In a recent Eurobarometer, 62% of EU citizens have expressed that recent world events such as the COVID-19 pandemic, the Russian aggression against Ukraine, the climate crisis, unemployment, and food and energy costs “somewhat” or “greatly” affected their mental health.¹

Individuals experiencing mental health challenges are particularly vulnerable to three primary factors contributing to homelessness: poverty, social disconnection, and personal vulnerability. Due to their often limited capacity to maintain employment, they can face financial constraints. Delusional thinking may prompt withdrawal from social connections, reducing their support network and leaving them with fewer resources to navigate difficult circumstances. Additionally, mental illness can undermine an individual’s resilience and resourcefulness.

These are all reasons why people with mental health problems are over-represented among people experiencing homelessness. However, treatment reaches less than one-third of homeless individuals experiencing mental health issues. Major obstacles to accessing services include service coordination issues and challenges in obtaining health insurance. Another significant hindrance to receiving essential health and social care is the presence of stigma.

Over the last decade, the World Health Organisation (WHO) has regularly promoted the goal of improving global mental health. While it has often spoken of the importance of social support and other non-pharmacological alternatives, its efforts have contributed to the spread of standard biomedical health care. On 10 June 2021, WHO published a document entitled Directions for Community Mental Health Services: Promoting Person-Centred and Rights-Based Approaches.² To a large extent, the authors have adopted an agenda for change and a reconceptualisation of mental health, calling for a complete change. Highlighting this shift, the following excerpt from the WHO document underscores the often-neglected social factors that impact mental health:

Critical social determinants that affect people’s mental health, such as violence, discrimination, poverty, exclusion, isolation, job insecurity or unemployment, lack of access to housing, social safety nets and health services, are often overlooked or excluded from mental health policies and practices. (…) It creates a situation where an individual’s mental health is predominantly addressed within health systems, without sufficient interface with the services and social structures needed to address the determinants mentioned above.

¹ https://europa.eu/eurobarometer/surveys/detail/3032
² Guidance on community mental health services: promoting person-centred and rights-based approaches: https://www.who.int/publications/i/item/guidance-and-technical-packages-on-community-mental-health-services#:~:text=Main%20guidance-,Guidance%20on%20community%20mental%20health%20services%3A%20promoting%20person%2Dcentred%20and%20rights%2Dbased%20approaches,-Seven%20technical%20packages
The various articles in this magazine provide insights that contribute to a holistic understanding of mental health and homelessness. Most of the articles show commonalities across Europe. Some of them refer to Housing First approaches, where a recovery-focused strategy is adopted to improve well-being, reduce the impact of mental health, improve quality of life, and promote self-sufficiency.

For example, Etxane O. Scott of Autism Europe discusses the heightened risk of homelessness for autistic individuals, and consequent impact on their mental health. Autistic People Experiencing Homelessness: Double Invisibility? unveils the challenges faced by people with autism and experiencing homelessness in accessing services, and calls for tailored housing solutions to address their needs. Scott highlights that shelters and housing solutions are often non-adapted to the specific requirements of autistic people.

Similarly, the article Rethinking Integrated Approaches to Homelessness and Mental Wellbeing: Solutions and Good Practices by Caterina Cortese and Lucia Fiorillo of Fio.PSD, promotes a nuanced approach to mental health and homelessness, advocating for a multidisciplinary, community-engaged, and holistic strategy. The authors highlight a positive example in Udine, Italy, showcasing collaboration and cultural awareness in a bottom-up integrated service model.

Another good example of mental health integration can be found in the 2019-launched Westminster VAWG Housing First Project. Amy Smith explores this project, and how it is addressing homelessness and multiple disadvantages among women. The article Housing First for Women: How Westminster’s Violence Against Women and Girls (VAWG) Housing First Project Has Contributed to Improvements in Mental Health for Its Service Users outlines the project’s mental health


4 Homelessness is a health issue: A truly comprehensive European approach to mental health must consider the needs and access of people experiencing homelessness: https://www.feantsa.org/en/feantsa-position/2023/06/20/homelessness-is-a-health-issue-a-truly-comprehensive-european-approach-to-mental-health-must-consider-the-needs-and-access-of-people-experiencing-homelessness
care implementation through Housing First principles, user-focused approaches, and filling gaps in statutory mental health services. Recommendations include creative referral strategies and designing flexible mental health services to engage women with multiple disadvantages.

In **Addressing the Intersection of Homelessness and Mental Health: A Call for a Psychosocial Approach and Comprehensive Solutions** Fatima Awil and Gina Delaney of Mental Health Europe advocate for tackling the intricate link between homelessness and mental health through a psychosocial model. Personal experiences highlight the profound impact of the challenges, emphasising the need for an inter-sectional approach. The piece calls for sustained commitment, human rights-based policies, and genuine co-creation with individuals who have lived experiences. Effective practices, such as Ireland’s mental health policy, are highlighted as models for addressing housing needs in conjunction with mental health challenges across Europe.

In his article, **The Challenge of Supporting Homeless People with Mental Health Issues: Addressing Complex Needs Through Housing First in Barcelona and Its Metropolitan Area**, Eduard Rafel delves into the intricate task of aiding homeless individuals with mental health issues. Despite Housing First providing stability, a significant lack of trust in public services hinders essential support access. The article emphasises the significance of person-centred care, the need for innovative solutions for severe cases, and the importance of coordinated social and healthcare responses.

The article **For Undocumented Migrants, Mental Health Starts with Residence Papers** by Louise Bonneau, PICUM, discusses research indicating elevated rates of depression, anxiety, and PTSD among undocumented migrants in Europe. It explores the impact of housing exclusion, homelessness, and immigration detention on their mental health. The article calls for a shift in European migration approaches, emphasising the recognition of housing as a right, decriminalisation of support, and securing residence status to address mental health inequalities among undocumented migrants.

Each article adds a layer of complexity, which is why we encourage readers to explore each piece individually. From articles that offer a more theoretical analysis of the issue, we move to others based on the experience of caring for people with mental health problems in homeless services. These analyse where the difficulties and challenges on the ground lie and suggest new approaches and ways of working to overcome them.