationally, 62% for a period of 24 months (Klodawsky et al., 2009) and in Spain, 62% after a period of 12 months (Galvan, 2018). The sample size is clearly small (n=30) conditioned by the total number of people participating in the Saint St. John of God Valencia Housing-Led programme in 2019. Despite the study not being necessarily large in scale or as robust as would be ideal, it could be useful based on the few longitudinal studies in Spain and the fact that none have been done in Valencia.

### ***Measures***

This longitudinal study compares the data gathered during three points in time:

**T0.** At the arrival to the Housing-Led programme, 45-minute interviews were developed by the team of social workers at Saint John of God Valencia. For these interviews, the social-work team used the ‘first interview’ checklist tool of the Saint St. John of God Valencia case management software.

**T1.** At the moment people left the Housing-Led programme, 30 to 45 minute interviews were developed by the team of social workers at Saint John of God Valencia. For this interview, the social work team used the ‘case closure’ checklist tool of the Saint St. John of God Valencia case management software.

**T2.** After leaving the programme (24 months after), 30 to 45 minute interviews by phone or face to face were developed by the research team. They used a reduced format of the 'EPSH- Personas' tool, the survey for homeless populations developed in 2005 by the INE and the Basque Statistics Office (EUSTAT).

Through these interviews, it has been possible to track living situations, employment situations, income level, and networks of informal support. Interviews explored the extent to which employment and formal and informal support contributed to a successful exit from homelessness and to assess the relationship between housing stability and income.

### ***Tools***

The three tools used in this longitudinal study during the three points in time are:

A. First interview checklist tool of St. John of God Valencia case management software

A social worker runs the first interview within the first three days upon the service user's arrival to the programme. The semi-structured interview contains the following topics:

- Arrival date (date)
- Civil status (Single, married, divorced, widower)
- N° of children
- Informal support networks (friends, partner, family, neighbours, nobody)
- Level of studies (Elementary, High School, Vocational Training, University)
- Profession
- Self-perceived health (without/episodic/chronic health problems)
- Is the health problem properly diagnosed?
- Disability (Yes/No)
  - Degree of disability
- Addictions (Yes/No)
  - Type (Alcohol/Cocaine/Amphetamine/Heroin/Cannabis/Methadone/Gambling)
  - Currently under treatment (Yes/No)
- Mental health disorders (Yes/No)
  - Type



- Is the mental health disorder properly diagnosed (Yes/No)
  - Currently under treatment (Yes/No)
- Last accommodation: (street, apartment, shared apartment, hotel, social resource, prison, hospital)
  - If street, for how many days (days)
- Employment status (employed/unemployed/disability/retired)
- Income status (no income/job salary/unemployment benefits/family or friends' support/government benefits)
- Income in Euro
- Support request (Housing/rehab/employment/health/administrative assistance)

#### B. Case closure check list tool of St. John of God Valencia case management software

A social worker runs the case closure interview once the service user announces their departure. The semi-structured interview of closure contains the following topics:

- Date of departure (date)
- Reason for departure (employment and housing solution/income and housing solution/ abandonment/referral to social service/hospital admission/entering prison/expelled)
- Employment status (employed/unemployed/disability/retired)
- Income status (no income/job salary/unemployment benefits/family or friends' support/government benefits)
- Income in Euro
- Housing status (street, apartment, shared apartment, hotel, social resource, prison, hospital)
- Are intervention goals achieved (Yes/No)

#### C. EPSH-Personas

The EPSH-Personas tool is a 136 question survey developed in 2005 by the INE and the Basque Statistics Office (EUSTAT) in order to identify the sociodemographic profile, living conditions, and difficulties of access to accommodation for the homeless population. This research adapted the survey, reducing it to 23 questions. The resulting survey contains the following topics:

- Currently living in Valencia (Yes/No)
- Housing status (street, apartment, shared apartment, hotel, social resource, prison, hospital)
- Are you currently living in an apartment (Yes/No)
- Housing rental contract (Yes/No)
- In the last two years since you left SJD, have you ever had to live on the streets? (Yes/No)
- Are you currently living on the street (Yes/No)
  - If street, for how long (days)
  - If street, since when have you lived on the street (date)
  - If street, last accommodation (apartment, shared apartment, hotel, social resource, prison, hospital)
- Reason for losing last accommodation (eviction/rental contract finished/job lost/hospitalisation/moved cities/incarceration/unable to pay rent/problems with landlord or community)
- Employment status (employed/unemployed/disability/retired)
- Employment contract (Yes/No)
  - If unemployed, why you don't have a job: (health/age/lack of training/no job offers for his profile/not allowed to work/currently in job search)
- Income status (no income/job salary/unemployment benefits/family or friends' support/government benefits)
- Is your income enough for covering your basic needs (Yes/No)
- For the last two years, did you have any debt (Yes/No)
  - If yes, with (bank or government/family/friends/gambling)
- Health status (very good/good/average/bad/very bad)
- Currently under treatment (Yes/No)
- Do you usually consume drugs (Yes/No)
- Do you have any mental health disease (Yes/No)
- Legal status (documented/undocumented/pending)
- Informal support network (friends/family/partner/neighbours)

## Procedures

The data acquisition was developed between January 2021 and May 2021 (six months). The study was divided in three parts:

1. Preparatory phase: Stored data collection and design of the interview tool
2. Interviews: Development of the interviews and data gathering
3. Analysis: Analysis of data and development of conclusions

For the purpose of the study, only people who left the Housing-Led programme during 2019 were considered. Thirty cases were identified and data from the first two interviews were anonymised and extracted from the St. John of God Valencia case management database and contrasted with the social work team to ensure data reliability. Once the interview tool (EPSH-Personas) was identified and adapted, a phone contact with the 30 cases were done by the team of social workers requesting to have an interview. From the 30 cases, 21 were able to be contacted and nine were not reachable. No one rejected the interview. With the cases that were able to be contacted, a phone call or a face-to-face interview was scheduled, and the research team conducted a 20 to 45 minute interview.

## Results

The results regarding the evolution on living situation, employment situation, income level, and network of informal support are summarised in Table 1. The average time that people stayed in the Housing-Led programme (T1-T0) was 310 days.

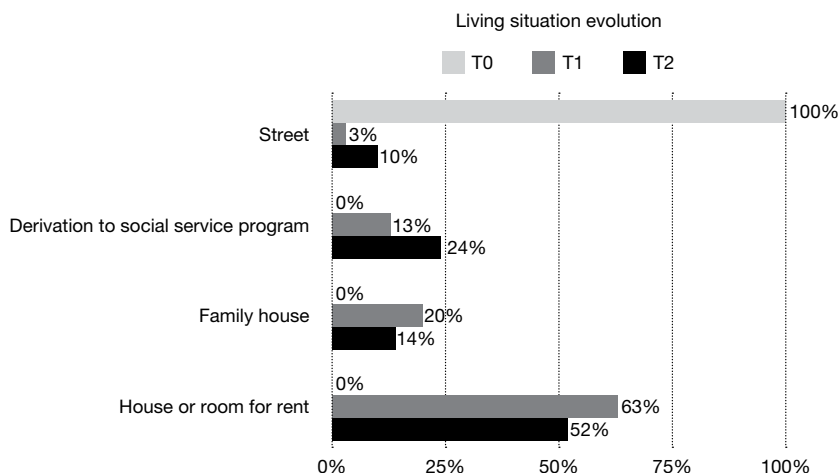
**Table 1. Summary of Living situation, Employment situation, Income level, and Network of informal support at three points in time, T0, T1 and T2**

	Entrance program T0 N=30	Exit program T1=0 N=30	Two years later T2=24 N=21
% People not roofless	0%	97%	90%
% People working	17%	20%	16%
% People with any source of income	27%	77%	95%
Average monthly income	107€	415€	553€
Informal support network	50%	NA	81%

### *Living situation*

Regarding living situation, as Table 1 indicates, all respondents were roofless when they accessed the programme. When they left the programme, only 3% were roofless, and two years later, this was 10%. Figure 1 shows the detailed living situation of people at T0, T1, and T2.

**Figure 1. Detailed living situation of people entering the programme (T0), leaving (T1) and 2 years later (T2)**



### *Employment situation*

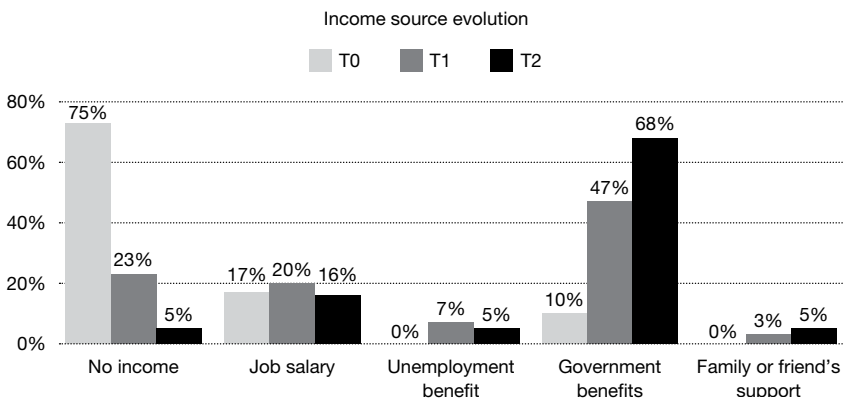
Regarding employment situations, only 17% of people accessing the Housing-Led programme were working on their arrival. As Table 1 highlights, and despite having access to an employment promotion programme, this percentage did not change dramatically (only 3% increase at T1) during the stay in the programme. The percentage decreased 4% after two years.

### *Income level*

Regarding income, people without any kind of income get reduced from T0 (73%), to T1 (23%), to 5% (T2). As Table 1 indicates, the average monthly income experienced an increase from T0 to T1 of almost 400% (from €107 to €413); from T1 to T2 there was an increase of 100% (from €413 to €553). As seen in *Employment situation*, this increase seems not to be associated to changes in the employment status. Interviews at T1 and T2 show that most of the income improvement (47% at T1 and 68% at T2) is associated with welfare programmes, as can be observed in Figure 2. The first increase (T0=10% to T1=47%), accessing government benefits, could be associated

with the support of the social work team facilitating people with the necessary arrangements to apply to welfare programmes. The second increase (T1=47% to T2=68%) is less clear. It could be explained by the resolution of pending welfare programme requests, by an increase of respondents' capacity to access formal support structures, or being non-representative due to low sample size.

**Figure 2. Detailed income source of people entering the programme (T0), leaving (T1) and 2 years later (T2)**



**Network of informal support**

As Table 1 indicates, 50% of people interviewed at T0 mentioned having a network of informal support. The percentage increases to 81% at T2. At T0 'family' is mentioned as the main source of support by 43% of respondents, but just 7% mention 'friends'. At T2 'family' is mentioned by a similar percentage of 44%, but 'friends' increases to 60% and it appears in other sources such as 'partner' (6%), 'neighbours' (7%), and 'pets' (25%).

**Limitations**

Despite the positive results, the current study presents several limitations. The small sample is the main weakness, hindering the possibility to identify statistical correlations between employment, income level, support networks, and homeless status. The small sample also inhibits the possibility to identify and study specific subgroups within the sample. Finally, the participants in the study come from the same city and programme, and therefore the findings might not be easily extrapolated to other contexts.

## Conclusions

---

This paper presents the results of a longitudinal study of people experiencing homelessness in Valencia. The research is focused on the trajectory of a sample of Housing-Led programme users two years after leaving the programme. Evidence of the longitudinal study appears to confirm the theory that increasing formal support (in this case access to income from welfare programmes) and informal support (in this case regenerating network of informal support) reduces the risk of homelessness (Pleace, 2016).

While access to the labour market seems not to be the main cause of income increase among the sample, income from welfare programmes show a significant increase during the participation in the Housing-Led programme. This finding seems to confirm the difficulties associated with the access of the homeless population to the labour market and the necessity to improve access to income support programmes (Zuvekas and Hill, 2000). Despite the relationship between welfare regime and homelessness being clear-cut, the low-income level achieved (compared to the Spanish minimum wage) and poor living conditions (shared apartments and lack of rental house contract), raises concerns about the effectivity of welfare programmes as a sufficient mechanism to place individuals in a “circuit of inclusion” (O’Sullivan, 2010).

Longitudinal studies to research homelessness are scarce and improving knowledge on homelessness programmes’ effectiveness in the European context should be a priority (Baptista and Marlier, 2019). We acknowledge the impossibility to generalise the results of this study due to the limited sample. Nevertheless, we provide detailed information regarding the methodology used in order to encourage other service providers wishing to enhance the evidence base of their work. To date, there are few reports that attempt to compare programmes’ effectiveness, an issue that would represent a major step forward in advancing a sound international response to homelessness.



## ► Bibliography

Baptista, I. (2016) Strategically Moving Forward in Combatting Homelessness in Spain, *European Journal of Homelessness* 10(2) pp.89-110.

Baptista, I. and Marlier, E. (2019) *Fighting Homelessness and Housing Exclusion in Europe: A Study of National Policies* (Brussels: European Social Policy Network).

Benjaminsen, L., Munoz, M., Vazquez, C., and Panadero, S. (2005) Quantitative Methods in Homelessness Studies: A Critical Guide and Recommendations, paper presented at the conference on Research on Homelessness in Comparative Perspective, Brussels, 3 to 4 November.

Bernad, R. and Yuncal, R. (2016) Introducing the Housing First Model in Spain: First Results of the Habitat Programme, *European Journal of Homelessness* 10(1) pp.53-82.

Galvan, R. (2018) Trayectorias hacia la inclusión: estudio longitudinal en mujeres en situación de sin hogar en Madrid [Trajectories towards inclusion: a longitudinal study of women experiencing homelessness in Madrid] (Universidad de Alcalá).

Hernandez, M. and Pascual, D. (2013) Vivienda y exclusion residencial [Housing and residential exclusion] (Universidad de Murcia).

Klodawsky, F., Aubry, T., Nemiroff, R., Bonetta, C., and Willis, A. (2009) A Longitudinal Approach to Research on Homelessness, in Hulchanski, J.D., Campsie, P., Chau, S.B.Y., Hwang, S. and Pardis, E. (Eds.) *Finding Home: Policy Options for Addressing Homelessness in Canada* pp.499-514. (Toronto: Cities Centre Press, University of Toronto). (<https://www.homelesshub.ca/resource/finding-home-policy-options-addressing-homelessness-canada>).

Nooe, R.M. and Patterson, D.A. (2010) The Ecology of Homelessness, *Journal of Human Behavior in the Social Environment* 20(2) pp.105-152.

O'Sullivan, E. (2010) Varieties of Homelessness in Europe: Homelessness and Urban Marginality, *European Journal of Homelessness* 6(2) pp.69-97.

Panadero, S., Fernandez, M., Angel, J., Cantos, M., and Luis, J. (2021) Evaluación de la metodología Housing First en España. Soluciones al sinhogarismo [Evaluation of the Housing First methodology in Spain. Solutions to homelessness]. Accessed 5th June 2021 from: [http://www.habitathousingfirst.org/docs/Housing\\_first\\_informecompleto.pdf](http://www.habitathousingfirst.org/docs/Housing_first_informecompleto.pdf).

Philippot, P., Lecocq, C., Sempoux, F., Nachtergaeel, H., and Galand, B. (2007) Psychological Research on Homelessness in Western Europe: A Review from 1970 to 2001, *Journal of Social Issues* 63(3) pp.483-503.

Pleace, N. (2016) Researching Homelessness in Europe: Theoretical Perspectives, *European Journal of Homelessness* 10(3) pp.19-44.

Pleace, N. and Bretherton, J. (2013) The Case for Housing First in the European Union: A Critical Evaluation of Concerns About Effectiveness, *European Journal of Homelessness* 7(2) pp.21-41.

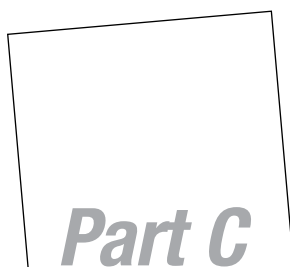
Shinn, M. and Khadduri, J. (2020) *In the Midst of Plenty: Homelessness and What To Do About It* (New Jersey: Wiley-Blackwell).

Toro, P.A. (2007) Toward an International Understanding of Homelessness, *Journal of Social Issues* 63(3) pp.461-481.

Zuvekas, S. and Hill, S. (2000) Income and Employment among Homeless People: The Role of Mental Health, Health and Substance Abuse, *Journal of Mental Health Policy and Economics* 3(3) pp.153-163.



# Review Symposium



***Part C***





Manuel Mejido Costoya (Ed.) ( 2021)

***Land of Stark Contrasts: Faith-Based Responses to Homelessness in the United States***

New York: Fordham University Press. pp. 363. €32.10

**Review 1 by Joe Doherty, University of St Andrews**

This is a remarkable book; remarkable for its candour in providing, alongside a recognition of their importance and influence, a frank assessment of the shortcomings and limitations of faith-based organisations that provide homelessness services in the USA. While this book is no ‘hagiography’, all contributors appear to have a faith affiliation, and all are advocates of faith-based homelessness organisations. Throughout this volume there is a prevailing attachment to the belief that religion has ‘something to add’: faith remains fundamental.

This ‘tone’ of critical assessment – prefigured in the book’s title<sup>1</sup> – is established by the editor, Manuel Mejido Costoya, in a reflective introductory chapter. Mejido Costoya has a notable history of public service and is presently an associate researcher at the University of Geneva’s Institute of Sociological Research. He is an exponent of liberation theology which he sees as ‘germane to the theology of homelessness’ in establishing a ‘preferential option for the poor’ and in prioritising the ‘emancipatory interests [spiritual, corporeal and material] of homeless individuals’. Additionally, and crucially, liberationist doctrines embrace the concept of ‘social sin’ which, Mejido contends, directs religious ministerial practice to “the exposure of the systemic determinants of homelessness and not just the immediate needs of unhoused individuals” (p.14). The tension between faith-based organisations (FBOs) attending, on the one hand, to the welfare of individual homeless people (their ‘compassionate’ role) and, on the other hand, identifying and tackling the structural determinants of homelessness (their ‘political’ role) is a recurring theme of this book, dictating the framework of analysis and assessment for many of the authors.

<sup>1</sup> The book’s title was taken from: “*The United States is a land of stark contrasts... its immense wealth and expertise stand in shocking contrast with the conditions in which vast numbers of its citizens live.*” UN Report of Special Rapporteur on extreme poverty and human rights on his mission to the United States of America (Alton, 2018, p.3).

*Land of Stark Contrasts* comprises 13 chapters organised in three Parts. Part I assembles five case study chapters which scrutinise the role of FBOs as civil society actors in the local development of homelessness services. In Part II, four chapters examine the manner in which religious views and principles inform ‘conceptions of justice and the common good’. Part III comprises a further four chapters which consider how adherents of different faith traditions “understand and address the suffering of unhoused individuals in the light of their doctrinal systems and practices” and how collaboration with non-sectarian stakeholders is negotiated “without instrumentalising religious convictions” (p.20).

For the most part the text of *Land of Stark Contrasts* is accessible even for the theologically unschooled. It is, mercifully, largely devoid of canonical citations and only occasionally does arcane theological terminology interrupt the flow. Uniformly, each contribution displays both scholarship and an admirable commitment to the idea of praxis.

## **Part I: Public Religion and Community Revitalisation**

---

James Spickard (pp.49-71)<sup>2</sup> opens Part I with a trenchant analysis of the “shifting discourses [on homelessness] and the appeal to religion” in San Antonio, Texas. Spickard focuses on ‘Haven for Hope’, San Antonio’s city experiment which draws together in a demarcated campus setting, 1.5 miles from downtown, an amalgam of private non-profit organisations and FBOs<sup>3</sup> in an attempt to improve the efficiency and impact of homelessness service delivery. ‘Haven for Hope’ became fully operational in 2010. Its Impact Report of that year outlined the project’s objectives: ‘to tackle the root causes of homelessness’ focusing on education, job training, day care, substance use and medical care. Spickard is critical of the narrow interpretation of ‘root causes’ which focuses on individual factors and the lack of attention to systemic issues – symptomatically in this report there is little explicit reference to housing provision. For Spickard, ‘Haven for Hope’ is a manifestation of a ‘neoliberal discourse’ which reduces city government involvement in homelessness by ‘outsourcing compassion’<sup>4</sup> to faith-based and private non-profit organisations. Spickard readily acknowledges that outsourcing compassion has, over time, seen an improvement in service delivery which has moved from ‘paternalistic’ to ‘person centred’, empathy and compassion have tangibly increased. While Spickard is

---

<sup>2</sup> The book chapters are not numbered. Page numbers are used as identifiers.

<sup>3</sup> Haven for Hope’s website suggest approximately one-third are faith related, mostly local but including at least one national/international faith organisation – the Society of Saint Vincent de Paul.

<sup>4</sup> ‘Outsourcing compassion’ as it relates to homelessness services has a long history in the USA – beginning in the Reagan era and extending through the Clinton and Bush administrations.

fulsome in his appreciation of the role of FBOs in leading and facilitating this shift, he is equally clear about their deficiencies. As he puts it, FBOs are good at “pulling individuals out of the river”, but fail “to keep other people from falling or being pushed in” (p.66).

Manuel Mejido Costoya and Margaret Breen’s chapter (pp.72-116) reports on a three year ‘action research’ project conducted by the authors in the Puget Sound Region of the American northwest, an area of nine counties centred on Seattle with a population of some 4.5 million. The Puget Sound region was of particular interest to the authors in that it is often cited as an exemplar of the decline of religiosity in the USA *and* has experienced a crisis of severe homelessness since 2015 (p.72). Working with 19 FBOs and three non-sectarian organisations, Mejido Costoya and Breen’s research focused on the intersection of faith and civic capacity and examined the potential for FBOs to become more effective problem solvers –“catalysers” and “incubators” of social change (p.94) – through the development of community approaches to homelessness. Their research identified several successful initiatives particularly in generating local economic development and in fostering employment and training. Mejido Costoya and Breen argue that further progress is, however, inhibited by a ‘disconnect’ (conflict and tension) between the parochialism of local communities (providing voluntary labour and monetary backing) and the need to widen the potential pool of initiatives by working with denominational bodies such as diocese, synods, and conventions. Such ‘up-scaling’ of community activities, they suggest, is necessary if FBOs are to move beyond ‘compassion’ to address ‘systemic and structural obstacles’ particularly regarding the provision of permanent, affordable low-cost housing. The authors conclude: “It is remarkable given the legacy of public religion in America how little we know about the different organisational models in and through which FBOs operate and about the challenges that FBOs face as they strive to solve social problems at the community level” (p.98).

At the heart of Michael Fisher’s chapter (pp.117-139) is an examination of the processes of urban redevelopment in Dallas, Texas which in his assessment have promoted ‘disenfranchisement’ and the ‘criminalisation of homelessness’. Fisher contextualises his Dallas study with a succinct and insightful account of the historical and contemporary background to the emergence of criminalisation ordinances in the US demonstrating that urban development (renewal, revitalisation, gentrification) has disproportionately affected homeless people. Fisher’s primary critique however is directed towards the legitimisation of these processes by the religious discourse of ‘prosperity theology’. In this critique, Fisher goes beyond the lament for the failure of FBOs to deal with systemic causes of homelessness which characterises preceding and following chapters in this book, to pillory a religious tendency (while of course recognising that this is not the prevailing or predominant

tendency in public religious discourse) which lauds piety and sees “wealth as a signifier of one’s blessed socio-economic status” (p.131). Prosperity theology attributes hardship to individual failure, to a lack of gumption, application and hard work, and has no regard for societal hazards and obstacles; for prosperity theology the absence of material wealth is attributable to personal moral failings (i.e. sin). Fisher ends with a forceful plea for the development of “a counter-religious discourse which challenges and confronts controversial theologies that condone selfishness and greed and incite criminalisation” (p.134).

In the penultimate chapter of Part I, Laura Stivers (pp.140-61), with an explicit focus on public policies that have contributed to homelessness among African Americans, addresses the interaction between white supremacy, racism and homelessness. In a similar vein to Fisher, she establishes a causal link between dispossession (eviction and homelessness) and gentrification, recounting also how historic public housing policies, zoning, redlining, block busting and mortgage discrimination have disproportionately affected black communities. In this context Stivers is critical of FBOs that focus on “changing people instead of changing structures” (p.153). Stivers ardently argues that effective responses from FBOs and allied groups need to adopt and actively promote an “ethics of social transformation” which builds on “values of solidarity and inter-dependence as well as on God’s movement for freedom” – thereby extending religious engagement with homelessness beyond charity towards an advocacy that targets the systemic and structural causes of homelessness. In this Stivers reiterates the concept of ‘prophetic disruption’ developed at greater length in her book *Disrupting Homelessness, Alternative Christian Approaches* (Stivers, 2011).

Lauren Valk Lawson<sup>5</sup> concludes Part I (pp.162-92) with an examination of the ‘challenges and opportunities’ that face FBO services in addressing the interconnections between homelessness and health in Seattle. Of all the contributors to this book, Lawson comes closest to presenting an ‘exceptionalist’ (i.e. when compared with secular organisations) argument for the superiority of FBOs in dealing with homelessness (see also Coleman, pp.232-34, this volume). Citing Goldsmith et al. (2006), she asserts that FBOs are: trusted by the communities in which they operate, create and provide leadership, have access to volunteers and financial donations, act as community anchors, are more willing to adopt a holistic approach and are driven by a ‘higher calling’ (p.163). Lawson does however modulate this assertion by admitting to some lacunae among FBOs especially with regard to ‘challenges’ in accessing funding and the lack of well-articulated policies, procedures and outcome evalua-

---

<sup>5</sup> Lawson is the only author to declare explicit membership of a particular religion, Bahā’ī Faith. Founded in Iraq in the mid-nineteenth century, the principal Bahā’ī tenets are the “essential unity of all religions and the unity of humanity” (p.355, this volume).



tions. However, many of the same strengths (with the exception perhaps of ‘driven by a higher calling’) and weaknesses bear a striking similarity to the strengths and weaknesses that characterise most secular homelessness services (see Sheikh and Teeman, 2018). Apart from this niggle, Lawson’s chapter is informative in demonstrating the relationship between health and homelessness. Her examination includes both a consideration of specific health problems – chronic illness, mental illness and substance use – and an examination of health issues specific to particular ‘categories’ of homeless people – veterans, women and families, and young people. Additionally, Lawson examines a variety of ‘health care models’ as they relate to homelessness: street outreach, community clinics, medical respite, trauma informed care and harm reduction. She concludes with several examples of FBO inter-faith partnerships that incorporated health services into community outreach programmes (pp.180-82). Regrettably, the precise message and instruction embedded in these case studies is somewhat obscured – at least for the uninitiated reader – by the proliferation of acronyms and a rather confusing concatenation of events.

## **Part II: Religious World views and the Common Good Reimagined**

The first chapter of Part II by the anthropologist Bruce Granville Miller (pp.193-213) reflects on how the spiritual practices of the Pacific Northwest’s Coastal Salish<sup>6</sup> could potentially be used to tackle homelessness among Indigenous peoples. Miller reminds us that homelessness is pervasive among Indigenous communities; for example, in Vancouver where Indigenous people comprise a mere 3% of the regional population, they constitute 31% of the unhoused. Miller carefully guides us through the religious cosmology of the Coastal Salish, identifying how concepts of ‘kinship’ and the practices and customs of ‘claiming’, ‘covering’, ‘assembly’ and ‘contemplative longhouse meetings’ contribute to a culture of belonging and inclusion which has ensured that historically there has been little<sup>7</sup> or no homelessness among Coastal Salish peoples. Miller suggests that there is potential for such concepts and practices to be extended beyond ‘the kin and blood’ of the Coastal Salish to embrace other Indigenous communities through their incorporation in outreach programmes. As an example, Miller details the achievements of the Sts’ailes First Nation who, during the Olympics of 2010, brought unhoused non-Coastal Salish Indigenous youth living on the streets of Vancouver to the Sts’ailes First Nation’s rural reserve where a ‘treatment programme’ provided shelter,

<sup>6</sup> The Coast Salish comprise a large, loose grouping of diverse Indigenous nations, each ethnically, linguistically, and culturally distinctive living in British Columbia, Canada, and the U.S. states of Washington and Oregon.

<sup>7</sup> Homelessness is the result of ‘banishment’, and that mostly short lived (Miller, p.193, this volume)

spiritual guidance, and eventually, referral back to the youth's Indigenous communities (pp.207-10). Miller is, however, acutely aware of the many obstacles to implementing such programmes, not least the historic and continuing disruptive effects of settler colonialism on the societal resilience of Canada's First Nations.

In the second chapter of Part II, Nancy Khalil (pp.214-25) considers the development of a nuanced understanding of homelessness emerging from an 'interfaith encounter' in downtown Boston. The 'encounter' is the cooperative relationship which has developed over 20 years between the American Episcopal Cathedral Church of St Paul and the Muslim owner of the neighbouring Black Seed Café. The relationship was founded on the provision of food by the café owner for the Cathedral's annual Thanksgiving celebration which welcomed participants from all faiths as well as homeless people. In a singular, and possibly unique (for Boston at least) development, St Paul's also provides a Friday prayers venue for the local Muslim population and accommodates Ramadan iftars organised and catered for by Black Seed's owner. In conversations with the café owner, Khalil ponders the meaning of homeless/ness as noun, verb and adjective, its pejorative and stigmatising iterations and its relationship with poverty. Conversations which – aided by quotations from Malcolm X's Letter from Mecca – see the evolution of the café owners understanding of homelessness from 'based in addiction' to 'systemic epidemic'.

John Coleman's chapter (pp.226-49) entitled 'Religion and Civic Activism Reconsidered: Situating Faith-Based Responses to Homelessness' reviews three decades of his research on the links between FBOs, social services and citizen activism. If I have understood Coleman's message correctly, he suggests that the interaction between religion and liberal society is characterised by a tension between the religious concepts of 'discipleship', on the one hand, and the secular concept of 'citizenship' on the other. For Coleman discipleship is the predominant ethos – the spiritual, cultural and behavioural expectations – that people of faith bring to their interactions with society and government, it is an ethos defined by their relationship with their God. Citizenship refers to the reciprocal relationship conjoining the rights and responsibilities of the citizen with protection by the state. In this representation, discipleship adds a key 'moral' dimension to an 'a-moral' citizenship. This juxtaposition is illustrated with reference to the work of Robert Putman whose concept of 'social capital', Coleman suggests, is disproportionately generated by religion (p.232). Coleman ends with an account of the work of several para-denominational organisations<sup>8</sup> which, he argues, illustrate the beneficial linking of the 'energy of discipleship' with citizenship (p.238).

---

<sup>8</sup> Para-church or para-denominational organisations are Christian faith-based organisations that work outside and across denominations to engage in social welfare and evangelism.

In the final chapter of Part II, Jeremy Phillip Brown poses the question, “[w]hat can be gained by turning to mediaeval religion in order to sharpen our focus on contemporary social phenomena [such as homelessness]? In this somewhat quixotic chapter Brown engages with the Hebrew writings of the 13<sup>th</sup> century sage R. Ezra Ben Solomon of Gerona and with Iberian Kabbalistic teaching<sup>9</sup> in an attempt to “historicise contemporary religious and public discourse on homelessness” (p.250).

He argues that these documents disseminate a mystical discourse of homelessness fashioned in both ‘theosophical’ and ‘historiosophical’ terms which offer a compelling version of social ethics. While undoubtedly a scholarly attempt to demonstrate the relevance of medieval text to contemporary debate on homelessness, it unambiguously shifts the emphasis of analysis into the theological realm. In this respect Brown’s chapter foreshadows Part III.

### **Part III: Theological Insights for Homeless Ministries**

---

The chapters of Part III explore the theological and doctrinal justifications that steer the work of FBOs. They focus specifically on how the adherents of Christian faith traditions comprehend and deal with the suffering of homeless people in light of their own doctrines and practices (Mejido Costoya, p.20, this volume). In this vein, Paul Houston Blankenship (pp.277-96) poses the question: “[w]hat difference do people who are homeless make in the spiritual lives of housed Christians?” (p.277). His answer is ‘quite a lot, but more is needed’. Blankenship concludes his chapter with a plea that if Christians are to become ‘more loving’ they need ‘to leave their houses’ and join homeless people in the public spaces where they can generate “the political will to help people establish roots” (p.295). Echoing Blankenship’s sentiments, María Teresa Dávila (p.297-315) draws on the Catholic concept of ‘Integral Human Development’ to structure an argument for enhancing ‘soul work’ by integrating its concern for the “spiritual wounds of the unhoused” with a regard for the “systemic challenges impacting a person’s or community’s ability to acquire access to housing” (p.299). In a quirky third chapter (pp.316-30) Roberto Mata juxtaposes Google’s recently approved plans for a new campus – Googleville – in San Jose with John of Patmos’s rhetorical conception a ‘New Jerusalem’ (Book of Revelations, 21). Mata draws startling parallels based on the familiar conceits of ‘deserving’ and ‘undeserving’. In the case of Googleville this distinction is based on ‘wealth’. Googleville is in essence a vast gentrification programme that will uproot and dispossess the undesirables (i.e. poor) of the Latinx community that

---

<sup>9</sup> Jewish Kabbalah is a set of esoteric teachings which offer an explanation of the relationship between the unchanging, eternal God and the mortal, finite universe. It forms the foundation of mystical religious interpretations within Judaism (p.264, this volume).

presently inhabit San Jose's Downtown East district, while welcoming residents with the wherewithal to purchase or rent accommodation (the promise of 1000 'affordable' houses is conspicuously vague and possibly duplicitous). The deserving/ undeserving distinction in New Jerusalem is based on 'salvation'. New Jerusalem is conceived as the 'New Earth' where all true believers (God's chosen people) will reside at the 'end of time' to spend eternity with God; nonbelievers however will be excluded. Part III ends with Sathianathan Clarke's autoethnographic<sup>10</sup> assessment of nine years of bible study with 'homeless neighbours' at the Church of the Epiphany in Washington DC (pp.331-50). For Clarke, the study group acted as a 'dialogical alternative space' for seeking biblical meaning that enhancing religious understanding.

## Overview

---

'Compassion is not sufficient' is the clear message of *Land of Stark Contrasts*. In Spickard's apt analogy "plucking homeless people out of the river and placing them on what passes for a safe shore" establishes FBOs' participation in a "homeless management industry" which focuses on "transforming individuals rather than transforming the city in which they live" (Spickard, pp.65-66, this volume). Each contributing author to *Land of Stark Contrasts* reiterates and endorses the call for FBOs to 'step-up', to engage directly and meaningfully in tackling the systemic and structural obstacles that cause and perpetuate homelessness; to engage in a praxis that not only saves individuals from drowning in the river of homelessness, but – to extend Spickard's analogy – effectively removes the hazard by draining the river. These are ambitious objectives which would require not only substantial resourcing but also – and perhaps more importantly – a change of mindset and overhaul of organisational priorities.<sup>11</sup> All this is recognised and acknowledged; however, what is disappointingly missing from this volume is any sustained attempt to provide a clear assessment of the composition and anatomy of systemic/structural causes or to delineate pathways towards achieving these laudable objectives. There are numerous, though mostly fleeting, references to housing crises, to the need for low-cost affordable housing, to 'Housing First' projects, and to the 'right to housing'. The opportunities that these topics – and others – provided for charting an effective FBO praxis that goes beyond compassion are squandered. The call of

---

<sup>10</sup> Autoethnography is an approach to research and writing that seeks to describe and analyse personal experience in order to understand cultural experience. "This approach challenges canonical ways of doing research and representing others and treats research as a political, socially-just, and socially-conscious act" (Ellis et al., 2010, n.p.).

<sup>11</sup> For further insight on these issues see: Hackworth (2012) and Parsell et al. (2022).

the contributors to *Land of Stark Contrasts* to tackle causality remains, regrettably, resolutely at the level of exhortation and aspiration.

### ► References

Alton, P. (2018) *UN Report of Special Rapporteur on Extreme Poverty and Human Rights on his Mission to the United States of America* (UN. Human Rights Council Secretariat (A/HRC/38/33/Add.1)).

Ellis, C., Adams, T.E., and Bochner, A.P. (2011) Autoethnography: An Overview, *Forum: Qualitative Social Research* 12(1) Art. 10. n.p.

Goldsmith, S., Eimick, W.B., and Pineda, C. (2006) *Faith-Based Organisations versus the Secular Counterparts: A Primer for Local Officials* (Cambridge MA: Harvard University Ash Institute for Democratic Governance and Information).

Hackworth, J. (2012) *Faith Based: Religious Neoliberalism and the Politics of Welfare in the United States* (Athens & London: University of Georgia Press).

Parsell, C., Clarke, A., and Perales, F. (2022) *Charity and Poverty in Advanced Welfare States* (London: Routledge).

Sheikh, S. and Teeman, D. (2018) *A Rapid Evidence Assessment of What Works in Homelessness Services*. *Social Care Institute of Excellence* (London: CRISIS).

Stivers, L. (2011) *Disrupting Homelessness. Alternative Christian Approaches* (Minneapolis: Fortress Press).

## **Review 2 by Siobhán Garrigan, Trinity College Dublin, Ireland**

Like its title, this is a book of stark contrasts. Its ambition is macro, with its authors covering geographies encompassing most of the USA and posing swooping questions, but its overall feel is micro, almost a series of vignettes. It repeatedly calls for political change, but mostly takes an apolitical approach. On the one hand, it gives insights into grassroots organisations which, claiming faith as their motivation, give succour to those suffering for want of a house; this gives a marvellously 'in-depth' picture of a wide range of different projects and locations, evoking the great number and variety of faith-based social justice projects and the diversity of American spaces. On the other, it is surprisingly uncritical of the categories it uses; for example, what is 'faith' and what is it doing in these circumstances that non faith-based organisations engaged in similar work are not?

These contrasts might be due to the origins of the book, which were in a project that ran from July 2015 for five years in Seattle University's Center for Religious Wisdom and World Affairs, funded by the Luce Foundation (\$450 000). Two symposia were held in 2017 and 2018 on homelessness that brought together a wide range of participants from academia, religious bodies, and non-profit organisations. Symposia are good things; they allow knowledge-sharing between grassroots agencies, theorists, and policy makers as well as idea-generation, problem-solving, and the possibility of ongoing mutual support. But not all symposia should be turned into books.

A memo that was included with the review copy of this book noted that it was approved for an advance contract as a co-production with the Center before the first symposium even occurred. The condition that an imaginative, inclusive, diverse gathering of people from very different walks of life will be required to produce a single academic volume for sale in order to justify its existence is a horrid example of how neo-liberal norms distort conversations and devalue their worth as conversations.

The normalisation of neo-liberalism is the hidden theme of the book, both in what it presents and in what is missing from it. What it presents struggles throughout with two themes highlighted by my fellow-reviewer: the tension between 'serving' and 'changing', i.e., : caring for those suffering in a bad situation while knowing that the bad situation is systemic, something interpersonal care cannot fix. Secondly, that people – very good, clever, committed and relatively powerful people like the authors of these chapters – are rendered so powerless in their own political system that all they can do to effect systemic change is exhort; nearly all the authors imply that someone else, elsewhere, should be able to ultimately alter things for the better; exactly how is left vague.

The normalisation of neo-liberalism that is not addressed in the book stems from this seeming obliviousness: the masking of big-money interests; the suffering of some individuals, and the scrabbling of some others (and not the State) to aid them as falsely normative; the ways that neo-liberalism evades being named (or even noticed) via its intersectional character. This is why Laura Stivers' article was a breath of air: naming white supremacy as a fundamental and ongoing problem. Stivers argues that if you want to fix homelessness in the USA you have to transform those policies and social structures that keep white supremacy intact, because it is they that continue to impoverish and imprison communities of colour. And the role of faith-based organisations (FBOs) in this?

"... teaching parishioners that incarceration did not increase because of heightened crime and that people didn't simply choose to live in segregated neighborhoods, but that intentional governmental policies created our current injustices. The good news is that no matter how complex and overwhelming, policies can be changed." (p.157)

But what about the role of Christian thinking in *creating* those policies? For example, are US American religious bodies ever going to take responsibility for, and proactively amend, put right, the divinised imperialist, colonising, white-settler concepts that firmly defined 'nice neighborhoods' as white ones with a church on the Green emblematising respectability while enforcing racialised, gendered, and class discrimination and papering over a legacy of genocide, lingua-cultural extermination, and land-theft?

Similarly, an account is much needed and missing in this volume of the ways in which churches and other religious organisations have *caused* innumerable people to experience homelessness; as but one example, Christian teachings against homosexuality prompting the eviction of youth from their homes.

And beyond re-educating congregations and taking responsibility for the errors in their past, why aren't more churches building social housing? Or are they? You wouldn't know it to read this book. Its aforementioned tension is in danger of becoming a false dichotomy between tending souls and changing policy; in the middle, however, there is a lot of scope for pragmatic faith-based action, such as building and running social housing or campaigning for affordable housing.

Furthermore, what of those *non*-FBOs, who are building and running social housing and campaigning for affordable housing? This book's focus on the grassroots is great but many people involved at the grassroots are also involved in wider-scale campaigns, and many people doggedly working on those campaigns are people of faith, even as their organisations run under 'secular' titles. Indeed, in my experience, you can't work for long in this arena without a deep store of faith, albeit not

necessarily one affiliated with an institutional religion. Again, you wouldn't know it to read this book. There are long-standing organisations such as Habitat for Humanity, as well as an endless stream of newer ones, such as the many cities adopting Housing First. There are national organisations, such as the Rental Housing Action Campaign and NAHRO's Housing America Campaign, and there are local ones, such as H.O.M.E.S. in Delaware or PRRAC's Regional Housing Campaign in Baltimore, MD. Given these, and so very many more, the book gives an insufficient account for its selection of authors and the projects they represent.

If what was wanted was a focus not on people of faith (who are campaigning, and have long been), but on faith-based *organisations*, then how, if at all, are their approaches distinctive from others? Here especially the 'faith-based' definition and focus of the book need more explanation. With an admirable mix of compassion and grit throughout the book, core concepts of belonging, dignity, and companionship between those housed and those not are explored alongside a view of integral human development that includes spiritual needs and a querying of the relationship between discipleship and citizenship. But, with the exception of the latter, I'm not at all convinced of the distinctiveness of these ethics as being unique to faith-based organisations.

But I live in a very different social context and am perhaps inclined to forget that vast swathes of American Christians mimic a strict personal/political division in their imagination of their faith, are relatively wealthy, and habitually complacent about it (a far cry from the preferential option for the poor described by the book's Latin American editor), and the extent of their charitable giving, when adjusted for tax relief, is questionable. Maybe claiming the above approaches as a distinctive part of 'faith' will be recognisable and helpful in the context of the USA.

For all the amazing inter-personal, regional, and multi-religious stories recounted in this volume, one really has to remember that we are talking about the richest country in the world and the horrors it wreaks on its own people through its military-industrial complex, systematised poverty, lack of access to health care, and lack of affordable housing; these are techniques of its capitalist vision and not accidents. In this context, homelessness is a form of terror – both the experience of it and the threat of it; which perhaps helps explain why faith speaks so cautiously in the face of it, at least in this book. An analysis of this, their *national* context, evades most of the authors of the book (perhaps another neo-liberal-norm, avoidance of a state-critical view?). James Spickard's chapter is an exception, but remarkable there is his reliance on literature about the UK, a quite different context to his own, particularly in terms of racialisation.

Overall, at 364 pages and with many of the chapters taking over 8000 words to make mostly uncomplicated points, this is a book in need of a radical edit. Despite

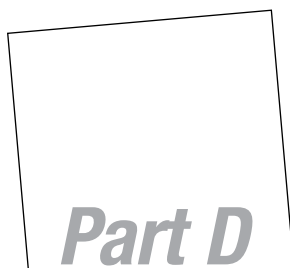


an introduction that has been obviously re-written/expanded to try to put a structure on the material, there is too little connective tissue and the volume doesn't hang together as a whole. And yet the stories it tells have stayed in my mind, the alternative visions it desires and articulates have power to motivate and focus attention, and its many calls for change deserve to be heard.

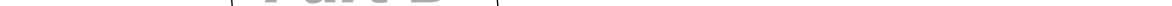




# Book Review



***Part D***





Jan Váně a František Kalvas (2021)

## ***Homelessness: Probes to Excluded Environments***

Plzeň: Západočeská univerzita v Plzni

At least since 2013, the issue of homelessness has become a dominant part of the public discourse in the city of Pilsen in the Czech Republic. Jan Váně and František Kalvas's peer-reviewed book *Homelessness: Probes to Excluded Environments* proves the seriousness of homelessness in Pilsen. Pilsen is the capital of the Pilsen region, and it has a population of 170,000, which ranks it fourth among the largest cities in the Czech Republic. Therefore, it is no surprise that homelessness is an integral part of the daily life of the city. Between 2013 and 2019, the authors conducted research comprehensively mapping the situation of homelessness throughout the city.

The book consists of seven chapters, five of which present the authors' applied research and one case study using data from the original research, and it is focused on testing the theory of deprivation. The authors' use of data not only serves as an example of methodological approaches to the study of homelessness, but its practicality also acts as a support and a source of data for the Department of Social Services of the City of Pilsen, which is dealing intensively with the situation. The book could also serve as a textbook for applied research.

In the first chapter, the authors present the basic terminology and elementary theoretical basis that is necessary to introduce the reader to the issue of homelessness. The authors base their work on the ETHOS typology (European typology of homelessness and housing exclusion in the Czech Republic), which consists of four main conceptual categories and 13 operational subcategories. Due to the extent of this typology, the authors narrowed down the categories based on the lifestyles of the actors (people experiencing homelessness) and their appearance in public.

In the second chapter, the authors focus on the phenomenon of manifest homelessness, which, along with the third chapter (which discusses latent homelessness), forms the core of the whole publication. The main tool of the research was a questionnaire survey, which was preceded by elaborate preliminary research in the form of group discussions and monitoring of selected places with many people experiencing homelessness and their sleeping locations. The preliminary research gave

the authors a broader insight into the topics that are most difficult for people experiencing homelessness in Pilsen. The topics identified generally covered the causes of homelessness and the needs and livelihood strategies of those people who are experiencing homelessness. The chosen methodological steps enabled the authors to map the phenomenon of manifest homelessness and to achieve high validity and reliability in their data. The questionnaire itself is also an integral part of the publication, including a graphical representation of the places where the data collection took place. The reader can thereby acquire a detailed idea of what was emphasised in the questionnaire.

A total of 238 completed questionnaires were obtained and processed (p.62). The second chapter reveals the remarkable finding that the number of women on the street has increased. This is especially true in the cohort of up to 30 years old. Compared to previous years, the ratio of men and women on the street was the same (p.65). This finding is different from the findings presented in other homelessness publications, which generally conclude that there are more men than women experiencing homelessness in all cohorts. Another important finding is a figure typical of the Czech Republic, i.e., that over two-thirds (70%) of people experiencing homelessness have a low level of education, which increases the chances of them ending up on the streets (p.66). In the second chapter, the authors emphasise, among other things, people experiencing homelessness' time spent without permanent housing. They found that the largest group of people experiencing homelessness (32.4%) had gone over five years without stable housing. This suggests that more than a third of people experiencing homelessness have a significantly reduced chance of reintegrating into mainstream society. If the authors assume that a period of three or more years spent on the street significantly reduces the will to resocialise, then there is a significant problem, and not only in the city of Pilsen (p.67).

Given the limits set by the space allotted for review, I will discuss other findings only briefly. The rest of the chapter also details the findings on forms of housing, indicating favourable prospects for the introduction of forms of reintegration, such as the Housing First and Housing Led programmes. The battery of questions in the survey also look at the knowledge of social services that are being set up in Pilsen and the types of missing documents that are a common obstacle to resocialisation, which the authors summarise into 12 strategies. However, the greatest benefit of this chapter is that it was de facto the first targeted research in the Czech Republic (the research took place in 2014) that examined in detail the economic strategies of livelihood via a census for a particular city.

Perhaps the key finding is to refute the common notion that people experiencing homelessness live primarily on illegal activities, such as theft and prostitution. On the contrary, the findings show that the basic source of income is from legal activi-

ties, such as social security benefits and informal work (part-time jobs, undeclared work, or casual jobs). The reason for informal work is understandable given the fact that most people experiencing homelessness are affected by foreclosures. The last part of the research monitored people experiencing homelessness' levels of life satisfaction and presented a time frame (event history) to conclude the chapter.

The third chapter examines the financial and living situations of people at risk of homelessness due to precarious housing situations. This phenomenon is referred to as "latent homelessness," which endangers a significantly large group of the population in the Czech Republic. According to the Czech Statistical Office data, 8.6% (now 9.5%) of the population of the Czech Republic were below the income poverty line at the time of the research in 2015. Because the research focused on latent homelessness, the authors' attention was centred mainly on Pilsen hostels. Hostels contain people who are experiencing latent homelessness. The reason why there are many hostels is that Pilsen is an industrial city. Preliminary research consisted of analyses of methodological possibilities for understanding individuals and groups at risk of homelessness. It was necessary to resolve the locations of the people concerned and to ensure access to these locations.

Next, the authors present their own questionnaire. The sample of people at risk of latent homelessness consisted of 718 respondents, and the structure of respondents shows very similar characteristics to the research on manifest homelessness. Most notably, 70% of respondents had a low level of education (p.113). In addition to education, research questions also focused on citizenship. Perhaps unsurprisingly, 40.5% of the surveyed respondents were not Czech citizens. These individuals came to the industrially developed city of Pilsen for job opportunities. Their most common problem is generally the absence of documents and a lack of health insurance. The authors point to this as a key obstacle to the reintegration of foreigners from hostels. Looking at housing, if the limit of all manifest homelessness is estimated by the authors within three years, then latent homelessness will not be different. According to the research, 20.7% of people who have lived in Pilsen for more than three years are in hostels (p.119). The chances of reintegration are therefore slim. If we think about the interconnection of demographic indicators (gender, age, citizenship), housing, and documents, we find unfavourable prospects for the future of this population. People face so many unfavourable factors that prevent them from reintegrating properly that, under the pressure of a difficult situation, they often give up and resign from reintegration efforts altogether.

In this chapter, the authors deal, among other things, with children who are present in an environment of precarious living. The issue of latent homelessness could be better elucidated if the authors described and analysed the backgrounds of children in hostels. This would contribute to a better description of the phenomenon. The

reader would better understand the conditions in which generations of children live, that the environments of hostels reproduce the living strategies of these children's parents, which adapt to unfavourable environments. They fail to escape from the trap of a cyclical transition between latent and manifest homelessness. In the section describing the descendants of the respondents, we see only basic variables, such as the number of children and their ages (pp.128-133). Within another set of questions, on the basis of which the authors ascertained the knowledge and use of social services among the respondents, it was found that 33.5% of respondents (calculated from the sample of respondents who have children) admitted to cooperating with the Social Institution for the Legal Protection of Children (OSPOD) (p.155). This agency is a public authority whose task is the legal protection of children in adverse family condition. In my opinion, it would certainly be interesting to focus on the type of cooperation between families and this authority. In the text, the authors also look at the possibilities for change in the uncertain housing situation. The degree of success is also closely linked to the fluctuations between hostels with low incomes and an overall very precarious financial situation. This is related to the forms of precarious work, high rents for affordable housing, and, last but not least, livelihood, for which the main source of funding is social security benefits.

As a supplementary chapter of the presented publication, the authors map needs, satisfaction, expectations, and predict developments in the area of social services in Pilsen. Based on quantitative data, the sample comprised 900 respondents and was collected in a quota form. The groups interviewed consisted of seniors (65+), families with children, the physically disabled, persons at risk of social exclusion, and foreigners. For the purposes of the book and the goal of its focus, this chapter focused mainly on people at risk of poverty, who accounted for 7.5% of the total sample. It is important to emphasise that out of the surveyed sample of 167 people living below the income poverty line, 49.4% confirmed that they would accept social housing offers mediated or arranged by the city (p.221). This demand suggests that concepts such as Housing First or Housing Led would have more than a certain clientele in Pilsen. The remaining groups are interesting but a secondary element to homelessness. However, we must not forget that these groups may also be at risk of poverty.

The subsequent chapter, titled "When respondents are asked about what reasons led to their homelessness, what do they mean when they choose the category 'other' as their response?" is a continuation of research into latent homelessness. Its aim is to verify what respondents mean by using the answer 'other' for the reasons leading to their loss of stable housing. This answer was used frequently for this question (40% of respondents). This raises the issue of whether there was a social phenomenon in the hostel environment, a cause that had not yet been addressed (p.231). For this reason, Váně chose to use an ethnographic approach,



which he carried out in hostels. Originally, a quantitative survey was conducted within the city of Pilsen to this end (see the third chapter). In addition to participatory observation, 28 in-depth interviews were conducted, which revealed a number of individual and structural causes leading to cyclicity in the study environment. Examples included frequent debt, unsatisfactory reproductive strategies (multiple families), ethnicity, which acts as a barrier in the effort to obtain more adequate housing (especially the Roma ethnic group), and high rents for standard flats. The result of the chapter is that the environments where the respondents live are highly stigmatised, depressing, and full of anger. The segregation of these individuals reinforces the reproduction of poverty patterns inhabited by 'other' individuals who have the highest chance of reintegration and stable housing if caught early. At the end of this chapter, Váně suggests several possible reasons that led to the situation in Pilsen. One of the six possible recommendations is analysing the awareness of the pilot project of social housing among the latent homeless, which the author points out in the subsequent chapter (p.254).

In the penultimate chapter, "Merit versus necessity: Housing First and its forms in practice," Váně focuses on the principles of merit and need, along with their role in the implementation and introduction of the Housing First concept in Pilsen as a solution, which was implemented in Pilsen under the Social Housing Programme. From a methodological point of view, the research was conceived as a combination of qualitative approaches focusing on various forms of interviews. Participatory observation, unstructured interviews, subsequent semi-structured interviews, and in-depth interviews were used, both with NGO clients and with NGOs and political staff themselves, who significantly influenced the programme during its implementation, by either enforcing or blocking it. Váně points out the ambivalence of opinions in Housing First in Pilsen. Many talks about providing housing for those who need it most, so that a procedure based on the principle of a 'selection procedure,' which is dominated by the principle of merit, is used. The Housing First program, presented by representatives of the city of Pilsen, faced barriers (many different opinions and ideas from NGOs and the city; difficult organisation) that were constantly modified and unintentionally complicated during operation. Furthermore, the author detected complications in the implementation of the Housing First programme, with leaks of necessary information and, conversely, their concealment, when the boundaries and rules were variously bent by both applicants and founders according to the ideologies of the relevant actors.

In the end, the rules did not have a decisive influence but were determined by the power of the 'patrons' (these were mostly individuals from NGOs who managed to push their clients within the system). The dispute between the city and the NGOs was framed primarily by controversies and speculations about the enforcement of clients at the expense of the introduction of clear rules. The decision-making was

framed by the questions of who needs more and who deserves more and how to push your client into the appropriate program regardless of the established rules. Unfortunately, as the authors put it, “The Housing First programme and law enforcement will continue to depend on the enthusiasm and perseverance of small groups, such as NGOs and relevant local authorities” (p.283).

In the final chapter, “Does higher deprivation increase religiosity? Case study of homeless people in Pilsen conclusion,” we are acquainted with the results of a study in which both authors participated and that questions whether religiosity is increased by a higher rate of deprivation in manifest people experiencing homelessness. The authors came from the empirically demonstrable assumption that deprivation is often an inseparable part of the lives of people experiencing homelessness, not just in economic terms, but also in psychological, social, organic, and ethical terms. The authors’ initial hypothesis was that “Homeless people will be more likely to admit religious belief than the general population” (p.294). The significance of the tested hypothesis lies in the fact that the Czech Republic is considered to be one of the most secularised countries in the world. This hypothesis would therefore be unique in this environment if it were verified. As a result of the comparison between two populations in Pilsen—the general population and the homeless population—using regression analysis, it was found that it was not possible to prove the statistical significance of the hypothesis. Despite the failure to confirm their hypothesis, the authors emphasised the theory of deprivation, which future research should not neglect, due to the fact that increasing religiosity can be seen in the two lowest classes of the Czech population (p.309).

Despite some of the criticisms toward, and my own comments on, this book, its main goal, which consisted of a detailed mapping of the content of apparent and latent homelessness in Pilsen, was accomplished. Many years of research, which the authors presented in individual chapters, are documented by a series of graphs. The publication also has a rich appendix containing maps from the locations of individual data collection, which comprehensively complement the plasticity of the phenomenon of homelessness in the city of Pilsen. This is the first publication to focus on an overall analysis of homelessness in a particular city in the Czech Republic. The book has been published in English and is therefore accessible to a wide foreign audience, giving it a unique opportunity to convey an idea of how homelessness research is carried out in the Czech environment. The authors are currently conducting another series of studies on the phenomenon of homelessness. You can certainly look forward to other great publications like this one.

***Nikol Kubátová***

*Department of Sociology, University of West Bohemia in Pilsen*



This publication has received financial support from the European Union Programme for Employment and Social Innovation “EaSi” (2014-2020)



Funded by the European Union. Views and opinions expressed are however those of the author(s) only and do not necessarily reflect those of the European Union or the European Commission. Neither the European Union nor the granting authority can be held responsible for them.



European Observatory on Homelessness

# European Journal of Homelessness

The European Journal of Homelessness provides a critical analysis of policy and practice on homelessness in Europe for policy makers, practitioners, researchers and academics. The aim is to stimulate debate on homelessness and housing exclusion at the European level and to facilitate the development of a stronger evidential base for policy development and innovation. The journal seeks to give international exposure to significant national, regional and local developments and to provide a forum for comparative analysis of policy and practice in preventing and tackling homelessness in Europe. The journal will also assess the lessons for Europe which can be derived from policy, practice and research from elsewhere.

*European Journal of Homelessness is published by FEANTSA, the European Federation of National Organisations working with the Homeless. An electronic version can be downloaded from FEANTSA's website [www.feantsaresearch.org](http://www.feantsaresearch.org).*

FEANTSA works with the European Commission, the contracting authority for the four-year partnership agreement under which this publication has received funding.

The information contained in this publication does not necessarily reflect the position or opinion of the European Commission.

ISSN: 2030-3106 (Online)

■ **European Federation of National Associations Working with the Homeless AISBL**  
*Fédération Européenne d'Associations Nationales Travaillant avec les Sans-Abri AISBL*

194, Chaussée de Louvain ■ 1210 Brussels ■ Belgium  
Tel.: + 32 2 538 66 69 ■ Fax: + 32 2 539 41 74  
[research@feantsa.org](mailto:research@feantsa.org) ■ [www.feantsaresearch.org](http://www.feantsaresearch.org)

