



THE NETWORK  
OF MAJOR  
EUROPEAN  
CITIES

## Cities' Strategies Against Homelessness

First report of the EURO CITIES  
Working Group on  
Homelessness

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### EUROCITIES

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EUROCITIES is the network of major European cities. Founded in 1986, the network brings together the local governments of 130 large cities in some 34 European countries. EURO CITIES represents the interests of its members and engages in dialogue with the European institutions across a wide range of policy areas affecting cities. These include: economic development, the environment, transport and mobility, social affairs, culture, the information and knowledge society, and services of general interest.

EUROCITIES website: [www.eurocities.org](http://www.eurocities.org)

## Participants of the Working Group:

City of Copenhagen	Hanne Fabricius
City of Genoa	Alessandra Risso
City of Glasgow	Catherine Jamieson
City of Helsinki	Taru Neiman, Sanna Sunikka
City of Newcastle	Neil Munslow
City of Oslo	Tilde Knudtzon, Harald Navdal
City of Riga	Reinis Freimanis, Daiga Limmane
City of Rotterdam	Christl van Gerven, Jos Maaskant
City of Stockholm	Anna Mattson, Nina Ström
City of Utrecht	Hans de Haan, Joke Roelofs
City of Vienna	Gerhard Eitel, Christine Petioky
City of Warsaw	Anna Jankowska-Bichta, Teresa Sierawska, Joanna Dolinska

## Working Group meetings

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## FOREWORD

Homelessness cannot be reduced to housing shortage. Often it has multiple causes and arises from complex individual problems.

Hence there are no simple and general solutions that are applicable to the problem of homelessness, as this survey of cities' strategies against homelessness performed within the frame of the Eurocities' Social Affairs Forum, clearly shows.

The report points out integrated chain strategies and a holistic perspective as the most successful way to combat homelessness. And it is a good example of what can be accomplished through co-operation.

As the Chairman of the Social Affairs Forum I want to thank the participating cities and their representatives for their deep commitment in this very important matter.

June 2006

**Kent Andersson**

**Vice Mayor of Malmö**

**Chair of EUROCITIES Social Affairs Forum**

## INTRODUCTION

Homelessness is a fact of urban life throughout the European Union. Moreover, the homeless are among the socially most excluded. In November 2000, the heads of state and government of the member states of the European Union acknowledged this observation by agreeing on the need to take steps to make a decisive impact on the eradication of poverty and social exclusion. They also agreed that policies promoting social inclusion should be based on an Open Method of Coordination. National action plans had to be drawn up by all member states to combat poverty and social exclusion. In the years to follow, homelessness developed from an urgent policy issue in some member states to one of six key priorities for all 25 member states.

At a local level, cities develop and implement policies and services for the homeless every day. In such a way, European cities are making the EU strategy for social inclusion work at a local level. As part of the EUROCITIES network, the Working Group on Homelessness is bringing cities from member states together to exchange knowledge and best practices.

This report is about the progress the working group has made since the start in October 2004.

## EUROCITIES

EUROCITIES is the network of major European cities. Founded in 1986, the network brings together the local governments of more than 120 large cities in over 30 European countries. EUROCITIES provides a platform for its member cities to share knowledge and ideas, to exchange experiences, to analyse common problems and develop innovative solutions, through a wide range of Forums, Working Groups, Projects, activities and events. EUROCITIES works along 3 strands of activities:

- Networking - Sharing and improving knowledge
- Lobbying - Developing and influencing policies
- Campaigning - Raising public awareness

The network is active across a wide range of policy areas including:

- economic development and cohesion policy
- provision of public services
- environment
- transport and mobility
- employment and social affairs
- culture
- education, information and knowledge society
- governance and international cooperation.

These policy areas are addressed within six different thematic forums, in which different groups of cities participate.

## The Social Affairs Forum

One of these forums is the Social Affairs Forum (SAF). The SAF, currently chaired by the City of Malmö, meets three times a year and is focusing on two main goals:

- promoting action to combat poverty and social exclusion
- promoting equal opportunities for all, respecting diversity.

The SAF supports exchanges of experience and know-how among cities working to tackle poverty and social exclusion and to eradicate all forms of discrimination. Furthermore, the SAF seeks to strengthen the involvement of local authorities in the development and implementation of national policies for social inclusion and employment, notably in the framework of the European Union's Lisbon Strategy. Finally, the SAF works on improving the design and implementation of policies including closer cooperation between the responsible authorities and service providers at local, regional and national levels. At the moment, 47 cities from 16 member states take part in the SAF.

Specific policy issues are being addressed in working groups, in which different coalitions of cities take part. These working groups, installed by the SAF, report to the SAF about their progress for other cities to learn from their experience. Within the SAF there are eight working groups: Employment; Health and Well-being; Housing; Inclusion through Education; Migration and Integration; Social Inclusion; Urban Security; Homelessness. All working groups strive for the same two overall goals as does the SAF, but have specific goals within their respective policy areas as well.

## Working group on homelessness (WGH)

The establishment of the working group on Homelessness is a direct result of the work of the Social Affairs Forum. At the Vienna meeting of this Forum in October 2003 the Vienna support system for homeless people has been presented. In the following discussion some participants suggested the creation of a working group about this issue to compare the efforts of several cities by tackling and prevent homelessness.

After intense discussions between many cities, the Working Group on Homelessness (WGH) was established in 2004. The WGH is chaired by the city of Vienna and currently has twelve members: Copenhagen, Genoa, Glasgow, Helsinki, Newcastle-Gateshead, Oslo, Riga, Rotterdam, Stockholm, Utrecht, Vienna and Warsaw.

### Working group objectives

The EURO CITIES WGH has both strategic and operational objectives.

#### **Strategic objectives:**

The WGH is trying to contribute to the:

- overall reduction of the number of homeless people
- elimination of homelessness for families
- abolition of long-term homelessness (more than 2 years in transitory institutions).

#### Operational objectives:

To reach these strategic objectives, the members of the WGH are trying to:

- develop European quality standards in services for homeless people as well as in services to prevent homelessness and to sustain accommodation
- identify good practices on empowerment processes
- point out policy recommendations based on a comparison and analysis of cities' strategies to prevent and tackle homelessness.

The main focus of the WGH so far has been on a comparison of the way the issue of homelessness is being treated in the member cities. The purpose of the group is to share best practices on the means of reducing homelessness and the exclusion of vulnerable people from mainstream housing markets. The WGH has tried to identify the dimension of homelessness, the resources available in each member city to deal with this problem and the strategic and legislative framework services are provided within. Gradually there has been a transition from identifying irreconcilable differences to the recognition of common areas of practice.

The work of the WGH can be broken down into the following areas:

#### **Process**

The group used a common process to describe the dimension of homelessness, services available and the context in which they are provided. A model was developed for the collection and organisation of a wide range of data. This framework was then used to facilitate comparisons between partners and to identify areas of common concern.

#### **Practical initiatives**

From the above the group identified good practice that could be developed into a strategic model applicable to other cities. We have called the model the "integrated chain". This involves providing a co-ordinated continuum of diverse services working under an agreed strategic framework that seeks to:

- Prevent homelessness
- Minimise and manage crises
- Support people to independence

The members of the WGH recognize that not all cities will have sufficient resources to adopt all aspects of the model. However, it should be possible to apply the general principles and to use the model to prioritise where to focus limited resources and in doing so to secure best value from those resources.

## Policy

The group also identified policy and legislative obstacles that are outside of its direct control. The primary area, aside from funding, was the lack of fit between European, National, Regional and Local arrangements. The group is well placed to act as a knowledge platform for dialogue with policy makers to help to improve the linkages between large scale policy development and practice on the ground.

## Context

When the EU Social Inclusion Strategy, as part of the Lisbon strategy, was launched in the year 2000, it was agreed that the fight against social exclusion would have to be based on the Open Method of Coordination (OMC), taking into account the principle of subsidiarity. This means that in this field there is no binding EU-legislation: the responsibility for policy development and implementation first and foremost lies with the member states and their national, regional and local authorities in cooperation with the full range of bodies concerned, in particular the social partners and NGO's. Applying the OMC therefore will allow for both coherence and diversity of action at national level, though some degree of coherence was considered to be necessary in order to facilitate a process of mutual learning. However, policies aimed at the objective of fighting social exclusion can vary in nature and their implications for member states and their target groups. Differences in the approaches of member states in dealing with these problems will result in solutions and priorities reflecting their individual circumstances.

Within the framework of the Lisbon strategy, applying the OMC also meant that all member states were to draw up National Action Plans to combat social exclusion and poverty aimed at four general objectives, adopted by the European Council. The NAP's had to:

- facilitate participation in employment and access to all resources, rights, goods and services;
- prevent the risks of exclusion;
- help the most vulnerable;
- mobilise all relevant bodies in the fight against social exclusion.

So far, there have been two rounds of NAP's: 2001-2003 and 2003-2005. When joining the EU on January 1<sup>st</sup>, 2004 the ten new member states also had to develop a NAP for the period 2004-2006. All NAP's are to be synchronized in 2006 when the third round of NAP's will start. The member states have reported on their progress periodically<sup>1</sup>. Over the subsequent rounds of NAP's, homelessness gradually has become a more important issue. At the same time, the involvement of the local level in the development of NAP's has not been satisfactory for many local authorities in the member states. However, given the fact that homelessness is most manifest in cities throughout the EU, the active participation of local authorities in developing and implementing NAP's is a major factor for the success of the Lisbon Strategy.

To fill this gap, EUROCTIES has made some "proposals for strengthening the Open Method of Coordination"<sup>2</sup> by stressing the key role cities play in achieving the Social Inclusion Strategy. One of the recommendations is that "the local perspective becomes integral to all European

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<sup>1</sup> *First Joint Inclusion Report (2001); Second Joint Inclusion Report (2004); Report on NAPs/Incl of new Member States (2005); Joint Report Social Protection & Social Inclusion (2005)*

<sup>2</sup> *EUROCTIES proposals for strengthening the 'Open Method of Coordination'. A contribution to the evaluation of the OMC in the context of the EU Social Inclusion Strategy (June 2005)*

level OMC instruments”. One of the ways of achieving this would be the setting up of a database of good practices. EUROCITIES also recommends: “the development of greater harmonisation of existing national systems of indicators and statistics. EUROCITIES believes this would promote transparency and comparability among Member States, and thereby help drive the inclusion process forward”. It is to these two recommendations in particular that the WGH has been aiming to contribute in a concrete way. This report reflects these efforts.

## DEFINITIONS AND CLASSIFICATION SCHEMES

The first task of the WGH was to find a common frame of reference for comparing and discussing policies and services of the member cities. When addressing the issue of definitions of homelessness, it appeared that within the WGH there was less common ground than expected. Cities came up with very different numbers. In fact, the numbers of homeless in each city varied much more than, based e.g. on their population numbers, might have been expected beforehand. That's why the issue of a 'common language' had to be dealt with first of all and a shared definition had to be adopted. The WGH agreed to use the definition of homelessness ETHOS as developed by FEANTSA, the European Federation of National Organisations working with the homeless. Once the issue of definition was solved, the WGH set out to develop various models for comparison and classification that were used as working tools.

### The ETHOS Definition

Homelessness is one of the main societal problems dealt with under the EU Social Inclusion Strategy, requiring member states to ensure access to decent housing, to prevent the risks of (housing) exclusion and to help the most vulnerable in society. Policies addressing and preventing homelessness are increasingly developed simultaneously and therefore demand a broader conception of homelessness than the visible face of rough sleeping to include people who live in vulnerable situations at risk of homelessness or in conditions that amount to 'homelessness'. The prevention of homelessness or the re-housing of homeless people requires an understanding of the pathways and processes that lead there and hence a much broader perception of the meaning of homelessness.

FEANTSA has developed a typology of homelessness and housing exclusion that allows for improved, and more consistent, policy approaches and data collection on homelessness: ETHOS. This was a joint effort of the Data Collection working group of FEANTSA (experts among national homeless service providers) and the European Observatory on Homelessness (researchers from EU15 member states), and ETHOS has been formally adopted by the FEANTSA members.

The ETHOS typology begins with the conceptual understanding that there are three domains which constitute a "home", the absence of which can be taken to delineate homelessness. Having a home can be understood as: having an adequate dwelling (or space) over which a person and his/her family can exercise exclusive possession (*physical domain*); being able to maintain privacy and enjoy relations (*social domain*) and having legal title to occupation (*legal domain*). These dimensions are used to provide four main concepts of: Rooflessness, houselessness, insecure housing and inadequate housing; all of which can be taken to indicate the *absence of a home*. ETHOS therefore classifies homeless people according to their living or "home" situation: *rooflessness* (without a shelter of any kind, sleeping rough), *houselessness* (with a place to sleep but temporary in institutions or shelter), living in *insecure housing* (threatened with severe exclusion due to insecure tenancies, eviction, domestic violence), living in *inadequate housing* (in caravans on illegal campsites, in unfit housing, in extreme overcrowding).

**Table 1: FEANTSA Homeless definition ETHOS (edition 2005)**

Conceptual Category		Operational Category		Generic Definition	National Sub-Categories
ROOFLESS	1	People Living Rough	1.1	Rough Sleeping (no access to 24-hour accommodation) / No abode	
	2	People staying in a night shelter	2.1	Overnight shelter	
HOUSELESS	3	People in accommodation for the homeless	3.1	Homeless hostel	
			3.2	Temporary Accommodation	
	4	People in Women's Shelter	4.1	Women's shelter accommodation	
	5	People in accommodation for immigrants	5.1	Temporary accommodation / reception centres (asylum)	
			5.2	Migrant workers accommodation	
	6	People due to be released from institutions	6.1	Penal institutions	
6.2			Medical institutions		
7	People receiving support (due to homelessness)	7.1	Residential care for homeless people		
		7.2	Supported accommodation		
		7.3	Transitional accommodation with support		
		7.4	Accommodation with support		
INSECURE	8	People living in insecure accommodation	8.1	Temporarily with family/friends	
			8.2	No legal (sub)tenancy	
			8.3	Illegal occupation of building	
			8.4	Illegal occupation of land	
9	People living under threat of eviction	9.1	Legal orders enforced (rented)		
		9.2	Re-possession orders (owned)		
10	People living under threat of violence	10.1	Police recorded incidents of domestic violence		
INADEQUATE	11	People living in temporary / non-standard structures	11.1	Mobile home / caravan	
			11.2	Non-standard building	
			11.3	Temporary structure	

## Cities' strategies against homelessness

	12	People living in unfit housing	12.1	Unfit for habitation (under national legislation; occupied)	
	13	People living in extreme overcrowding	13.1	Highest national norm of overcrowding	

These broad categories are used to identify 13 operational categories that can be used to collect or collate data. They are a flexible enough tool to adapt to different policy purposes: to map the homeless problem (needs assessment), to develop and monitor policies, and to evaluate policies.<sup>3</sup>

This approach confirms that homelessness is a process (rather than a static phenomenon) that affects many vulnerable people and households at different points in their lives. The 2005 Review of Statistics on Homelessness in Europe of the European Observatory on Homelessness states that "Policies to address homelessness include three main elements - prevention, accommodation and support. Prevention policies imply an understanding of both the causes of homelessness and the pathways into homelessness. Accommodation provision involves elements of emergency or temporary accommodation and transitional accommodation as well as permanent housing (with or without support). Increasingly policies to address homelessness recognise the need for support as well as housing and that support is needed for people who are homeless, have been homeless or may become homeless. This understanding of the policy basis indicates the need for an understanding of the process of homelessness and housing deprivation as well as the profiles of homeless people. ETHOS has been developed using this pathways approach."

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<sup>3</sup> The detail of the ETHOS 2005 typology can be found on the FEANTSA web site in various European languages – <http://www.feantsa.org/code/en/pg.asp?Page=484>.

## Development of working tools

The first report of the Working group is published in 2006, based on current policies and statistical and descriptive data from 2004, this was done to facilitate comparison as the cities produced their data at different times.

### Offers for the homeless

The template "Offers for the homeless and the non-homeless) (also known as "designation of measures") was created at the beginning of the working group when participants tried to find a first model to cover all the different kinds of services which can be seen as measures of the work with homeless people.

**Table 2: Model form, Designations of the measures**

Offers for homeless people	Offers for non - homeless people
Temporary programmes to accommodate homeless people	Support to prevent homelessness
Accompanying support programmes	Programmes to safeguard sustainable accommodation
<b>Auxiliary programmes</b>	

### Auxiliary programmes

At the Copenhagen meeting the group decided to use this model as seen in the descriptions below.

## Overall homelessness structure

The template "Overall homelessness structure" has been adapted from a former model used in Vienna. (see Graph 1: Common model form, Overall homelessness structure, on next page)

The idea to create this graph was to show all homeless services which are working in a city, implicit in the model is the aim of improving integration and coordination. The model encourages cities to ask the questions:

- What services are available?
- What is their purpose?
- How do they contribute to achieving the city's aims of resolving crisis, prevention and resettlement ?
- Are the services integrated and coordinated?

The red arrow in the middle of the slide should demonstrate the "integrated chain" or "step by step model", to demonstrate the overall goal of integrated services working together to support and then sustain people at risk of homelessness to the highest possible level of independence, their own flat (at the top of the slide).<sup>4</sup>

Each colour and line represents a level of support services, each box represents a service facility. The blue line at the bottom of the slide represents all services that are not tied to accommodation. The blue line above represents emergency accommodation. The red and orange are different kinds of shelters. The green line supported accommodation in flats. The yellow line represents permanent places for people who are not suitable for independent housing.

## Selected Services

Following the decision to use the FEANTSA definition for their future work, the model "selected services" has been created by the city of Rotterdam after the discussion on definitions at the Glasgow meeting. (see Graph 2: Common model form, Selected services). The intention is to collect more information (number of services, capacity, frequencies of clients) about the local services which belong to the points 1, 2 and 3 (including the subpoints) of the FEANTSA definition.

## Legal and financial context

The scheme "legal and financial context" was a result of the discussion at the Glasgow meeting (see Graph 3: Common model form, Legal and financial context). For some partners it was difficult to illustrate the support measures for the homeless in their cities without an additional explanation of the role and the influence of national policies and legislation.

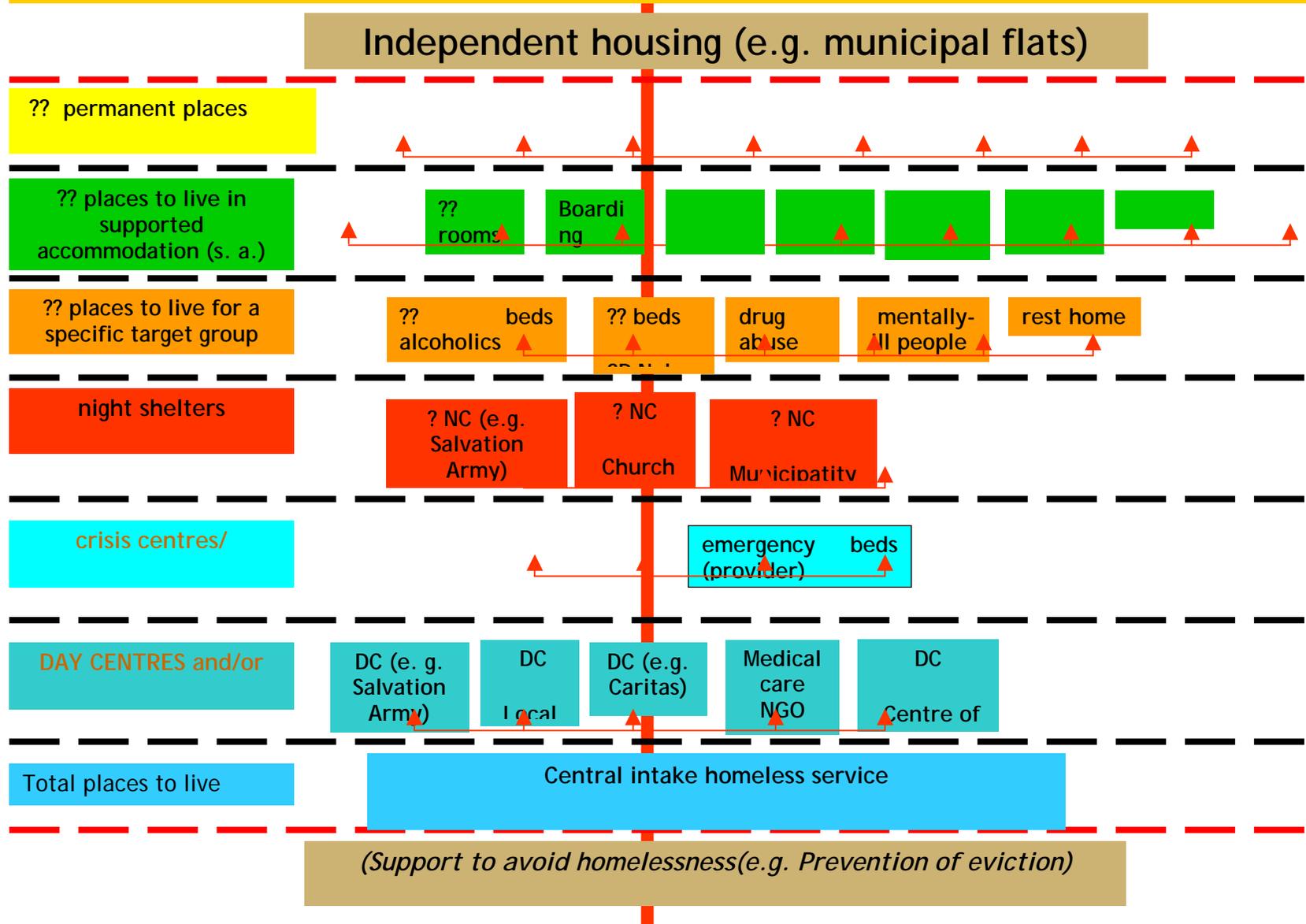
The templates were developed to provide information about the different responsibilities in each country at the national, the regional and the local level. This will help to explain the framework conditions of the work in every city, because in each country there are different dependencies between all public authorities.

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<sup>4</sup> A coloured version of this document is available online at [www.eurocities.org](http://www.eurocities.org).

In all schemes there are boxes for national and local competences, in some schemes there are additional boxes for regional competences and for competences which are shared by 2 or 3 levels of a country (e.g. the slide produced from Vienna shows that in Austria some social competences are shared by the regional and the local level).

# OVERALL HOMELESS STRUCTURE IN ..... 2004



Conceptual category	Operational category	Services			
		Type	Number	Capacity/case load	
Houseless	Temporary accommodation (3.2)	Temporary housing (longer stay)			
		Temporary housing (transitional defined)			
		Temporary housing (no defined time)			
	Nr of pers				
	Yr of count				
	Homeless hostel (3.1)	Short-stay homeless hostel	6 pensions	173 beds	
		Nr of pers			
		Yr of count			
	Roofless	Stay in a night shelter and/or forced to spend several hours a day in a public space (2)	Short-stay hostel		
			Low-threshold/Direct access shelter		
Nr of pers					
Yr of count					
Rough sleepers (1)		Outreach services (fieldworkers)			
		Nr of pers			
		Yr of count			

## LEGAL AND FINANCIAL CONTEXT

Cities framework conditions regarding

*Social housing and homeless integration*

### Federal

e.g.  
national laws of  
fee limitation  
or  
federal rent  
allowances

### Regional

e.g.  
Loans and grants  
or  
Regional housing  
allowances

### Local

e.g.  
Municipal housing  
or  
Prevention of evictions  
or  
Motivation, advice and guidance (Purpose:  
Assist individuals to find a solution to

Regional and local measures  
e.g. Deposit/guarantee for deposit

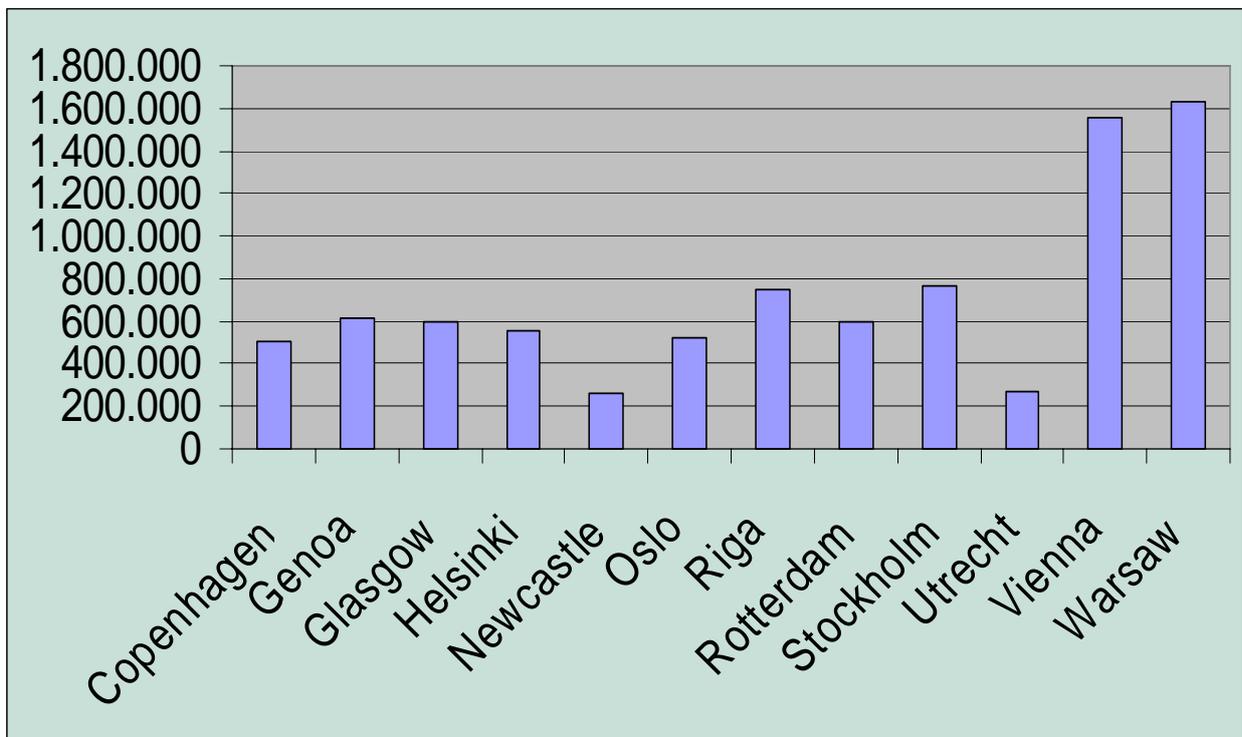
## THE WORKING GROUP

The Working Group compared long-term social practice and policy for preventing homelessness, for intervening in cases of homelessness and for safeguarding accommodation once acquired. In order to understand the overall situation in a city, the spectrum of institutions, measures and provisions has been analyzed and compared with the situation in other cities. The dependencies and interrelations between these resources were also taken into account. Hence, the working group aimed to present a panoramic view of the status quo. On this basis, common European recommendations for services for homeless persons, as well as for provisions for preventing homelessness and sustaining accommodation are presented. Quality standards also include the question as to whether empowerment processes are being encouraged.

### Participants

In this section, some basic data of the participating cities will be presented. First a graph showing the population size of the member cities of the WGH.

**Graph 1: Inhabitants of cities participating in the working group**



The second table shows some data on a set of basic indicators. Unfortunately, not all data are available for all cities. Still, the table displays useful information on the participating cities.

Cities' strategies against homelessness

**Table 3.1 Basic data**

City	residents	female	male	migrants	houses/flats	unemployed	homeless	sleeping rough
Copenhagen	501.664	255.273	246.391	93.186	279.744	14.699	2.000	200
Genoa	610.307	325.348	284.959	30.377	272.146	17.000	800	150
Glasgow	600.000	n.a.	n.a.	n.a.	276.150	18.000	4.000	n.a.
Helsinki	559.330	298.889	260.441	n.a.	305.155	28.775	4.100	500
Newcastle	259.536	134.063	125.473	14.000	n.a.	8.954	2.493	10
Oslo	517.401	265.421	251.980	109.808	266.856	15.351	1.283	50
Riga	735.241	408.059	327.182	1.339	302.037	16.976	1.716	n.a.
Rotterdam	597.000	n.a.	n.a.	267.000	287.000	n.a.	4.600	300
Stockholm	761.721	393.332	368.389	156.441	413.406	19.045	2.309	70
Utrecht	265.000	137.325	127.777	82.057	n.a.	14.119	1.250	300
Vienna	1.553.749	818.151	735.598	242.579	802.800	74.894	3.790	500
Warsaw	1.693.472	911.795	781.677	20.892	728.889	65.537	4.000	n.a.

The problems and the needs of homeless people are very similar in all cities. The resolution of these needs is affected by the coordination and efficiency of the practical support measures in many ways.

To compare the practical support for the homeless, the members of the group took into consideration the different "framework conditions" - the strategic context in which services are provided - of the cities as much as possible, however the major focus of the group are the practical measures and their results.

## City of Copenhagen

The city of Copenhagen has a population of 501.285 residents in an area of approximately 90 km<sup>2</sup>. Compared to other cities in Denmark, Copenhagen has a relatively higher range of young citizens between 20-34 years, whereas the numbers of children and old people are relatively low. The overwhelming majority of the population is Danish, but within the last 10 years the share of foreign citizens has increased from approximately 8% in 1994 to 11% in 2004. There is a slight decline in population with approximately 1400 migrants a year. There is a relatively high number of single households in Copenhagen. Whilst households with 2 adults account for only 29% of all, single households accounts for 71%. Out of the singles, 145.571 have no children, while 16.332 live as one-parent adults with child(ren).

There are 279.744 apartments in Copenhagen. Nearly half of these are privately rented apartments, whereas 18% are privately owned and 30% are co-operative housing. The tax rate is relatively high, particularly for high earners who pay between 60-70% in tax, while low earners pay approximately 30%. The average income before tax is 26.667 Euro per year. In Copenhagen approximately 45.935 persons live on social benefit payments and the number of unemployed citizens and people on social payment is relatively high, but has declined to 5,3% of the total working force during the last years.

### **Framework conditions**

The Danish law distinguishes between 1) people in housing need and 2) priority homeless people which covers people with heavier social-, mental- and/or abuse problems who are not able to get or keep a home. According to the law, finding homes for those in housing need is the responsibility of the municipality alone, while the costs of homeless shelters and crises centres are shared between municipalities and the state.

Of the rental apartments 20% are co-operative housing societies, out of which the Municipality of Copenhagen gets 33% of vacant apartments for social housing. In 2004, this was app. 1200 apartments, 300 of which were allocated to the homeless and the rest for houseless or other groups in need. The gross total expense on services for homeless adults at shelters and crises centres is 52.133 Mill. Euro before repayment from the State.

### **Aims regarding homelessness**

The City of Copenhagen has 30% of the total capacity of homeless beds in Denmark. Approximately 2000-2400 homeless are registered at shelters and crises centres each year. The number has been constant through the last 10 years, though the share of other ethnicity groups of homeless has grown since the responsibility of taking care of refugees and other foreigners was delegated from state-level to the municipal level.

At shelters and crises-centres (hostels for families and homeless women), 51 different countries are represented. Only 65% has a Danish citizenship, 3 % come from other western

nationalities and 32% from the rest of the world. The largest groups of homeless coming from "the rest of the world" are from Somalia (9%), Morocco (ca. 3%), Iraq (2%) and Turkey (2%).

No homeless people need to live on the streets, since the city is obliged to offer beds for everybody to a maximum fixed price at 240EURO pr. month (which is 50% of the social support that homeless people get). But some prefer to use the money for other purposes than to secure accommodation. Many of these are drug addicts or alcohol abusers, some are mentally ill. The municipality's corps of social street workers estimates the number living on the streets to be app. 50 persons.

### **Main strategies to fulfil the aims**

The strategy against homelessness is focused on the development of targeted support for the different need groups. Copenhagen has also strengthened the provision of outreach social work on the streets and resources for preventing repetitive homelessness. Each of the 15 social centres has now responsibility and workers for both of these purposes. In order to fulfil the support for homeless in need of healthcare, four health wards have been established with one doctor and seven nurses for homeless on the street who do not use the usual hospital system. Furthermore, the development of different kinds of housing with adjusted support and tenancy between shelters and private apartment has been part of the strategy to combat homelessness.

The City of Copenhagen has a range of temporary accommodation, homeless hostels and short-stay hostels. Half of these are owned by the municipality, the other half are contracted from NGOs with running costs paid by the city. There are 596 beds for short stay between one day and half a year, and 293 beds for longer stay from 1-3 years. Furthermore, there are 99 low-threshold and direct access shelters for the winter.

## **City of Genoa**

The city of Genoa is the Mediterranean seaport in north-western Italy, on the Ligurian Sea. It is the capital of Genova *provincia* and of Liguria *regione* and is the centre of Italian Riviera. Located about 120 km south-west of Milan on the Gulf of Genoa, the city of 650,000 inhabitants (over 240 squared km, of which only 75 inhabited) lies mainly on a 30 km long and narrow coastal plain extending through few narrow valleys (along rivers of torrential character) into the western steep slopes (reaching 1200 m high) of the Apennine Mountains.

### **Framework conditions**

In Italy the rent market makes up 12% of the total housing stock compared to an European average of 34% and to the situation of other countries like Germany or the Netherlands, that exceed 50%. This situation responds to an economic logic that makes housing inaccessible even to people with good income.

Caritas estimates that in Italy there are about 52.000 homeless (Italians and immigrants, not illegal). The trend in Italy shows an increase of homelessness amongst women and young adults. In the last few years there has also been an increase of homeless immigrants.

### **Aims regarding homelessness**

The City of Genoa promotes health protection and the quality of life of the community

with a system of Socio-Educational Services for people and families. The policies to protect the right to house include the construction of new council houses (developing ordinary projects, residential and commercial that aren't centred on situations of marginality) and encouraging housing provision through the support to no profit associations' projects. There are specific policies for young couples and for weak groups, stimulating the monitoring of free council houses and reconstructions to support excluded people in relation to the problems of social marginalization.

### **Main strategies to fulfil the aims**

Concerning the issue of housing, it is necessary to activate integration policies with regard to employment and to housing to give substantial answers to homeless needs. For this reason, the municipality of Genoa actuates a specific work project (First Step project to move close the homeless to work), protected labs and workshops.

The municipality of Genoa supports a local network of different social actors in aid of homeless, to give a complete and unitary offer to encourage social reinstatement. For this reason, action is strictly connected to the action of catholic associations and NGOs. Genoa manages the system of "presa in carico in comune" in partnership with local NGOs to find an answer to housing problems and to support social reintegration of people in temporary difficulty. For this reason, the city subsidizes 6 protected labs, 3 workshops and a series of projects, like for example, the First Step project. By data we can see that 50 % of the services for homeless people are used by immigrants (above all for first and quick reception services). This situation requires new services next to traditional services (dormitory, second accommodation, refectories, diurnal services etc.), like mobile street units, to give a psychological and legal support.

The social services are directed to people that are in a state of poverty. They consist of residential and semi-residential interventions, housing support and economical contributions (as seniors, homeless, minors and disables etc.). The services promote their activities with a network system, including public and private actors of the city. The objective to follow up with assessment is enlarging this network, obtaining the largest collaboration and a good co-ordination among the different actors. The services are divided into four groups:

1. Information and Counselling Services: these services give information and orientation on the specific problems of the users (listening centres, street work, counters of social secretariat and of mediatorship to work).
2. Services of first necessity: places free of expenditure for necessary services (food, meals, distribution of clothes, medicines, shower tickets). These Services give also a primary help with ambulatories with facilitate access, house and nursing, transport services for persons with motor disability and economical contribution.
3. Diurnal Services: these services take care of the users for a long period with educative, recreational, rehabilitating activities. The most part of the diurnal services have a stable seat, properly organized (social and recreational, educative and for the advance to work). There are other centres oriented to the territory (territorial educative labs, educative agencies, street education, educative foster care).
4. Residential Services: places where the users can sleep at night. The different night services can be separated in relation to the hospitality duration, to the number of the beds, to the urgency, to the possibility of make use of educational and nursing services, mails etc.).

## City of Glasgow

Glasgow, with a population of around 600,000, is Scotland's largest city and is the commercial capital of Scotland. It is the UK's largest retail centre after London.

### **Framework conditions**

Glasgow is in the process of transforming the way in which it provides homelessness services. The Homelessness Partnership brings together the City Council, Greater Glasgow NHS, the Voluntary Sector (represented through Glasgow Homelessness Network) and the Scottish Executive. The focus of the Homelessness Partnership is to deliver the closure of large scale Council hostels by providing alternative supported living accommodation, support for service users to live more independently, divert new homeless presentations from hostels by providing better assessment and access to more appropriate accommodation, care management and support, and prevent homelessness by offering access to information, advice and support at local levels.

The Council also retains a responsibility to meet its legislative requirements for all homeless people in Glasgow. The plans within this Strategy are complex and far reaching. The complexity reflects much improved cross sector working and joint understanding of the nature and extent of homelessness in Glasgow. New developments such as the stock transfer to Glasgow Housing Association, new homelessness legislation and Supporting People funding have had to be taken into account.

### **Aims regarding homelessness**

The Strategy is being actively implemented, new services are being set up, existing services are being better supported, but an enormous amount of change management, service development and commissioning remains to be done. Through this Strategy, the Council and its partners are committed to a long term vision, in which homelessness in Glasgow is prevented wherever possible. Where homelessness does occur, it will be addressed in a way that seeks to minimize the personal, social and economic damage it can cause. The City of Glasgow aims to address the myths, stereotypes and misunderstandings that cause the exclusion of people affected by homelessness. We also aim to demonstrate in practice our commitment to service user involvement.

This approach will require us to work from a value base that ensures that:

- all people affected by homelessness are treated at all times with respect, dignity and compassion;
- informed and realistic choices of where to live are available in as many areas as possible, and information, advice and advocacy are widely available;
- the rights and aspirations of all people affected by homelessness can be fulfilled in a range of ordinary, diverse ways within ordinary, diverse communities;
- needs for care and support are met in ways that prevent homelessness and repeat homelessness;
- solutions to homelessness are sustainable in the longer term;
- opportunities for personal, social and economic inclusion are made available to everyone affected by homelessness;

- policy and planning decisions are open and transparent and can be influenced by people affected by homelessness;
- service delivery can be informed by all those who use, or may wish to use, the service.

### **Main strategies to fulfil the aims**

The three principal service objectives are to prevent homelessness, to provide "Integrated User Centred Services", and to alleviate homelessness for those who experience it (including rough sleeping). An Action Plan describing actions and timescales is included within the strategy. Implementation of the strategy will be reviewed annually. The Homelessness Planning and Implementation Group (HPIG) will have the lead responsibility for ensuring delivery of actions contained in the strategy. The HPIG will also take responsibility for reviewing progress. This will be done on a partnership basis involving Glasgow City Council, Greater Glasgow NHS and Registered Social Landlords including GHA, the Voluntary Sector and service users.

## **City of Helsinki**

Helsinki is the centre of an economic area which has 1.2 million inhabitants. The city of Helsinki is the capital of Finland and has a population of 560.000 (2002). The Finnish local authorities (municipalities) enjoy a high degree of autonomy. It is their duty to provide such basic services as education, social welfare and health care, and they are also responsible for the construction and maintenance of basic infrastructure. They are therefore empowered to levy municipal and property taxes. The social-welfare and health-care services provided by the city are designed to promote the well-being of children and young people, to prevent marginalisation and to develop services for the elderly, for drug and alcohol abusers and for people with psychological disorders.

### **Framework conditions**

In Finland there is the government programme to diminish homelessness. Then, the governmental housing policy is specified separately for different regions and the capital region programme to diminish homelessness. The government programme to diminish homelessness set as a goal that homelessness should be reduced to the level of 8000 single persons by the end of the year 2004 in Finland. It suggested that homelessness would be best reduced through common housing policy measures. The primary measure would be to create preconditions for increasing the supply of rental dwellings in municipalities. It proposed that non-profit housing associations would be selected 20 % of the occupants in their dwellings from the municipal waiting lists. Proposals included increasing the supply of small dwellings and improving some housing subsidies. According to the plan, sheltered housing and different kinds of supported housing intended especially for groups with multiple social problems should be increased. According to the capital region programme, the action plan to reduce homelessness is done in co-operation between central government and the cities of Helsinki, Espoo and Vantaa. It approved an action plan to diminishing homelessness in the capital region for the years 2002-2005. According to the capital region programme, 10000 new dwellings are produced yearly and additional 1000 dwellings per year will be provided for homeless people.

### **Aims regarding homelessness**

According to the law, the municipalities have to arrange housing for homeless persons. In practice, the homelessness policy depends fully on the decisions made at local level. Each

of the municipalities has its own policy and own way of providing services to homeless people. In the city of Helsinki, the department for housing is responsible for providing dwellings for homeless persons and the social welfare department is responsible for arranging temporary accommodation and support measures.

Homelessness in Helsinki used to exist mainly because of a shortage of cheap rented housing which is caused by recent rapid growth in the city. Helsinki has built almost 1.000 new rented dwellings a year. According to the housing authorities, every homeless without social problems could get a rented dwelling owned by the city of Helsinki.

Today it is also easy to find a flat on the free market. It seems that nowadays the shortage of housing is not the biggest problem.

In Helsinki, homeless people have more difficult problems, substance abuse and mental problems than before and they are indebted. Nowadays poverty, social exclusion, intoxicants and mental problems contribute the most to homelessness. Among the 4000 homeless clients of our office annually, over half are intoxicant abusers and this abuse is often linked to mental problems. In addition, drugs and alcohol tend to form a link to the underworld. Released prisoners are a category with real problems to get a flat of their own. For the most outcast and problematic clients, however, a mere home of their own is not enough. They are not necessarily applying for social housing at all. The growing number of homeless persons is in need of support. The need for support measures is the biggest problem in providing housing. It could be said that short-term homelessness isn't a problem but long-term homelessness is a challenge in Helsinki.

### **Main strategies to fulfil the aims**

The social services department has centralised its services for homeless people in a special social services office. It offers social care services, temporary accommodation and supported housing for homeless people. Social care services include living allowances, care of intoxicant abusers, services for the disabled and services for the elderly. There are over 130 employees in the Special Social Services Office. The service consists of temporary programmes to accommodate and accompanying programmes.

In order to accommodate homeless people, they are lodged in private dormitories and hostels. Helsinki has supported dwellings, supported homes and small dwellings. The supported homes are often target-group-oriented, for example for elderly homeless and for homeless with mental problems. In addition, homeless people have also been lodged in institutions and support dwellings of other, non-profit associations. With the purchase of new dwellings, the city of Helsinki has been able to close the oldest and worst dormitories and hostels. The housing process of our office is called step-wise model. The first step is a hostel or a dormitory, the second a supported dwelling or supported home. And the third is a rental dwelling or small dwelling of social services. An alternative is that a homeless person procures a dwelling on the free market or a dwelling of non-profit housing associations. The accompanying programmes consist of:

- Day centres (some are target-group-oriented: for women, for ex-convicts)
- Employment services (the target groups are people with learning disability, with mental problems or drug and alcohol problems or people who are handicapped for other reasons. Services include rehabilitation, education, guidance and sheltered work.)
- The Helsinki clubhouse
- Street work (The social worker in shelter does also the street work. He meets the homeless in outdoor places)

- Night cafe.

## City of Newcastle

Newcastle has a population of 260,000 and is the regional capital of the North East of England and the regional capital of Tyne and Wear with a conurbation of 1.25 million. The majority of the region's resources for homelessness are based in Newcastle, approximately two thirds of the bed spaces, 60% of referrals and 40% -50% of occupants come from outside of the city. The Homelessness Act 2002 made it a requirement for authorities to work together to improve services. In 2004, 12.1 million Euros were spent on homelessness provision.

Newcastle has undergone a successful period of regeneration over the last 5 years, this has seen an increase in employment, house prices and economic activity. The downside has been a reduction in empty and available social housing. 4000 units of social housing have been lost since 2001. In line with the national trend, the proportion of public housing is predicted to decline from 41,879 units in 2001, to a current stock 2005 of 38,005, and by 2021 this is expected to fall to 32,470. The major thrust of housing policy is regeneration and the development of sustainable communities e.g. choice based lettings. Police and verification checks have been introduced.

The city has had high rates of unemployment and benefit dependency. Despite recent improvement in 2005 there are 70% of public sector tenants in receipt of state aid to cover housing costs. In common with the rest of England, the provision of accommodation and support to vulnerable people is provided by a variety of statutory and voluntary sector agencies. Whilst there have been legislative changes and attempts to create a unified strategic approach, there are still tensions and conflicting definitions and aims. This is seen in the requirement to provide accommodation to vulnerable groups but not to address the vulnerability.

### **Framework conditions**

The State's response to homelessness in the UK has evolved from the 1948 National Assistance Act which placed responsibility upon Local Authority Social Services Departments to provide support to vulnerable destitute people. This has resulted in an advocacy based system with a large amount of case law as authorities tried to gatekeep access into the priority system. Much of the time and resources that were available for dealing with homelessness went into determining who should be in priority need, but not necessarily in supporting people. This resulted in less support being available for the non-priority homeless, generally single people. It also created an incentive for people in housing need to apply as homeless as this would increase their chances of getting a higher demand property. This evolved into a gate keeping adversarial approach, with local authorities in high demand areas seeking to avoid a duty to applicants and legal battles contesting negative decisions. A variety of factors including the sale of council housing, the reduction of new building of public housing, economic depression and high unemployment led to a marked increase in homeless applications and of B&B (low quality hotels) use. At its peak, over 300,000 households nationally were in B&B in 1987 and Newcastle placed 445 households in B&B. Since 1994, B&B has been the predominant approach of homeless agencies, as to seek an increase in the supply of accommodation.

The system changed with the introduction of the Homelessness Act 2002 that required Councils to develop homelessness strategies to identify and reduce the causes (demand) for homelessness. This put the main emphasis on preventing homelessness. The funding

system also changed from a laissez faire system based on full occupancy, to a commissioning system based on meeting identified strategic needs. This combination of changes along with statutory targets to reduce homelessness, rough sleeping and B&B use has led to a different approach. At its best, this is characterised by finding solutions to the root causes of homelessness. At its worst, it is criticised for re-labelling homeless people.

Between September 2004 and April 2005 Newcastle reduced homelessness by 34% by adopting a different approach. This included family mediation work where young people have been asked to leave the family home, improved access to supported hostels to work on life skills, and direct offers for those who could cope in tenancies. The fundamental change is a move to what appears to be a more continental model, of homeless services being for those in crisis and housing need services being for those who want a better home. With resources going to those in crisis, the Newcastle approach is now to look at the whole housing market and to reduce exclusion.

Homeless services are mainly funded by central government grants that are administered by the local authority. Local money can be used but this is a relatively small amount - for example in Newcastle the Council spends £300,000, whilst the Government's expenditure is approximately £8,000,000. Funding is split between capital (for building) and revenue (for staffing). Revenue is the key as capital can be borrowed against this. In 2002 the system changed from an unlimited funding pot (Housing Benefit) to a fixed pot (supporting people) that was spent in line with strategic priorities, value for money and quality standards. When housing benefits were deregulated in 1987, homeless provision tripled. The new system has sought to focus resources to meet local priorities within a national framework that sets councils the target of reducing rough sleeping, B&B use, the causes of homelessness and repeat homelessness.

### **Aims regarding homelessness**

The Newcastle homelessness aims are to reduce rough sleeping, to reduce B&B, to reduce common causes of homelessness, to reduce repeat homelessness, to reduce the use of inappropriate temporary accommodation and to reduce evictions. The aim is also to increase positive move-ons, the Newcastle statutory cases helped, and the strategic infrastructure.

## **City of Oslo**

Oslo has a population of approximately 520 000 (January 1<sup>st</sup> 2004). About 11 % of the Norwegian population live in Oslo. About 21 % of Oslo's population are aged 19 or under, four in ten people are between the ages of 20 and 44, and around 12 % are 67 or more. The number of immigrants is about 110 000. There are approximately 266 000 dwellings in Oslo, of which about 78 000 are rented. This means that about 70 % of the population live in owned accommodation.

The number of homeless individuals is disputed but this is very much a matter of definition. The number of rough sleepers is quite low; a maximum of 20 individuals is estimated though some will maintain that the number is closer to 50 persons. The Norwegian Building Research Institute has recently made two surveys on homelessness in Norway. According to the surveys, the number of homeless was 2 513 in 1996, and 1 283 in 2003.

### **Framework conditions**

Norwegian municipalities' responsibility to prevent and make an end to homelessness is regulated by the Act relating to Social Services. The municipal social service is obliged to provide housing for people who are unable to look after their own interests in the housing market, including specially adapted housing and housing offering aid and protection facilities for those who due to age or disabilities or for other reasons need them. The social service is also obliged to find temporary accommodation for those who are unable to do so themselves. The municipalities also have a general responsibility for development and maintenance of health and social services to their inhabitants including a specially defined responsibility for drug abusers.

The national authorities have launched a national strategy to prevent and combat homelessness. The strategy consists of clearly defined goals (see section 4.7.1.1.) and the municipalities are responsible for carrying these goals out by designing deliberate methods for implementation. Many of the institutions for mentally retarded people and individuals with mental illnesses have been decentralised and replaced by accommodation in local authorities as a conscious part of an integration policy. There are however, great challenges linked up to housing of people with these problems, and Oslo will for the next three years carry out a resolution that obliges the local authorities to provide individually designed accommodation for them. This is part of the national integration scheme for people with mental problems. The same process is also directed towards drug abusers who in many cases are temporarily homeless and in a weak position on the housing market.

### **Aims regarding homelessness**

It is a vital part of Oslo's policy of using its resources efficiently and qualitatively, to accept its responsibility to help every individual to master his own life by regaining control and social skills, for instance in the housing market. As a part of this strategy, it is decided to reduce the use of private hostels for accommodation to a minimum and the use of private hostels must be temporary and based on quality agreement contracts.

As already mentioned, the national authorities have decided on certain goals in the national strategy against homelessness, one of which is that the number of requests of eviction should be halved, and the number of evictions should be reduced by 30 %. Furthermore, it is a goal to offer permanent housing to released convicts and people coming from treatment in institutions and that no one shall stay more than three months in temporary housings.

### **Main strategies to fulfil the aims**

Until a few years ago, the support measures for the disadvantaged in the housing market in Oslo, have been characterized by too many parties involved, high degree of fragmentation and lack of strategic orientation. The responsibility is now delegated to the social services in the local authorities, thus giving the clients an opportunity of presenting themselves at one place to get the support they need for their housing problems. The local authority can establish measures themselves or order them from agencies that are specialised in designing and selling such measures.

Some people are particularly disadvantaged, for example because they need housing that does not exist in the market or because they are not accepted as actors in the market. For these people, the municipality has a certain number of housing possibilities at disposal which may be rented on basis of an application. The model of ownership to own dwelling is a conscious municipal strategy. Rather than passively renewing the tenancy agreement the municipality follows a conscious strategy of giving support to municipal tenants to provide

them with own dwellings in the open market. This strategy secures mobility in the integrated chain.

The measures mentioned above presuppose that the individuals can cope with the obligations which are related to an ordinary housing contract. Some people, however, may have certain needs for support to master or maintain an independent housing situation. One of the methods to support and guide these people is to establish an individual plan based on her or his individual needs or to establish post training support regimes.

In the 1990ies the use of private hostels was extensive and as the demand was greater than the supply the owners could keep the prices high and the quality low without risk. This was an unacceptable situation and strategies were carried out to alter that. The municipality introduced and reinforced contractual quality conditions and other measures to reduce the demand and to raise the quality. The use of private hostels has been reduced by 90% and the municipality now has a fairly good control of the situation in that part of the housing market.

## City of Riga

The combination of low income and comparatively high payments for rent and public utilities resulted in high demand for cheap municipality tenement flats. Persons renting apartments in denationalized houses are subjected to homelessness risk, as they are not in the position to acquire a dwelling on the housing market. In the current housing market situation families with children, retired people, and disabled persons are most vulnerable.

In 2003 82% of the housing stock in Latvia was owned by private persons, 14% belonged to municipalities, and 2% to cooperatives. The housing stock of Riga constitutes 30% of the entire country's housing stock. The quality of housing is poor in Latvia. Accommodation for handicapped people is inadequate. In Riga the quality, volume and variety of social service and social support improves with each year. Social awareness increases and social work keeps developing. In 2004 the share of funds allocated for the social system was 7.8% of Riga's total budget.

Due to these and other factors (low wages and pensions, health problems, unsatisfactory education and professional qualification, addictions, denationalization of houses, etc.) the problem of homelessness in Latvia has been aggravating year by year. The majority of the homeless are concentrated in Riga, as the capital of Latvia. Account of the persons having received asylum/ night asylum service is kept in Riga (1716 persons in 2004) that fails to disclose the total number of the homeless. Studies on the problem of homelessness have not been done. Presumably there are approximately 5000 homeless persons in Riga.

### **Framework conditions**

Social legislation of Latvia provides several responsibilities for municipalities and the State. Municipalities are responsible for ensuring night asylum for the homeless; for providing social services and social (material) support according to municipality residents' needs; and for providing support in solving housing issues. The State secures allocation and payment of benefits to designated groups; it participates in co-financing day-care centres for persons with mental disorders for the first three years from the opening date of given establishment, as well as fully finances services of institutions of sustained care for persons with mental disorders and the blind.

### **Aims regarding homelessness**

To form the municipality's policy in the way to prevent progression of the homelessness in Riga;

To increase the chance for the person to find a dwelling appropriate to his/her paying capacity;

To provide opportunities for the inhabitants of Riga to get information and consultations about dealing with housing issues;

To identify persons that are under risk of homelessness and provide them with support and help, including housing benefits;

To do research work about the problems of homelessness and mendicancy;

To promote comprehension in society about the homelessness problem with mediation of mass media;

To reduce the number of people, who stay overnight in the streets by providing a service of short term stay lodging and help to find appropriate dwelling;

To promote the development of social work in the streets to reduce the number of the homeless in Riga, as well as to render the information for them about chances to receive social services and social assistance;

To provide training for the specialists that work with the homeless from various groups;

To involve individuals, religious confessions, NGOs and volunteers in rendering services to the homeless, as well as in improving the services for the homeless.

### **Main strategies to fulfil the aims**

As the State's housing policy has affected the rise of homelessness in Latvia (payment rate for living space has been brought closer to market prices, that does not comply with paying capacity of many citizens; many citizens have too little income to purchase flats without help from the state; the state has delegated to the municipalities the responsibility to realize housing policy in their territories, but there is not enough financial resources for that), it is necessary to develop a long term conception of state housing policy development. This is the National action plan (NAP) for the reduction of poverty and social exclusion (2004 - 2006), it includes a state support program for the renovation of public housing, a state program that provides an opportunity for citizens to receive long term credit with small interest rate for purpose of flat purchase, and a programme on the improvement of the technical basis of the housing policy, also defining a "rent rate ceiling".

The housing stock of Riga municipality is inadequate to provide due assistance to the residents in solving their housing issues. Hereby, people have to queue for a municipality apartment for several years. Only in recent years, the construction of new residential houses has been commenced. To control eviction of Riga municipality residents from their homes, the municipality provides material support to disadvantaged persons in the form of housing relief, or concludes tripartite agreement with the tenant or owner of the dwelling, the housekeeper, and the social office, assigning "Social relief housing status" to the accommodation unit. In the event of homelessness, a person or family is offered to stay at

temporary dwellings while solving own accommodation problem, or, if necessary, it is possible to move to an institution of sustained social care and social rehabilitation.

Considering the growing number of homeless persons in Riga, the municipality develops social services for this target group:

- According to demand the number of places are increased in night and day shelters;
- Starting from 17th of January 2006 Riga City Council ensures the "warm soup" service by financing a NGO (250 persons 3 times in a week);
- Riga City Council Social Affairs Committee accepted guidelines for social help in cold time period for the homeless persons. These guidelines are the basis for developing a concrete action plan and providing help to homeless persons;
- One of the main problems to solve is addictiveness (alcohol, drugs, gambling etc.) of homeless persons. Because of this reason it is difficult to provide help to homeless persons. But there are motivation programs for homeless persons who have addictive problems.

## City of Rotterdam

Rotterdam is the largest port in the world, the second city and the industrial heart of the Netherlands and the economic, social and cultural centre of the Rijnmond ('Rhine Estuary') region. More than one million people from 162 countries live in the Rotterdam region. The city is divided geographically and administratively into 11 municipal districts. Municipal district councillors are also elected directly by the people. The municipal district administrations have autonomy from the central administration.

The municipal council is the central administration and the highest administrative body at local level. The municipal executive comprising the mayor and aldermen forms the day-to-day administration. This method of administration is called dualism and was introduced in March 2002. The introduction of dualism brought the roles of the municipal executive and the council into sharper focus. The council provides basic policy outlines, monitors the municipal executive and acts on behalf of the people. One of the core tasks of the council is to represent the people in decision-making processes. Other tasks of the municipal council are determining the budget, checking the municipal executive's annual accounts, drawing up and enactment of by-laws (local municipal laws) and appointing aldermen. The municipal executive is accountable to the municipal council.

### **Framework conditions**

In the Netherlands, policy regarding homelessness is decentralised to the municipalities. The so called 'core municipalities' receive two budgets from the central government: a budget to cover expenses on shelter facilities for those who wander the streets and care for addicts, and a budget covering expenditures on shelters for battered women.

There are 43 core municipalities receiving a combined budget for shelter and addiction services. In 2004, the national government had a total combined budget of about € 160 mio. A recent evaluation of this new policy trend (Fleurke, 2002) showed that the municipalities involved used the first few years of the decentralised policy regime to make their own policy and to realise a system of shelter facilities that would cover local demand.

A recent interdepartmental study of the shelter and support services to socially vulnerable people concluded that the provision of information is inadequate and that people are

staying in the facilities too long. (Ministerie van Financiën, 2003). More government funding has now been allocated. The budget for the shelter and support services will increase by €4 million by 2007, aimed at accelerating turnover.

### **Aims regarding homelessness**

Being the second largest city of the Netherlands, Rotterdam has been dealing for years with a high demand for shelters and support services for homeless and drug addicts. In 2004, Rotterdam received about € 18,5 mio. of the total budget, that's about 10%. However, since this is not enough to cover all the expenses, the local government of Rotterdam itself spends about € 23,4 mio. on these services. Therefore, Rotterdam spends a total of about € 41,9 mio. for services for the homeless and the drug addicts.

## **City of Stockholm**

Sweden has 290 municipalities - of which the City of Stockholm is the largest (765 044 inhabitants) - covering the entire country, each with a popularly elected council which collects income tax and operates such public services as schools, child and elderly care, utilities, housing, and cultural and leisure activities. While they enjoy the right to provide a great many public services at their own discretion, municipalities are bound by law and regulations to offer a number of basic services. Immigrants resident for three years in Sweden have the right to vote and run for office in local elections. Since 1996, Stockholm has been divided into 18 district councils with the same responsibility and authority, as the City's other committees and boards. The difference is that the district councils work within their respective geographic areas and have the overall responsibility for their activities. The City of Stockholm's leadership still has the overriding responsibility for issues concerning the entire municipality, e.g. municipal tax and the City's common budget.

One-fourth of the 410 000 homes in Stockholm is located in city-owned housing companies. The City has now offered tenants in its housing companies the option to purchase their apartments. After several years of low building activity, construction of new residential housing is now increasing. Hammarby Sjöstad, a new environmentally friendly area with 8000 apartments, is the largest housing project. In all, there are some 410 000 residences in the City of Stockholm, of which 43 000 are self-contained houses, 96 000 are tenant-owner apartments and approximately 225 000 are in multi-tenant blocks let with right of tenancy. The municipal housing companies own approximately 100 000 of the residences.

### **Framework conditions**

The responsibility of the state lies with funding for projects focused on developing methods against homelessness, annual count 2005 and 2007, housing benefit and state aid for the non-governmental organisations working with homeless persons. There is not so much co-operation between the municipalities and the state in these questions. This is because of the predominant responsibility of the municipalities. Of course the municipalities take part of the annual counts and even apply for public funds focused on developing methods against homelessness.

In Sweden the responsibility of the homelessness issue is mostly with the 290 municipalities in the country. Each municipality both puts up the programs and makes the practical work. Even the 21 county councils (with responsibility for health care) have a part, working with homeless with mental and/or physical problems, and addiction care/treatment. The city of Stockholm also gives allowance to non-governmental organisations working locally with

homelessness. There is some co-operation between the municipalities and the county councils (regional level), for instance the outreach work among homeless people.

### **Aims regarding homelessness**

The politicians governing Stockholm at the moment, period 2002-2006, have certain aims regarding to housing and homelessness. During this period, the aim is to build 20.000 new apartments. During the same period, a second aim is to halve the amount of homeless people.

Another aim is to continue increasing the amount of permanent apartments for homeless people, instead of shelters and temporary places. In Stockholm we talk about a "chain of housing" for homeless people. It is important that this chain is flexible and contains many different alternatives, so it will suit as many individuals as possible.

Housing itself cannot solve the problem of homelessness. Of course, many other important aims are also needed, for instance work training, substance abuse treatment and other activities for the homeless people that can not find employment. A shelter guarantee is implemented in Stockholm since 1999.

### **Main strategies to fulfil the aims**

Many homeless people in Stockholm succeed in having their own apartment in the end. With a flexible and sufficient "chain of housing" completed with good support, this can work. The chain contains shelters, low-threshold institutions, places to live for specific target groups, places to live in supported accommodation, permanent places, trial and training flats etc. In the last years, the city has started to provide more permanent places, which has made a better chain.

Unfortunately, the amount of homeless people is not decreasing, because of new homeless people. To change this problem, one focus has to be on eviction prevention. Our city needs to work much more with this task. The responsibility of eviction prevention lies on every district (18 districts) in Stockholm. Some districts really make good efforts in this work, for example with good co-operation with the landlords. Again, best practice has to be spread out to the whole city.

This year, every district of the city of Stockholm has picked out one contact per district for the homelessness issue. In this way, the co-operation between the districts and the central social welfare service can improve, so that the efforts to solve some of the homelessness problems can succeed. The central social welfare service is responsible for most of the places to live for homeless people, the co-ordination of homelessness, subsidies for the non-governmental organisations working with homelessness etc.

During some years the amount of trial- and training apartments has increased, and will continue this way the coming years. This is an important part of the chain, you could say the last piece before an apartment of your own. To succeed in living of your own, wherever you are in the chain, the person needs a lot of support. The support must be planned individually. The co-operation needs to improve between the social welfare service and the county council (responsible for health care) concerning homeless people with mental problems.

## City of Utrecht

The city of Utrecht is the fourth largest city of the Netherlands with about 280.000 inhabitants. In the next 10 years this will extend to more than 340.000. Its geographic position in the middle of the country has contributed to the fact that it is a centre of economic services and of an infrastructure of railways and traffic roads. It is also a centre of educational institutions such as the largest university of the Netherlands. This has an influence on the age structure and on the composition of households: 53 % of the inhabitants are younger than 34 years; 52 % live alone. And contrary to the trend in most of the European cities/countries the Utrecht population is not aging.

Although poverty among families in Utrecht is increasing, the average income of the citizens is fairly high compared to the other 3 large cities of the Netherlands (Rotterdam, Amsterdam, The Hague). In 2004, 53 % of the housing stock of Utrecht was owned by corporations and 47 % by private owners. The housing market is much too tight especially for the households with low income.

The administration of the city is organized as in Rotterdam, but for the fact that Utrecht knows only geographical districts.

### **Aims regarding homelessness**

The policy of Utrecht envisages as overall objectives to improve the living conditions of all those who are unable to survive independently in the city, have serious problems and are cut off from the help they need, as well as to improve the liveability of the city as a whole, focusing on better control of the influx, where possible working towards an outflow through social rehabilitation and preventing and controlling nuisance. These overall objectives lead to a series of specific objectives, referred to as policy intentions. These policy intentions focus on the living conditions of the target group and are allocated to the three policy pillars prevention, care / shelter and rehabilitation. Ambitions and results have been formulated for each intention. The policy is subject to preconditions.

**Prevention:** Improving the early identification, registration of the socially vulnerable and early intervention; early intervention in the onset of homelessness.

**Care and shelter:** Improving working and living conditions in existing shelter institutions, improving the quality of the shelter; filling the gaps in the facilities for shelter and housing for (addicted) homeless people, an active approach to the target group, a balanced chain of social care for addicts, working on demand.

**Rehabilitation:** Housing and relocation, financial assistance, day programmes and work, social contacts / social support.

**Preconditions:** Expanding the management function, municipal co-ordination, client registration, identification and monitoring, expanding the role of the principal, improving the alignment between demand and supply in social services, co-operation / alignment with the field and the financiers.

**Co-operation / alignment with G4** (the 4 largest cities in the Netherlands), central municipalities, province, lobbying directed at the state.

## **Main strategies to fulfil the aims**

In the city of Utrecht the strategic basis for tackling the homelessness problems is that the Municipality acts as a pivot for a shared approach with other financing agencies and parties in the field. The focus is on integral and shared responsibility between all actors. And this joint responsibility should also be followed by financial commitment. This interactive approach leads to clear shared ambitions, actions and results which are fixed in different covenants.

The nucleus of this approach is the Steering committee Community Mental Health comprising of: Municipality of Utrecht (chair), Institute for Mental Health, Institute for Addiction Care, Services for the Homeless Network, Police Utrecht, Regional Authority for Sheltered Accommodation and the Health Care Office. In "*Zorg op Straat 2*" (Care in the Street) these parties laid down their joint agreements on activities to be undertaken in providing assistance to the socially vulnerable citizens of the city of Utrecht. Also other parties as the client representatives are actively involved in this action plan. The structure of "Care in the Street" reports directly to the Steering Committee that monitors the progress.

The starting point of this action plan was a city-wide working conference and a review of the main bottlenecks and chances in the care according to the target group. The bottlenecks and chances have been translated into 43 joint activities in the domains Health, Living Conditions, Finances, Treatment, Housing, Work and Day Programme and Preconditions for co-operation and alignment in Public Mental Health. Identified main bottlenecks are: Capacity problems, Bottlenecks in the quality, gaps in the chains of care, shelter and service, too little differentiation in the various sub-target groups / too little personalised care, the lack of measures to prevent relapse, too little cohesion between the approaches per life domain, the client's perspective is not expressed sufficiently.

A covenant has been signed, called "Towards a Healthier Utrecht", in which the city of Utrecht and the Health Care Office laid down the co-realisation and co-funding of several needed facilities. This covenant briefly describes the situation of socially vulnerable people in the city of Utrecht, the bottlenecks that must be dealt with in the short term and the direction the Public Mental Health system should take in the longer term. This is supplemented with a description of the partnership structure within which the parties will guarantee a sound approach to the care for the homeless. The specific subjects of this covenant are: emergency aid, asylum places, places for evening and night shelter for mentally handicapped, intensive home care for addicts, front office, back office, medication (including methadone), medical care, assistance with debts and benefit management, 24-hour facilities, daytime activities, night shelter, day shelter and user areas.

## **City of Vienna**

Vienna is the capital of the Republic of Austria. It is the country's biggest city and seat of many international organisations (official UN seat, OECD headquarters). Its 1.65 million inhabitants live in a space of 414 square kilometres. Vienna takes a special position in Austria as it is both a city and a federal province. The mayor of Vienna is at the same time governor of the province, while the City Council also acts as provincial government. The City of Vienna has many ways of influencing the housing sector and one of its top priorities is to provide affordable quality housing for all income groups.

Vienna builds on a long tradition of socially oriented housing programmes that dates from

the 1920s. Today, the housing department of the Vienna City Administration "Wiener Wohnen" administers approx. 220,000 flats and is thus the biggest landlord in Austria. This stock is complemented by around 200,000 subsidised rented flats mostly built by non-profit housing developers and by subsidised owner-occupied flats. Each year around 10,000 flats are renovated and approximately 5,000 new apartments are built with public funds. In sum, close to 60% of all Viennese households live in subsidised housing. A primary objective of the City of Vienna's social policies is to provide support and improve opportunities for citizens with disabilities, older people, homeless people, families and children in financial and social crisis situations.

### **Framework conditions**

In Austria, important parts of the legal framework concerning the issue of housing are at the federal level, such as the Law for upper limits of rental fees (in dependence of housing standards), the Board of arbitration to check rental fees, and Federal rent allowances. Also, Courts are under legal obligation to inform municipal services about probable evictions. Those competences, which are not at the national level, are usually shared between the regional and the local level. Because the city of Vienna is also a province of Austria, several responsibilities are assigned to the city, including loans and grants for housing objects, municipal housing, service to prevent evictions, etc.

The aim is to provide sufficient sleeping accommodations, living places and residential places with a wide-ranging, need-oriented, individual offer. This offer has to be checked and revised with regard to acceptance and necessity and adapted according to needs.

The offers and/or services of the *Wiener Wohnungslosenhilfe* (Vienna Assistance for the Homeless) are determined by two comprehensive objectives:

- the social and health-related stabilisation of the individuals affected and efforts to bring them closer to the services of the social welfare state in order to prevent (further) distress;
- the social and health-related rehabilitation of the individuals affected with the aim of reintegrating them within the regular housing market and/or a specific permanent accommodation opportunity.

### **Aims regarding homelessness**

The work of the *Wiener Wohnungslosenhilfe* is characterised by 3 central ideas:

- Starting earlier: Homelessness is a social problem with far-reaching aspects and consequences. The wider public can be reached by means of providing information and background knowledge about the specific problems of homeless people.
- Working together: In cooperation with the clients, special attention is paid to strengthen their capacities for self-help and to see them as partners. The clients develop jointly with their care-takers objectives that take their personal life situation into account.
- Having a lasting effect: Further necessary measures will be organised if required and the end of the care relationship will be discussed before its completion. The evaluation of the care relationship or offer for care and counselling is necessary to develop and provide needs- and customer-oriented offers and to ensure high-quality care services.

### **Main strategies to fulfil the aims**

In the past 17 years, the coordinated prevention of homelessness has evolved into a socio-political focus in Vienna.

Prevention from expulsion: The most urgent objective is the prevention from losing accommodation. An assistance for the homeless that is both economically meaningful and humanitarian and that counteracts the increase of homelessness can only be provided through effective preventive work. The prevention from expulsion is thus the basis of the *Wiener Wohnungslosenhilfe*, on which all further measures are built.

Day centre/street work, counselling and care of acutely homeless people: In the area of ambulant offers, homeless people are provided with acute support and care - with the aim of motivating them to accept counselling and care offers that are of higher quality.

Temporary facilities: These facilities aim to prepare homeless people for a life on their own (again or for the first time) in order to subsequently integrate them into the normal housing supply. The integration should be possible within a period of up to two years. This effort beneficiaries from the existence of an extensive offer of urban housing, from which more than half of the successfully integrated homeless people is provided with a new own accommodation.

Permanent accommodation with two kinds of offers: The need for very low-level permanent accommodation for those people, who - mostly because of long-term homelessness together with other social problems (e.g. alcoholism) - are not able anymore to acquire the skills required for living in their own place, emerged from the experiences of the Vienna integration programme for homeless people. It concerns those people who suffer from multiple problems and who are mentally and physically burdened in such a way that living on their own without company/care is not possible anymore. Due to private initiatives which the city of Vienna facilitated and supported from the outset, two kinds of permanent housing facilities for former homeless people emerged: pensioners' residences for older, former homeless people, and partly self-administered permanent residential houses

Extension of housing supply: In the 8 permanent housing facilities existing at present (2 facilities are partly self-administered permanent residential houses and 6 facilities are pensioners' residences) those people who are not willing or able anymore to learn living on their own are accommodated in small flats. These people have their permanent residency there and are not homeless anymore.

The declared goal of the *Wiener Wohnungslosenhilfe* is to extend the number of catered permanent residential places. 900 of such places should be created by approx. 2009/2010.

## City of Warsaw

Poland's capital, with 1.63 million inhabitants is the largest city in Poland. Together with its suburbs, it is also the second largest industrial area in Poland (after Katowice), with over 2.5 million inhabitants in the conurbation. Since Oct. 27 2002, when the new act on the structure of Warsaw came into force, the whole of Warsaw is one borough with the powers of the county, which was divided into 18 districts. The former boroughs and districts of the Centrum borough have become districts-auxiliary units of the city of Warsaw.

The legislative authority in the new Warsaw borough is performed by the Warsaw City Council, reduced to 60 council members, and the mayor of Warsaw is the executive authority. The mayor and the Warsaw City Office will deal with tasks concerning the city in general and coordinate the work of the districts. As it had been the case previous to the reform, districts will serve the residents and handle local matters, such as local roads,

schools, kindergartens, the issuing of driving licenses, the registration of residents, and so on. However, their powers now stem from the Council and president of Warsaw, and their budgets and financial policies have to be consistent with those of the city.

### Framework conditions

Pursuant to the Act on the system of the city of Warsaw (Act of 15 March 2002 Dz.U. no. 41 item 361) of 27 October 2002, Warsaw functions as a borough (*gmina*) on the rights of the county (*powiat*). The most important tasks related to solution of the social problems are: family assistance, assistance for the disabled, the homeless, alcohol, drug and HIV/AIDS virus infection prevention, actions for the benefit of the Polish community abroad.

The main activities of the Social Policy Department of the capital city of Warsaw are: preparing the strategy for solving the social problems of the city of Warsaw and preparation of the social projects and programs of a city wide character. The Social Policy Department supervises the quality of the actions of the organizational units of the city of Warsaw. Implementation of the social care tasks and prevention of addictions is implemented through wider cooperation with the non-governmental organizations which provide support in a direct and a more closer way to those in need.

### Aims regarding homelessness

In Warsaw, there are approximately 5 000 to 10 000 homeless people, therefore various activities are undertaken to solve this problem. The social care centres of the city of Warsaw grant financial assistance in form of target benefits and other benefits of social care. The shelter, medical care, special advisory services are organized by the non-governmental organizations. The role of the capital city of Warsaw in fighting homelessness consists of organizational and financial support for the existing and new services for the homeless in such a way as to create a complete social care system.

### Main strategies to fulfil the aims

The social care system for the support of the homeless is focused on ensuring existence and functioning of the homeless in the conditions which are in compliance with the human dignity and as a result moving them out from the homelessness.

Apart from financial assistance, the Social Care Centres provide information on the special centres for the homeless in the City which are managed only by the non-governmental institutions. In a case of longer cooperation they try to make contact with the family of the homeless person to facilitate the process of moving out of homelessness. In some cases individual programs on moving out from homelessness are concluded with the homeless.

Social assistance activities for the benefit of the homeless commissioned to the non-governmental organizations are implemented by:

- organization of night shelters, hostels and centres implementing the integration programs for men, women, and mother with children
- medical services, i.e. outpatient medical aid centres, residential medical services
- canteen,
- programs aimed at obtaining and the distribution of food and material support,
- sanitary services,
- advisory and social information centres,

## Cities' strategies against homelessness

- support for employment activation,
- support for all activities aimed at obtaining and support for protected flats.

## FIRST STEP TOWARDS A COMPARATIVE ANALYSIS

An important objective of this co-operation between cities has been to create an analytical framework to facilitate the comparison of the effectiveness of the measures deployed to resolve homelessness. Despite the similarities between the cities' approaches and a basic agreement on most questions of definitions, a simple comparison is not possible because of the different legal and financial context of the practical work in different cities.

The experience of the group has shown that it is not enough for the experts from the cities participating to agree on common presentations, but that understanding is increased by visiting local provisions. The group also found that it has been possible to utilise their experience by introducing approaches that have been shown to work in different cities to their own. The exchange of knowledge evidently had positive effects on local experts in individual cities.

After describing the national and regional frameworks and depicting the overall local situation, the working group agreed to concentrate on the entrenched homelessness; this is presented in the appendix under the title 'Selected services'. Subsequently, the working group developed a graphic analysis to compare the data collected.

The model shows that this first attempt has not yet led to any result that might serve as the basis for a qualitative and quantitative comparison. The figures collected were derived from the respective local descriptions and based on experts' knowledge. The definitions agreed upon were taken into account wherever possible, but decisions on the exact classification were sometimes taken by colleagues who had not been able to attend all the meetings of the working group. Frequently it was not possible to divide up the data according to the agreed criteria (see pink lines over several columns). This also explains the frequent absence of data.

However, in the opinion of the members of the working group, this model constitutes a good basis for further work. After a classification of all the local facilities that have been agreed upon between the partner cities and a partial adaptation of the reports by individual cities, interesting and important results can be expected from the model shown above.

**Table (next page): model for analyzing local homeless support**

Cities' strategies against homelessness

	Roofless	Houseless			(former) homeless	
Services	Rough sleepers (1.1) day centres/street work services/staff	Public space (2.1) Night shelters facilities/ beds	Homeless hostels (3.1) Short-stay facilities/ beds	Temporary accommodation (3.2) Time not defined facilities/ beds	transitional facilities/ beds	Longer/unlimited stay facilities/ beds
	City					
Copenhagen	1/34	5/128	6/314	9/66	1/5	7/9
Genoa	1/??	2/30	4/26	4/45	8/??	4/32
Glasgow	5/??	5/386	7/657	2/1330	8/542	3/104
Helsinki	6/??	1/50	??/857	4/2079	??/535	??
Newcastle	2/??	5/263(137?)	??/173(403?)	56/330	xxx	xxx
Oslo	20/52	xxx	5/183	??/800	3/570	1100/??
Riga	3/??	3/380	3/380	xxx	xxx	xxx
Rotterdam	4/??	8/263	6/173	200/330	xxx	xxx
Stockholm	6/??	11/289	xxx	29/29	674/674	1435/1435
Utrecht	??/??	10(86?)/530	2/77	123/??	240/??	52/??
Vienna	5/48	5/224	5/1028	5/271	8/562	xxx
Warsaw	1/??	10/1140	xxx	3/824	7/351	12/473
Clients	Rough sleepers (1.1) day centres/street work	Public space (2.1.) Night shelters	Homeless hostel (3.1) short stay	Temporary accommodation (3.2) time not defined	transitional	Longer or unlimited stay
	City					
Copenhagen	450	683	786	375		66
Genoa	??	??	??	??	??	??
Glasgow	??	??	??	??	??	??
Helsinki	100	??	??	??	??	??
Newcastle	82	797	441		477	
Oslo	20	??	??	??	??	??
Riga	1716			1716		
Rotterdam	219	1648	226		330	
Stockholm	70	2309	??	??	??	??
Utrecht	350	530	77		411	
Vienna	800	500		3371		xxx
Warsaw	??	??	xxx	??	??	??

## CONCLUSIONS

By working together on the issue of homelessness, the members of the WGH have learned a lot about each other's strategies to tackle homelessness, about the individual context of each city and about actual policies and services at various government levels within each participating member state. The first problem the members of the WGH had to solve, was the lack of a common definition of homelessness. Although FEANTSA's ETHOS-definition proved to be a very helpful tool, it could not fully solve this problem. Moreover, the problem of homelessness is being tackled in a different way in different countries of the EU, a fact that cannot be solved within the framework of the WGH. Still, when all differences are ruled out as much as possible, the similarities between the challenges that members of the WGH face are striking.

While exchanging knowledge and experience, two particular aspects have been discussed and regarded as being goals worthwhile pursuing in the near future.

### Comprehensive support: the "integrated chain approach"

The most important outcome of the WGH is the recognition of the wide-ranging advantages of an "integrated chain". The term "integrated chain" refers to a coordinated, integrated and strategic approach to homelessness in a city that seeks to support people's progress to the optimum level of independence and integration. Each homeless person in his/her respective situation of need should be granted access to this support system. At the same time the assistance given should bring the person or group of people (couples, families) into a situation of normal housing provision and thus stabilize them. The "integrated chain" depends on the specific local situation, yet many of the realised individual measures of all participating cities are very similar.

Some of the municipal integration programmes have been operating for more than 10 years. The common experience is that it takes some time until the success of social measures becomes visible. After the implementation of some of the "integrated chain" programmes, the first positive changes regarding homelessness have become visible after six to seven years. Social planning takes time and its success or failure cannot be measured within one legislative period. It takes time to embed cultural changes, particularly as the non-strategic model that evolved did so over 20 years.

The courage to initiate innovative, experimental programmes is necessary for the development of social services, even if the results of such experiments are not foreseeable. From time to time, measures that prove to be unsuitable have to be stopped prematurely. The majority of innovative programmes, however, takes a highly positive course, which justifies the risk of occasional failure. In both cases the gain in knowledge increases. The WGH allowed those cities which have only recently begun this process to learn from the experiences of the cities that have established this method.

## Measures promoting successful housing integration

One of the findings of the group's comparative discussion was the close interrelation between the accompanying framework conditions and the need for emergency support. A well-developed system of preventive and integrative services will most likely avoid the manifestation of homelessness for many individuals. In addition to the impact of specific local conditions (e.g. the world's biggest harbour in Rotterdam) the working group identified common aspects of homelessness which should be tackled in a focussed and concerted manner:

- The enhancement of professional support for people who are endangered of becoming homeless will decrease the number of homeless people
- Temporary accommodation of homeless persons should always aim at reintegrating them into independent housing.
- Transitory accommodations with specific support (e.g. for target groups) will enable most of the homeless to empower themselves and to stay independently in an own flat.
- For those who even in a long run will not be able to live without support, specialized long-term accommodation will ensure a life in dignity.
- The expenses for professional social support to prevent, facilitate and terminate homelessness have proved successful in tackling homelessness in European cities.

## Obstacles to the provision of an "integrated chain approach"

As stated several times before, circumstances vary a lot between individual cities. Arguing for the desirability of an integrated approach therefore automatically results in discussing obstacles most cities are facing in implementing such an approach. To acknowledge this outcome the obstacles are being lined up in this section, distinguishing between general, target group related and financial obstacles. It must be said that the obstacles do not occur in all cities to the same extent, however they are a reality in more than two participating cities when mentioned below.

### General obstacles

- Lack of central coordination of all policies and services
- No culture of tackling social problems through a strategic approach
- No (or a limited) innovative attitude among policymakers and service providers
- The disregard of prevention
- Inflexibility of regulations in services, accommodations, etc.

### Target group related obstacles

- No integrated, multidisciplinary approach for clients with a dual diagnosis
- No (or poor quality) accommodation for special target groups

- No or difficult access for homeless to other fields of society (e.g. labour market)
- Those at the ‘bottom of the chain’ are thought not to fit in a chain model. As a result an integrated chain approach is not developed at all.

### **Financial obstacles**

(Due to budget cuts) not enough money to:

- provide all the (specific) services needed
- be innovative

Cities absorb many homeless people from other parts of the country without budgets being transferred. Therefore the funding will always be tight.

### **Future challenges**

The first part of the work of the WGH has been done. During the last meeting of the WGH in Rotterdam, the members discussed how to proceed from the current situation. The work reported on in this document is not a snapshot, but instead reflects a continuous process - as is the fight against homelessness in all cities. It is at the local level where challenges of homelessness and social exclusion are most acute. For the nearby future the WGH has set the following goals:

1) The development and implementation of policies and services for homeless people require continuous documentation of achievements in the WGH’s member cities. This is the only way to build a database for the dissemination of good practices and, as a result, to promote transparency and comparability among the member cities. From there, the WGH wants to develop into a knowledge platform as a resource for both EUROCITIES partners and other European cities.

2) To refine the model of an “integrated chain approach” (based on good practices) and to measure what difference the adoption of the model makes through analysis of comparative performance data. All cities need to provide a strategic infrastructure for services to operate within. The main principles behind the “integrated chain approach” are that services within the framework should:

- be client focused and seek to reconcile accommodation and support needs in tandem
- seek to support people to move to their optimum levels of independence
- share assessments and support plans between agencies to facilitate planning and resource allocation
- be multi-agency at the point of need (i.e. if there are multiple needs such as health care these should be provided on site)
- be a common process to allocate accommodation in relation to need
- be a common means of recording statistical data to facilitate strategic analysis and planning

- Be funded via a strategic framework that relates funding to performance
- be performance managed to measure agencies' contribution to meeting overall aims and identify obstacles to resolving homelessness, this would include aggregate data on – presentations, evictions, move-ons, length of stay
- be supported by structured meetings between all key agencies both to discuss the resolution of individual client's needs and strategy development.

3) To fill the gap between the local level and the national and European level in the field of social inclusion policies, the member cities stress that they:

- are the places where the challenges of homelessness and social exclusion are most acute;
- are the sphere of government that, as in many member states, has the responsibility for developing and implementing policies and practices to contribute to the National Action Plan for social inclusion;
- have a wealth of experience in terms of innovative policies and practices to contribute to the National Action Plans for social inclusion;
- are the sphere of government closest to other key actors at the local level, and to those people experiencing homelessness and social exclusion;
- have a responsibility to provide public services and adapt those services to the needs of homeless people;
- are an essential partner for national governments in developing of a more coordinated, integrated and strategic approach to combating homelessness and social exclusion.

Therefore the members of the WGH intend to actively contribute to National Action Plans in such a way that the "integrated chain approach" as a local strategy for social inclusion will be fully reflected in the National Action Plans.

4) To search for partners on a European level. Members of the WGH have already established a relationship with FEANTSA, which seems very promising for the future.

5) To link the activities of the WGH to the Community Programme for Employment and Social Solidarity (PROGRESS), that should be up and running by January 1<sup>st</sup> 2007. PROGRESS brings together the four current Community Action Programmes covering anti-discrimination, gender equality, the fight against social exclusion and employment incentive measures, that will run until the end of 2006.

6) To welcome more members to the WGH, especially from member states from South and Eastern Europe.

The current members have shown a great commitment to the efforts of the WGH and will continue to do so over the years to come. This is why the Social Affairs Forum of EURO CITIES, at its meeting in Leeds in November 2005, permitted the WGH to keep on doing its work under the EURO CITIES-flag.

## APPENDICES

- App 1 Local obstacles to the provision of an "integrated chain approach"
- App 2 Characteristics and use of ETHOS
- App 3 Framework conditions regarding social housing and homeless integration
- App 4 Offers for the homeless and non-homeless
- App 5 Structure of local homelessness support
- App 6 Selected Services
- App 7 Description of services

### Appendix 1: Local obstacles to the provision of an "integrated chain approach"

#### City of Copenhagen

The municipality does not reckon poverty as the largest problem, since all Danish citizens have the right to get app. 9.700 Euro per year in social payment, and the right to get rent subsidy.

Instead, effort has been concentrated on extending coordination and flexibility between systems, healthcare, housing and labour market, securing the amount of cheap apartments and the support to homeless within ethnic groups.

#### City of Helsinki

Because many of the homeless clients are alcohol abusers, a system for helping homeless intoxicant abusers has been built up to get rid of their addiction, become rehabilitated, and to find a way back to a home of their own. For people with mental problems, too, there are systems for care and rehabilitation. In recent years, however, mental problems and drug abuse have become more frequent. Our challenge is to meet the requirements of the new housing service and make housing services capable of helping these groups properly. Many clients need support after the rehabilitation and the problem is that the care, rehabilitation and benefits become too expensive in a situation where funds are scarce. The facilities and services of the city are not sufficient today: proper housing and support is needed for those whose problems can no longer be solved. We haven't enough money to arrange support measures, and it is very difficult to get extra money for these activities.

## City of Newcastle

### Legal

The statutory system in the UK prioritises certain categories of homeless people above others. Invariably as this is a legal duty these cases get priorities to the detriment of others, this works against a chain approach as often those at the bottom of the chain do not fit this model. Therefore we haven't tried to apply the chain model.

### Size of city

Newcastle is relatively small in population, so we lose economies of scale in dealing with homelessness. The City is the regional capital and around ½ of the heavy end homeless people come from outside the city, yet our funding is as a local authority.

### No culture of strategic approach

It was only in 2002 that legislation required Councils to produce homelessness strategies. Therefore we haven't had a lot of practice for reviewing the problem and then developing options to resolve problems.

### Limited funding

The funding available to resolve homelessness is capped. This reduces the opportunities for innovation.

### Unclear demarcation with health and social services

Many of the people who become homeless have health and mental health problems; we do not have a culture of reconciling accommodation and support needs. The emphasis has been on providing accommodation, which does not resolve the root causes.

### Funding system

Our current funding system makes it difficult to provide services to people who do not take any responsibility eg those that don't pay rent, therefore night shelters are rare.

### Poor accommodation

Much of the accommodation for the homeless is of poor quality. For example large shared hostels, which were seen as better than the street but do not provide an environment conducive to helping people prepare for independence.

## City of Oslo

### Obstacle 1

Those who are assisting people who are in need of accommodation are apt to conceive the available resources as too limited. This attitude is quite common among other social welfare workers as well.

The municipal budgets have generally been tight through the recent years. This fact affects most public areas and represents a challenge, which means that one simply must find new ways of using the available resources optimally. The city of Oslo for example must improve the capacity of some of the components in the integrated chain approach. This is particularly valid for post housing support.

#### Obstacle 2

Public needs change over time and force the municipalities to renew conventional notions and considerations on welfare challenges accordingly, and to put creativity and innovation at work. These activities, it must be admitted, some times are slightly at variance with reality because bureaucracy in many ways is contradictory to too much creativity. Probably this is an inevitable contradiction. More often than not new solutions call for formal decisions and budgets to be raised in order to meet the ends and purpose of the new activities. These are slow processes that hamper the municipalities' ability of acting rapidly, at least when we compare them to private organisations.

#### Obstacle3

The challenges within this area are complex, various and complicated, which means that there seldom exists one categorical and final solution. It also implies that there are few short sighted solutions. The fact that a balanced development necessarily takes time is not easily accepted by media, politicians, NGOs and groups representing particular interests that are apt to demand rapid actions and immediate solutions.

#### Obstacle 4

The necessity of differentiation and individually designed measures may contribute to create an impression among users and employees that the social welfare system is rather unpredictable. Flexibility and differentiation are qualitative components that are hard to deal with compared to quantitative activities.

#### Obstacle 5

Disadvantaged people have differentiated needs, which always will require coordination of services from various public and private bodies that have to cooperate deliberately and consciously in a long time perspective. These processes are never linear and require permanent consideration, evaluation and reconsideration all the way. A professional attitude among the helpers is therefore highly required because the margin for failures is narrow and may lead to acute and permanent disruption of the relationship between the helper and the client. A sloppy and hasty following up work for instance could easily result in procurement of an accommodation for a houseless, who in the end proves to be unable to profit on this particular offer, because it was not individually designed for him/her.

#### Obstacle 6

Oslo is twice as big as Norway's second biggest city Bergen. Due to its size and possibilities for individuals to seek anonymity it attracts people from all over the country, many of those with considerable social and individual needs that require services from public bodies. This means that Oslo is imposed the responsibility for individual and social problems that have developed while the individual belonged to another municipality. The consequences of these harsh facts are that we do not always survey all the aspects in a case, that the possibilities of predictability are limited and that the full complexity of the cases not will be covered by the transferred

financial support from the state.

## Conclusion

These six obstacles should be defined as paradoxes rather than contradictions. Paradoxes are by nature insoluble, which means that we have to live with them. We can however learn to live side by side with them and even befriend them, but only by improving our methodology and methods, our professionalism and our ability of persistence in our efforts to support misfortunate people.

## City of Riga

1. Very little research work has been done about the problem of homelessness;
2. The homeless are at risk to become socially isolated and excluded from society;
3. It is problematical for the homeless to compete in the labour market;
4. The necessity of cheap dwellings;
5. There are very few service providers that could offer services for the homeless to the municipality.

## City of Stockholm

One of the problems we have with night shelters, and the shelter guarantee, is that it is difficult to establish sustained contact with the homeless people. You need to work more actively to arrange better housing solutions. Right now, we are developing a method in which municipal outreach workers are working out in the shelters (mostly operated by NGO's) alongside shelter staff. So far, we have reaped a great deal of good experiences from this.

More and more homeless people in Stockholm have mental problems. Being homeless and having mental problems with need of medicine is complicated. Quite often these persons also have addiction problems. Having the possibility to solve this, co-operation between the social welfare service and the county council, responsible of the health care, is a necessity.

Evictions are increasing, so we have new homeless people coming to the night shelters every night. Young people, often from non-European countries, with drug problems etc, also come to the night shelters, a place where their problems often get bigger. The preventive work among youth to reduce risk of drug and criminality is not enough.

The homelessness issue is been given priority too in the city of Stockholm. Public funds are provided to create new places for the homeless to live, but the districts (18 districts) are not having more money to pay for the places.

## City of Vienna

The reasons for the loss of accommodation are various. The most frequent are changes in economic conditions (e.g. job loss, divorce or separation, heavy indebtedness). The significant increase of social welfare recipients in Vienna since the year 2000 clearly shows the change in the structural economic conditions. Psycho-social deficits – increasingly among younger people – are a further important factor for the emergence of homelessness. Due to the very limited opportunities of city administrations to influence mainstream social trends, local support measures

can only be seen as a supplement to national social politics. Deficits at national or regional level can only be corrected in a very limited way.

Yet in the course of the establishment of the Vienna integration programme for homeless people obstacles were also discovered, which make it impossible for homeless people to accept support offers, because these offers do not or at least not sufficiently address their individual needs.

#### Major obstacles preventing successful integration

Three regulations, which are applied to the most "antiquated" accommodations for the homeless, are the reasons why many homeless people do not want to stay overnight in such institutions.

Restrictions to have men and women living together

Restrictions to keep pets

Restrictions to drink alcohol in the accommodation

Imagine a housing market where the majority of the population must adhere to either one, two or all three of these restrictions. People would certainly not be interested in these flats. There is no reason why people, who lost their homes for various reasons, must adhere to regulations which the rest of the population would never accept.

#### Target group-oriented obstacles

In the future the accommodation offers of the *Wiener Wohnungslosenhilfe* (Vienna Assistance for the Homeless) should thus be planned according to the "diagnosis" and/or prognosis and target groups.

#### Mentally ill homeless people

Due to a lack of cooperation the offers for mentally ill homeless people have not been implemented so far. Similar to the area of care, it is aimed in the field of mentally ill and homeless people to shift the emphasis from hospital care as an in-patient to the supply of catered accommodation and an appropriate consulting or ambulant care.

#### Gender mainstreaming in the assistance for homeless people

It is equally the task in the assistance for homeless people to take into account gender-specific problem situations and needs. It is aimed by means of an extended gender-specific accommodation offer to throw light on female, hidden homelessness in order to more exactly assess its actual scope.

In the course of the partnership, on which this report is based, the practical experiences of the city of Stockholm could potentially contribute to the improvement of this sector in Vienna.

#### Consulting medical care

For acute illnesses of homeless people there is an ambulant medical supply, which can be used anonymously (and thus without having to produce a proof of health insurance).

Since there is a strong correlation between poverty and illness it is aimed to offer more health promotion and counselling in the lower level area. The target group of this offer are people who cannot be reached through regular medical supply, because they have mostly negative experiences with it or are not able to make use of this offer on their own.

### City of Warsaw

For three years, i.e. after the changes of the provisions harmonizing the City structure, the capital city of Warsaw has been undertaking the activities which are aimed at ensuring single and complete social care system. During this time, the non-governmental organizations - main partner of the City in the field of the assistance for the homeless - must become accustomed to the change in the type of co-financing.

#### Harmonized structures and regulations of all Warsaw Social Care Centres

Support for the benefit for the homeless is implemented in Warsaw by 18 district social care centres and the non-governmental organizations managing night shelters, hostels, canteens, medical and sanitary aid points.

The homeless person who applies for assistance in the Social Care Centre may obtain financial and non-financial assistance specified in the Act on social care, i.e. financial benefit (permanent, temporary or target-oriented) and non-financial benefits -social work, funded ticket, insurance fee, special advisory services and other.

In the Social Care Centre, the homeless person may be covered by the Individual Program of moving out from homelessness which consist of support for the homeless person in solving life problems, in particular of family and housing nature and employment. The basic condition and problem for the persons granting assistance is the motivation and will of the homeless to enter the program or some other proposed offers.

In the Social Care Centre the homeless person may obtain information on hostels and shelters in Warsaw and on other forms of necessary assistance. There is one social worker employed in the institutions offering shelter, who undertakes actions aimed at solution of the difficult situation of the homeless person in a permanent contact with the Social Care Centre, establishing the action plan concerning moving out from homelessness.

The City draws special attention to the programs conducted by the non-governmental organizations aimed at the homeless women and mothers with children. Therefore, trainings for the organizers of this assistance are carried out to improve skills and competence in conducting effective actions for the benefit of the group of people in need.

## Appendix 2: Characteristics and use of ETHOS

The aim has been to develop a typology that allows for a more harmonised system of data collection and for a more comparable approach to data collection and analysis at a European level. That is to say, it is not intended to provide a European data collection approach but rather to allow for a more effective comparison of national level data at a European level. The development of ETHOS has been approached as a dynamic process by which the typology can be refined as the understanding of homelessness and housing exclusion improves. The European Observatory on Homelessness will therefore continue working on yearly reviews of ETHOS. The approach is that the conceptual model is robust and the four conceptual categories remain the basis of the typology. However, the operational categories and sub-categories can be reviewed, and more accurately defined, in order to make the typology fit for policy, monitoring and data collection purposes.

The 2005 review has examined the operational categories of the typology in the light of national definitions and data availability. This knowledge can now be used to revise the operational categories and sub-categories proposed in the previous edition of this review. The aim of this revision is, wherever possible, to simplify the typology by focussing on the generic definition of terms. It is also the aim to allow the typology to be used flexibly at national level by nesting national nomenclature and classifications within these more generic definitions of categories of accommodation provision and living situation. Hence the proposed revision allows for national sub-categories to be included. The main changes to the typology in 2006 include a revision to the labels used in the operational categories, the introduction of a generic definition of the operational categories using key elements identified in the report and the introduction of the column for national sub-categories. The generic definitions are explained in the relevant sections in the report. The generic definition provides a standard definition that is not specific to any one country and is derived from the conceptual model that underpins the ETHOS typology. The intention of the national sub-categories column is to allow each country to specify specific categories and nomenclature for each generic category as relevant.

It is important to fully understand the nature of ETHOS: ETHOS is a dynamic typology which can be adapted to new developments in the phenomenon of homelessness. Homelessness may change as policies become to take effect e.g. when street homelessness starts to decrease, homeless policies may start shifting towards more re-housing and resettlement. It is not a hierarchy of the severity of exclusion e.g. living in a shed or a garage (inadequate housing) is not necessarily better than living in shelters or supported accommodation (houselessness). It is important to note that this typology is an open exercise which makes abstraction of existing legal definitions in the EU members states. It is not developed to replace national definitions - rather ETHOS is the fruit of a compromise between the different nature and scope of homelessness in EU25 countries.

It has emerged as highly relevant for policy-making for the following reasons:

It captures the new realities of homelessness - especially acknowledging the different scope and nature of the phenomenon in the new member states where many people live in

poor inadequate housing conditions, sometimes create situations where people in their own homes suffer from homelessness or are threatened by homelessness. Moreover, it provides a new approach to poverty - not only linked to lack of employment but also lack of a home.

ETHOS recognises the wide range of groups who may be vulnerable to homelessness (or housing deprivation) including young people, older people, women fleeing domestic violence, prisoners about to be discharged, people with mental health problems and people with addiction problems, people with high levels of debt and asylum seekers and refugees. As well as understanding the profiles of homeless people, it is important to understand the process of homelessness and housing deprivation. ETHOS has been developed using this pathways approach acknowledging the pathways into and out of homelessness and provides a clear framework for the three main elements of policies addressing homelessness - prevention, accommodation and support.<sup>5</sup>

ETHOS has been agreed on by FEANTSA homeless service providers in EU25 countries. Moreover, there is increasing debate and use of ETHOS by public policy bodies, research bodies, and intergovernmental bodies. A number of countries are using the ETHOS definition as a platform to debate the approach to data collection and policy development on homelessness, and to debate the nature and form of more integrated policies in relation to housing exclusion and homelessness. FEANTSA are promoting trans-national exchanges on the application of ETHOS in different national contexts. In terms of policy development, in countries like Sweden, Spain, Ireland and the Czech Republic, ETHOS is currently being used as a basis for inter-agency working and mobilisation of actors by providing a common basis for exchange between the tiers of government, inter-departmental co-ordination and highlighting the context within which NGO information can assist public sector policy-makers. In other countries like Luxembourg, Portugal, Poland, and Romania, research is being carried out on the basis of different ETHOS categories. In Luxembourg (CEPS/INSTEAD), Romania (Ministry of Transport, Construction and Tourism) and Portugal (Social Security Institute of the Ministry for Labour affairs), research on homelessness has been commissioned on the basis of ETHOS. In Poland, regional research is being carried out in the Pomeranian Region based on ETHOS.<sup>6</sup>

On a European or international level, ETHOS has been discussed at the Informal meeting of Housing Ministers, and included in their statistics publication [2004](#). The UK Presidency Round Table on Social Inclusion [2005](#) dedicated a workshop to housing and homelessness based on ETHOS. In terms of data collection and measurement, the European Observatory on Homelessness is developing the typology by examining the definition and measurement issues involved in each of the operational categories. This will be published in the 2005 Review of Statistics on Homelessness in Europe in December 2005 and will be used to refine the typology. The application of ETHOS to the member states demonstrates a

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<sup>5</sup> See upcoming 2005 Review of Statistics on Homelessness in Europe on FEANTSA website [www.FEANTSA.org](http://www.FEANTSA.org)

<sup>6</sup> See Bill Edgar ([w.m.edgar@dundee.ac.uk](mailto:w.m.edgar@dundee.ac.uk)) or Liz Gosme ([liz.gosme@FEANTSA.org](mailto:liz.gosme@FEANTSA.org)) for more information

number of issues already. First, and alarmingly, despite the prevailing perception of homelessness as rough sleeping, only one country undertakes any regular count and the issues of underestimation are well known. However, most countries do not even have an up-to-date count of the number of available night shelter spaces or their occupancy. Second, there are difficulties comparing between countries (and even in the same country over time), because there is no clear definition of a homeless hostel or temporary accommodation used to alleviate homelessness. Third, the use of supported accommodation for homeless people cannot always be distinguished from other forms of supported accommodation or it is not measured in a consistent manner. Finally, despite being signatories to international conventions and being required to ensure access to decent housing as part of the EU Social Inclusion Strategy, many member states do not have official definitions of over-crowding or of fitness for habitation.

It seems that ETHOS is developing into a guidance tool for all actors in the fight against homelessness, by pointing to the need for an integrated approach to homelessness policy development, and for improved data collection and measurement at member state level. This requires an understanding of the need for and relevance of stock and flow data (for different ETHOS categories) for different policy purposes. FEANTSA is contributing also to the debate within the EU Social Protection Committee for appropriate indicators on housing exclusion. ETHOS also points to the need to make better use of NGO data and for more investment in electronic databases currently used in a number of countries (Ireland, UK, Czech Republic, the Netherlands, etc). Finally, in this regard FEANTSA will identify the nature and type of core variables that should be capable of extraction from databases maintained by its members so that a more consistent comparison can be made.

Next pages:

### Appendix 3: framework conditions

# Copenhagen framework conditions regarding social housing and homeless integration

## Federal

- Management of National Insurance benefits
- Federal housing allowances
- Loans and grants (for housing objects, buildings)
- Law of upper limits of rental fees (in dependence of housing standards)
- Board of arbitration to check rental fees
- Federal rent allowances (see local)
- Half of costs to shelters and crises centres for homeless

## Local/Municipal

- Deposit/guarantee for deposit
- Training of housing skills
- Local housing allowances (for pensioners 25% is paid by the municipal and 75% by federal, whereas all others in need get 50% paid by municipal and 50% by federal administration)
- Loans and grants (individual)
- Social support for families
- Post housing support
- Eviction prevention
- Municipal housing
- Motivation, advice and guidance
- Assist homeless on streets to find a solution to their housing problems

# Glasgow framework conditions regarding social housing and homeless integration

## Federal

- Housing Act 1996
- Homelessness Act 2002

## National Scottish Legislative Framework

- Ongoing improvements over last 5 years
- National Task Force on Homelessness (2001) with 59 recommendations
- Legal duties for the Council
- International Human Rights Award for Homelessness (Scotland) Act 2003

## Local

- Glasgow Street Homelessness Review Team Report (2000) with 11 recommendations
- Glasgow's Homelessness Strategy
- Key Aim - to provide homelessness services at a local level

## Regional/local

- Establishment of Homelessness Partnership
  - Glasgow City Council
  - Greater Glasgow Health Board
  - Voluntary Sector
  - Scottish Executive

# Helsinki framework conditions regarding social housing and homeless integration

## Federal

- Government programme to diminish homelessness
  - ensure a socially and regionally balanced and stable market
  - improve the quality of housing
  - eliminate homelessness
  - preconditions for increasing the supply of rental dwellings
  - sheltered housing and different kind of supported housing for groups with multiple social problems

## Regional/local

Capital region (cities of Helsinki, Espoo and Vantaa)

- Program to diminish homelessness
  - action plan to diminishing homelessness 2002-2005
  - 10000 new dwellings yearly
  - 1000 dwellings more will be

## Local/municipal

- providing dwellings for homeless persons
- arranging temporary accommodation and support measures.

# Newcastle framework conditions regarding social housing and homeless integration

## Federal

- Housing Act 1996
- Homelessness Act 2002
- Homelessness and Supporting People Grant\*
- Supporting people Grant\*
- Housing benefit\*
- Neighbourhood renewal fund\*

## Regional

- Single Housing Investment Pot (Capital)

## Regional and local income support

## Local

- Municipal housing
- Supporting people services to promote independence and prevent eviction
- Local grant aid
- All on left \* are provided nationally as block grants but then administered locally in accord with local strategies

# Oslo framework conditions regarding social housing and homeless integration

## Federal

- Management of National Insurance benefits
- Federal housing allowances
- Loans and grants (for housing objects, buildings)

## Local/Municipal

- Deposit/guarantee for deposit
- Training of housing skills
- Local housing allowances
- Loans and grants (individual)
- Post housing support
- Eviction prevention
- Municipal housing
- Motivation, advice and guidance (Purpose: Assist individuals to find a solution to their housing problems)

## Riga framework conditions regarding social housing and homeless integration

### State

- Secures allocation of payment of benefits to designated groups of population;
- Participates in co-financing daycare centers for persons with mental disorders for the first three years from the opening date of the establishment, as well as fully finances services of institutions of sustained care for persons with mental disorders and the blind;
- Enforces education and employment programs of the population;
- Probation functions are in the area of

### Municipal

- Ensuring night asylum for the homeless;
- Providing social services and social assistance according to municipality resident's needs;
- Providing support in solving housing issues;

# Rotterdam framework conditions regarding social housing and homeless integration I

## Federal

- Homeless policy and grants are decentralized to local authorities
- Special health care (AWBZ) decentralized to regional care insurance offices (non-profit)

## Local/Municipal

- Social benefits
- Local housing allowances
- Local grants for the institutions housing the homeless
- Motivation, advice and guidance (Purpose: Assist individuals to find a solution to their housing problems)

# Rotterdam framework conditions regarding social housing and homeless integration II

## Federal

- Law of upper limits of rental fees
- Homeless policy and grants are decentralized to local authorities
- Board of arbitration to check

## Regional

- Special health care (AWBZ) decentralized to regional care insurance offices (non-profit)

## Local

- Social benefits
- Local housing allowances
- Local grants for the institutions housing the homeless
- Training of housing skills
- Social support for families
- Permanent housing for alcohol and/or drug abusers
- Permanent housing for people with mental health problems

## Local income support for

- Costs of rent contract, rent and rent arrears
- Costs of furniture, energy and water supply

# Stockholm framework conditions regarding social housing and homeless integration

## Federal/National

- Funding for projects focused on developing methods against homelessness (3,2 million Euro during three years from 2005)
- Annual count 2005 and 2007
- Housing benefit/allowance
- State aid for the non-governmental organisations working with homeless persons

## Local/Municipal

- Shelter guarantee since 1999
- Training & support for individual living
- Training of housing skills
- Eviction prevention
- Debt counselling
- Local housing authority
- Financial support
- Social support for families
- Motivation, advice and guidance to assist individuals to find a solution to their housing problems
- Subsidies for the non-governmental organisations working with homeless persons

# Utrecht framework conditions regarding social housing and homeless integration

## Federal

- Management of National Insurance benefits
- Special budgets for Large Cities (GSB)
- Federal housing allowances
- Loans and grants (for housing objects, buildings)
- Health insurance
- National budget: € 16.400.000 (vr=2005)

## Local/Municipal

- Deposit
- Support with financial problem
- Social benefits
- Post housing support
- Eviction prevention
- Social relief
- Housing by social corporations (limited)
- Support, advice and guidance  
Municipal budget: € 11.400.000
- Health insurance: € 10.000.000 (vr=2005)

# Vienna framework conditions regarding social housing and homeless integration

## Federal

- Law of upper limits of rental fees (in dependence of housing standards)
- Board of arbitration to check rental fees
- Courts are under legal obligation to inform municipal services about probably evictions
- Federal rent

## Regional

- Loans and grants for housing objects (buildings)
- Loans and grants for individuals
- Regional housing allowances

## Local

- Municipal housing
- Service to prevent evictions
- Training of housing skills
- Social support for families
- Permanent housing for

## Regional and local income support for

- Deposit/guarantee for deposit
- Costs of rent contract, rent and rent arrears

# Warsaw framework conditions regarding social housing and homeless integration

## Federal

- Law on protection of tenants  
(a right to a social flat in case of eviction)
- Drafting and financing of protection programs
- Housing allowances
- Right to health care for

## Regional

- Programs to fight against homelessness and alleviating its effects
- Grants for non-governmental

## Local

- Target and period benefits
- Counseling
- Social work
- Social flats
- Ensuring asylum and meals
- Social employment
- Grants for non-governmental organizations
- Professional activation

Appendix 4: Offers for the homeless and non-homeless

**City of Copenhagen**

<b>Offers for homeless people</b>	<b>Offers for non - homeless people</b>
<b>Temporary Programmes to accommodate homeless people</b>	<b>Support to prevent homelessness</b>
82 Permanent places (44 individual cottages, 38 apartments/shared flats)	Financial support -Living allowance -Housing allowance
299 Places to live in supported accommodation(up to several years, but not permanently (§91))	Eviction prevention -Home-counsellors -Support by social workers -Home help and support
5 Places to live for a specific target group (Women from Greenland)	Employment services
592 Places at shelters and crises-centres for temporary stay (§94)	Services and homes for elderly people, for (drug or/and alcohol) abusers and mentally disabled persons, and for young people (under 18 years) and families with social problems
Emergency beds for free - 0  But all homeless people gets social support from the municipality/state and then pay about 50% of this for staying in shelters	
	Integration programs and pre-labour marked-education for refugees and ethnic groups
<b>Accompanying programmes</b>	<b>Programmes to safeguard sustainable accommodation</b>
17 - Streetworkers (one in each local social centre in Copenhagen and two in connection to a shelter for addicts). Aim of the project is to secure legal rights and claims for all homeless people on the streets	Possibility of reorganising debt
139 Day centres (109 places at day-centres and 30 places at night-centre)	Financial support
4 Health-clinic-centres for homeless on the streets	Eviction prevention -Home-counsellors -Support by social workers -Home help and support

### **Auxiliary programmes**

Establishment of 600-1200 alternative apartments for social marginalized groups 2002-2008

Local development strategies in several parts of the city of Copenhagen

Sector plan for development of programs for addicts

**City of Genoa**

Offers for homeless people	Offers for non - homeless people
<b>Temporary programmes to accommodate homeless people</b>	<b>Support to prevent homelessness</b>
2 Emergency accommodations	Prevention of eviction
4 second level accommodations	Mail service
4 Communities accommodations	
4 served housing accommodations	
Cool emergency accommodations	
<b>Accompanying programmes</b>	<b>Programmes to safeguard sustainable accommodation</b>
Reception and Orientation	
Taking on care	
Registry residence services	
Diurnal reception	
Urgencies	
Primary Services  - Refectory  - Takeaway food  - Distribution of food  - Economic contributions  - Shower and distribution of shower tickets  - Laundry  - Distribution of clothes  - Pharmacy  - Medical treatment  - Distribution of hygienic material	
<b>Auxiliary programmes</b>	
Specific training and employment programmes	
Protected labs	
Workshops	
Support for firms and employed	

Procreative and Cultural activities

City of Glasgow

Offers for homeless people	Offers for non - homeless people
<b>Temporary programmes to accommodate homeless people</b>	<b>Support to prevent homelessness</b>
Large scale hostels (male & female) - being phased out	Integrated assessment to determine housing and support needs
Temporary furnished flats across the City	A range of integrated health & homelessness services
Bed & breakfast accommodation - being phased out for families with children	Assessment & Diversion Team - who prevent homeless people using hostels
Assessment centres  - General single homeless  - Young single homeless (16+17 year olds)	Prevention work  - Housing Information & Advice Strategy  - Access to Housing Support
Women's Aid refugees	
- Housing support in hostels and temporary accommodation	
Supported accommodation for continuing drinkers	
Small scale resettlement projects for hostel residents	
Supported accommodation for young people (18-25) with complex needs	
Supported accommodation for older people with alcohol related brain damage	
Move on accommodation for homeless drug users	
<b>Accompanying programmes</b>	<b>Programmes to safeguard sustainable accommodation</b>
Specific projects funded to work with rough sleepers including Street Teams	- Floating support for service users with learning disabilities, mental illness, older people, continuing drinkers
Rehabilitation services for alcohol/drug addictions	- Enhanced personal support service
	- Homecare & enhanced homecare
	Increased social care assessment staff at local level across the City
<b>Auxiliary programmes</b>	
Joint training	
Links to training, education & employment for service users	

Offers for homeless people	Offers for non - homeless people
Temporary programmes to accommodate homeless people	Support to prevent homelessness
- Small dwellings	Financial support
- Support dwellings	- Living allowance
- Support homes	- Housing allowance
- Serviced homes for elderly homeless	Structural support
- Shelter	- Housing programme
- Hostels and dormitories	- Rented dwellings owned by the city of Helsinki
- Serviced and supported homes	- Rented dwellings owned by non-profit associations
- Institutions	Eviction prevention  - Housing counsellors  - Supported by social workers  - Home help  - Outpatient care for intoxicant abusers and mentally disabled persons
Accompanying programmes	Programmes to safeguard sustainable accommodation
- Day centres	- Financial support
- Street work	- Housing counsellors
- Employment services	- Supported by social workers
	- Home help
	- Outpatient care for intoxicant abusers and mentally disabled persons
	- Employment services
<b>Auxiliary programmes</b>	
Centre for HIV-positive drug abusers	
Needle exchange	

**City of Newcastle**

Offers for homeless people	Offers for non - homeless people
Temporary programmes to accommodate homeless people	Support to prevent homelessness
56 statutory units (133 beds)  137 direct access beds  Total 193 units  Also 2 x women's refuges	258 floating support beds for people with learning difficulties, young people, drug and alcohol abusers, people with mental health problems, victims of domestic violence, refugees, gay people  409 non direct access for people with learning difficulties, young people, drug and alcohol abusers, people with mental health problems, victims of domestic violence, refugees, gay people, offenders, the elderly  Total 667 units  Direct access to available settled accommodation for eligible applicants
	Eviction and repeated homelessness prevention protocols
Accompanying programmes	Programmes to safeguard sustainable accommodation
1x health clinic	3 x out-posted health workers
5 x day centres	12 x advice and support workers
1 x evening centre	
3 x out-posted mental health workers	
1x health visitor	
2 x social workers for u18s	
<b>Auxiliary programmes</b>	
Prevention of homelessness through identification of risk indicators and agreed actions to reduce risk e.g. visits if previously homeless and in debt	

**City of Oslo**

<b>Offers for homeless people</b>	<b>Offers for non - homeless people</b>
<b>Temporary programmes to accommodate homeless people</b>	<b>Support to prevent homelessness and to safeguard sustainable accommodation</b>
Quality agreements with four hostels/hotels	Municipal housing, including: regular housing, co-located housing for groups with special needs, houses/flats adapted for people needing special care  Three forms of disposition: housing owned by the municipality, privately owned housing rented by the municipality, privately owned housing with municipal right of disposition
Centres for short-term housing and training of housing skills	Start loans
Short term housing (Tenancy act § 11-2)	First home grants, Housing allowances
Crisis accommodation (municipal and private)	Guarantees for deposits
<b>Accompanying programmes</b>	Measures for helping households with payment problems (rent/loans)
Visit to clients in hostels/shelters	Management of National Insurance benefits
Practical assistance in finding places to live	Loans and grants for adapting existing housing
Programmes for training living skills	Practical assistance in finding more suitable housing
Outreaching activities (street work, detached social work )	Post housing support
Medical assistance	Measures for "catching" people discharged from institutions
Day centres and activity centres	
<b>Auxiliary programmes</b>	
Information, motivation, advice and guidance	
Rehabilitation institutions and care institutions	
Childcare Centres	
Four private centres which offer housing to families or children (connected to childcare)	
Grants for rental housing	
Survey of housing needs	
Measures to improve housing environment	
Programmes for training employment skills	

**City of Riga**

<b>Offers for homeless people</b>	<b>Offers for non - homeless people</b>
<b>Temporary Programmes to accommodate homeless people</b>	<b>Support to prevent homelessness</b>
Service of night shelter for up to 336 persons in municipality shelter (for men 115 places, for women 46 places); in "LatAISS" night shelter (for men 50 places); in "Blue cross" night shelter (for men 125 places).	Financial support to avoid evicting from the housing:  -Living allowance
Service of shelter for up to 69 persons  In municipality shelter: for men 25 places; for women 14 places; for families 30 places.	Eviction prevention: Support by social workers and services for persons with social problems (in municipal Social services agencies)
Short stay service for youngsters released from imprisonment 5 places	Employment services (provided by State employment agency)
	Group-house/flat services for persons with disabilities (provided by 5 NGOs) - 52 places
<b>Accompanying programmes</b>	<b>Programmes to safeguard sustainable accommodation</b>
Short term social care beds in hospitals - 140 places	Municipality's help in housing: 904 rooms in social living houses; and other living space offered by municipality
Cooperation with policemen who inform homeless people about the possibilities to receive shelter services and if it is necessary take them to the shelter.	Financial support to ensure the possibility to pay the rent
To ensure the health care services accessibility for homeless. There are established social doctor's consultation rooms in three places in Riga.	A chance to stay in long-term social care and social rehabilitation institutions for persons in age of pension and persons with disabilities - 1126 places
<b>Auxiliary programmes</b>	
Rehabilitation centres after imprisonment -(finas Valsts prob cijas dienests)	
National action plan to reduce the poverty and social exclusion (2004 - 2006)	

**City of Rotterdam**

Offers for homeless people	Offers for non - homeless people
<b>Temporary programmes to accommodate homeless people</b>	<b>Support to prevent homelessness</b>
Day shelters 459 places / capacity	Local Care Networks 18 networks
Night shelters 263 beds	Homeless prevention project 90 places
Pensions 128 beds	Crisis Centre 12 beds
Rest home 65 beds	
<b>Accompanying programmes</b>	<b>Programmes to safeguard sustainable accommodation</b>
Housing assistance 330 places	Housing assistance 330 places
Medical care 25 beds	Special debt programmes
User rooms 535 places	
Work & activities 20 projects	
<b>Auxiliary programmes</b>	
Doubling of the capacity of the shelters within 10 years	
Spreading the shelters across the city (not just in the problem areas)	
Variation / Differentiation in methods of care and cure	
Chain approach: prevention - asylum - progress (work & well-being)	

**City of Stockholm**

Offers for homeless people	Offers for non - homeless people
Temporary programmes to accommodate homeless people	Support to prevent homelessness
Residential Hostels	Eviction Prevention
Supervised accommodation in apartments	Rent subsidies
	Easily affordable (communal) housing
Accompanying programmes	Programmes to safeguard sustainable accommodation
Street work	Easily affordable (communal) housing
Shelter guarantee	Housing agencies for people with low income
Day Centres	
Specific medical care	
<b>Auxiliary programmes</b>	
Specific training and employment programmes	

**City of Utrecht**

Offers for homeless people	Offers for non - homeless people
<b>Temporary programmes to accommodate homeless people</b>	<b>Support to prevent homelessness</b>
Day shelters: 165	5 Local networks to prevent nuisance and eviction
Night shelters: 100	
24-hour shelters with user rooms + health care: 205	
Pensions: 80	
Short stay rooms: 86	
Long stay rooms for drugs addicts: 87	
<b>Accompanying programmes</b>	<b>Programmes to safeguard sustainable accommodation</b>
Housing assistance: 100	Housing assistance: 100
Special debts programs: 200	Special Debts programs: 200
Medical Care: 18 beds	
Work & activities: 30 ( <i>Dagloon</i> )	
<b>Auxiliary programmes</b>	
Doubling the capacity of long stay rooms for alcohol and drug addicts	
Increasing the number of houses by 300 every year	
Differentiation of care and cure	
Decreasing the number of rough sleepers by 50 each year	
Introducing protocol for preventing eviction	
Increasing local networks and extending to local care networks	

**City of Vienna**

Offers for homeless people	Offers for non - homeless people
21 Temporary programmes to accommodate homeless people	1 Support to prevent homelessness
Emergency accommodations	Eviction prevention
4 Municipal shelters	
5 Residential hostels(private partners)	Easily affordable (communal) housing
Supervised accommodation in apartments (8 private partners)	Rent subsidies
	Housing agencies for people with low income
Temporary cheap hotel accommodation (planned)	Projects focussing on dwelling competence (Equal)
5 Accompanying programmes	7 Programmes to safeguard sustainable accommodation
7 Central distribution Service	5 Residential homes focussing on the needs of elderly, former homeless people
Gruft (Day Centre, Street work, emergency beds)	2 Self-administrated housing projects for the ex-homeless
Day Centre of municipality	
Louise bus (Specific mobile medical care)	Permanent accommodation for families with specific needs (planned)
SAMBAS (Specific training and employment programme)	Easily affordable (communal) housing
<b>Auxiliary programmes</b>	
drug addiction, probation support, juveniles, specific programmes for women	

**City of Warsaw**

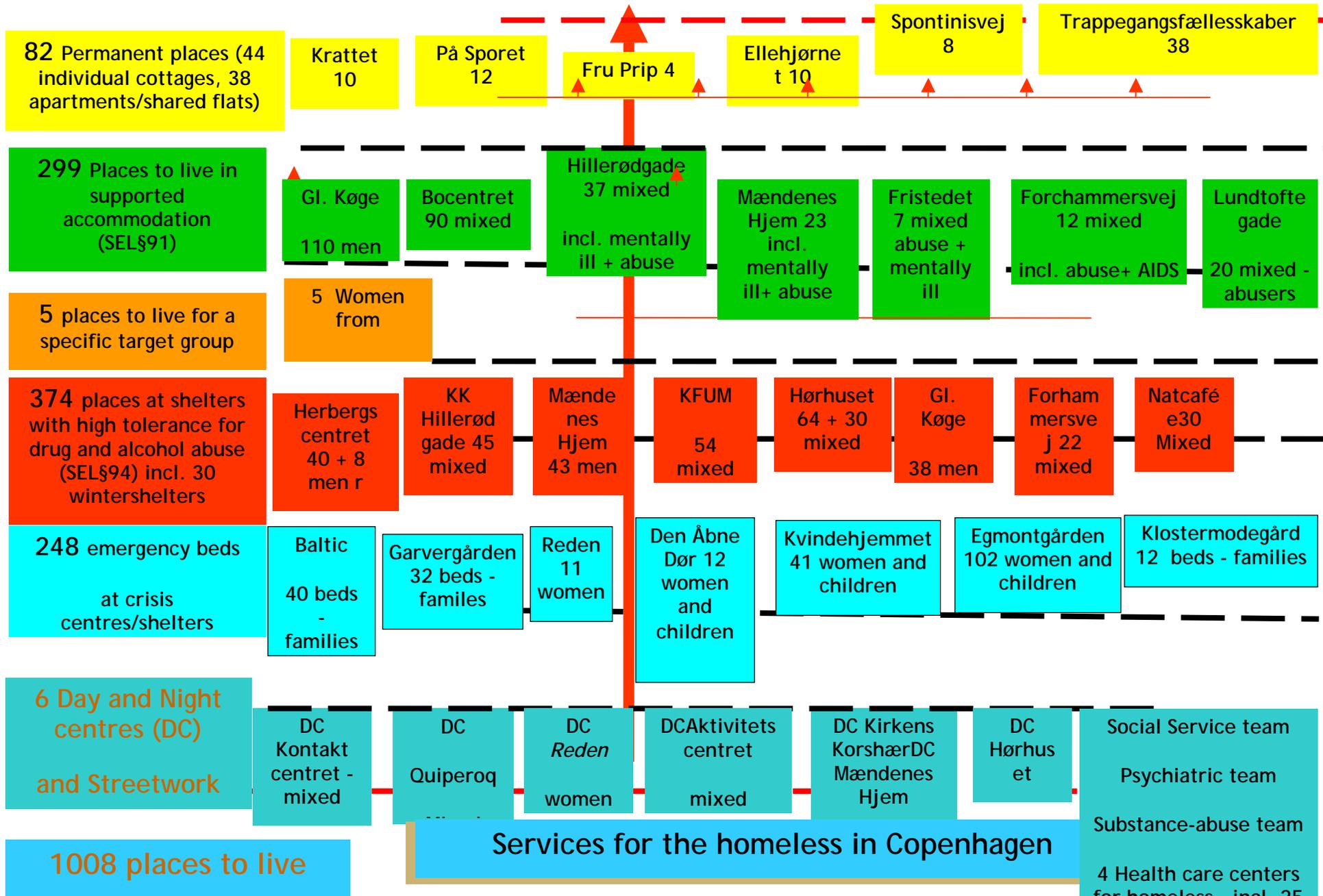
Offers for homeless people	Offers for non - homeless people
<b>Temporary programmes to accommodate homeless people</b>	<b>Support to prevent homelessness</b>
32 shelters (NGO's) for homeless people	Financial support
Totally 2.800 places for homeless to stay, among others:	social work
36 places in supported accommodations	psychological, social, law counseling
25 places for prisoners' after-care	employment services
76 places for homeless covered by addiction treatment	prevention and addiction treatment
140 places in winter for homeless staying at railway station	food and material assistance
	meals
<b>Accompanying programmes</b>	<b>Programmes to safeguard sustainable accommodation</b>
10 agencies medical care for non-insured with 219 stationary places	housing allowance
11 agencies rendering food and material assistance	
10 canteens (3.380 meals per day)	
psychological, social, law counseling	
sanitary assistance	
<b>Auxiliary programmes</b>	
social work with family	
institutions for victim of domestic violence	

Next pages:

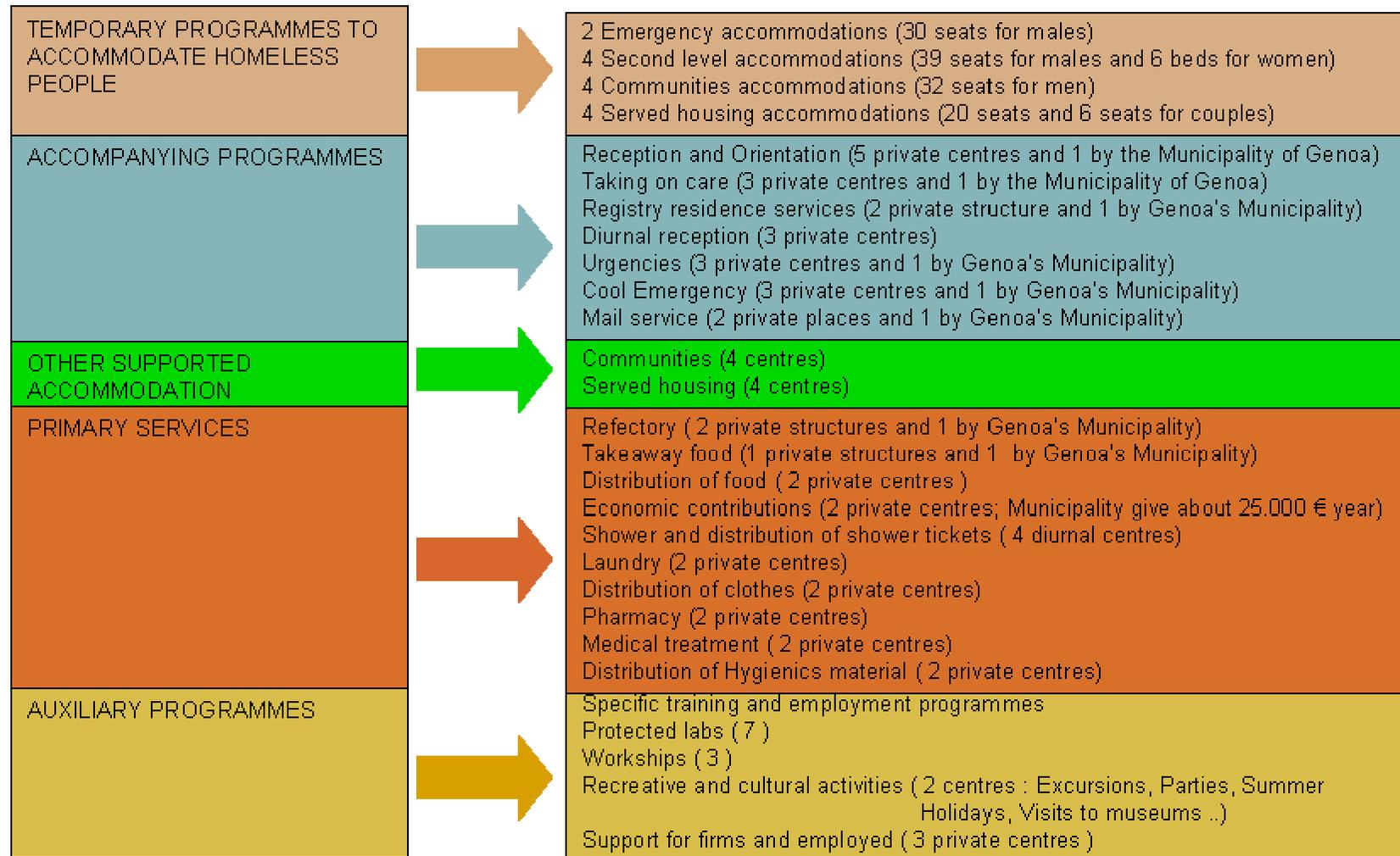
**Appendix 5: Structure of local homelessness support**

# SUPPORT FOR THE HOMELESS IN Copenhagen 2004

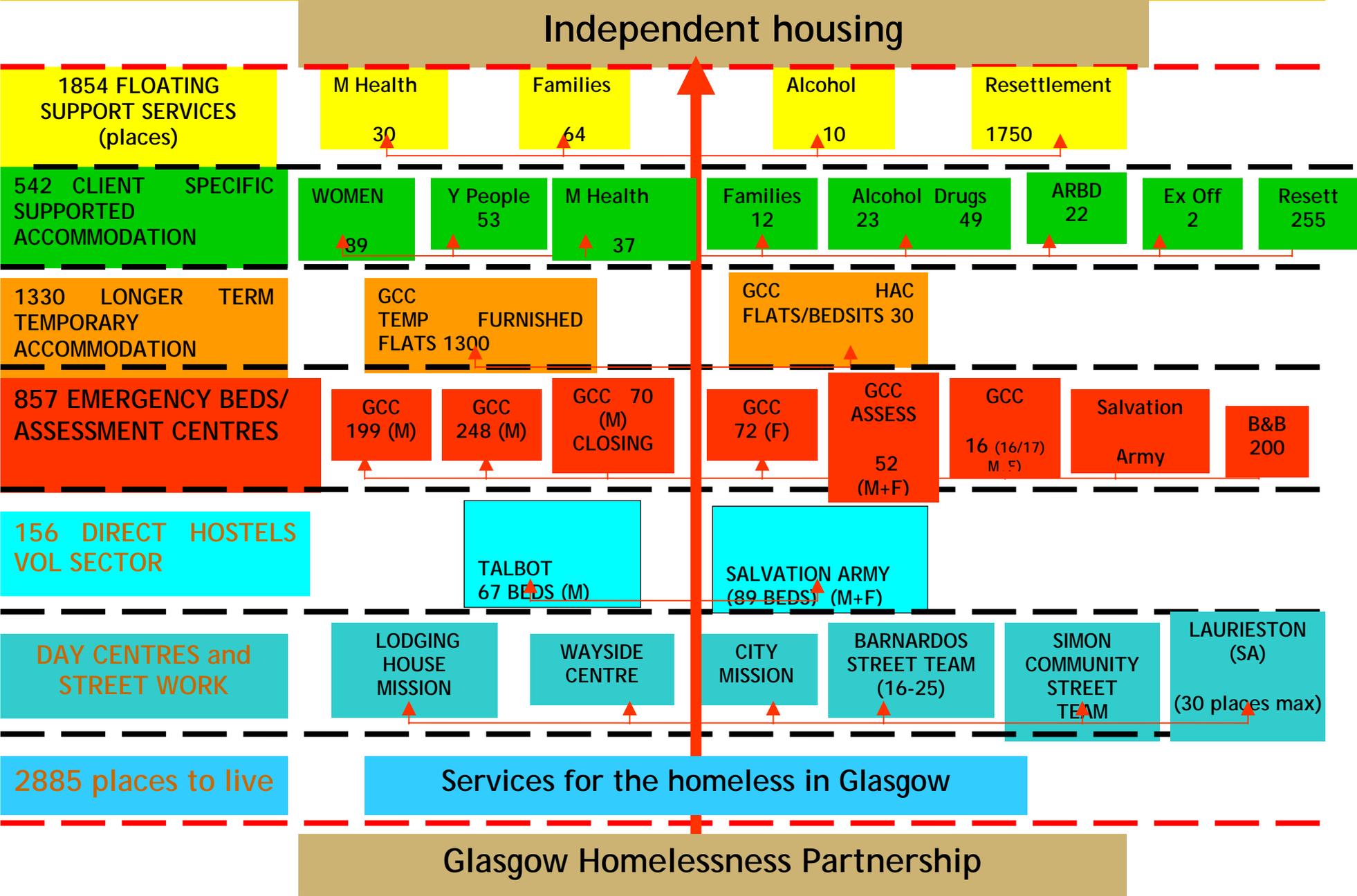
1/3 of vacant flats in Cooperative Housing Societies for independent housing (app. 300 flats pr. year)



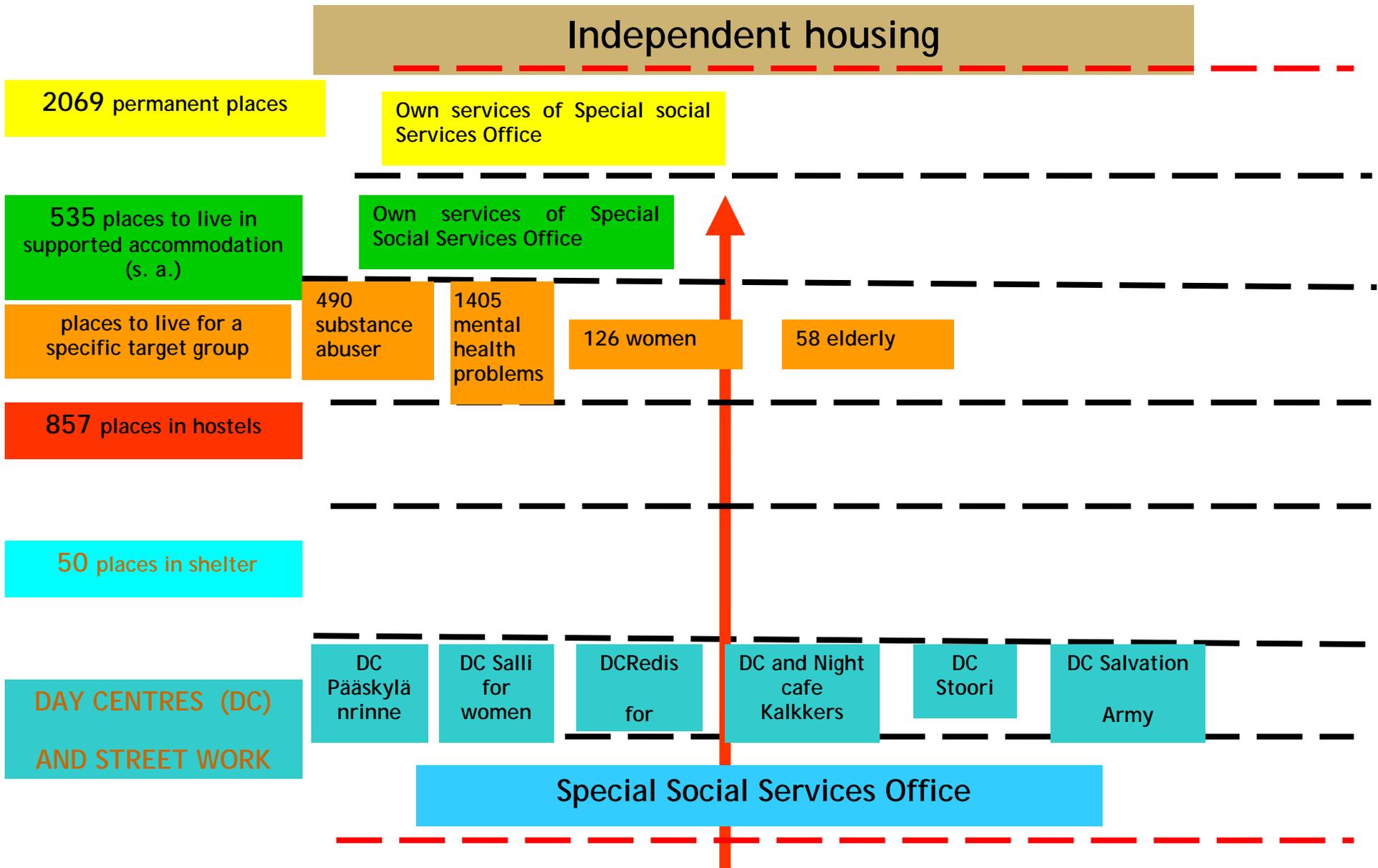
## SUPPORT FOR THE HOMELESS IN GENOA 2004



# SUPPORT FOR THE HOMELESS IN GLASGOW 2004

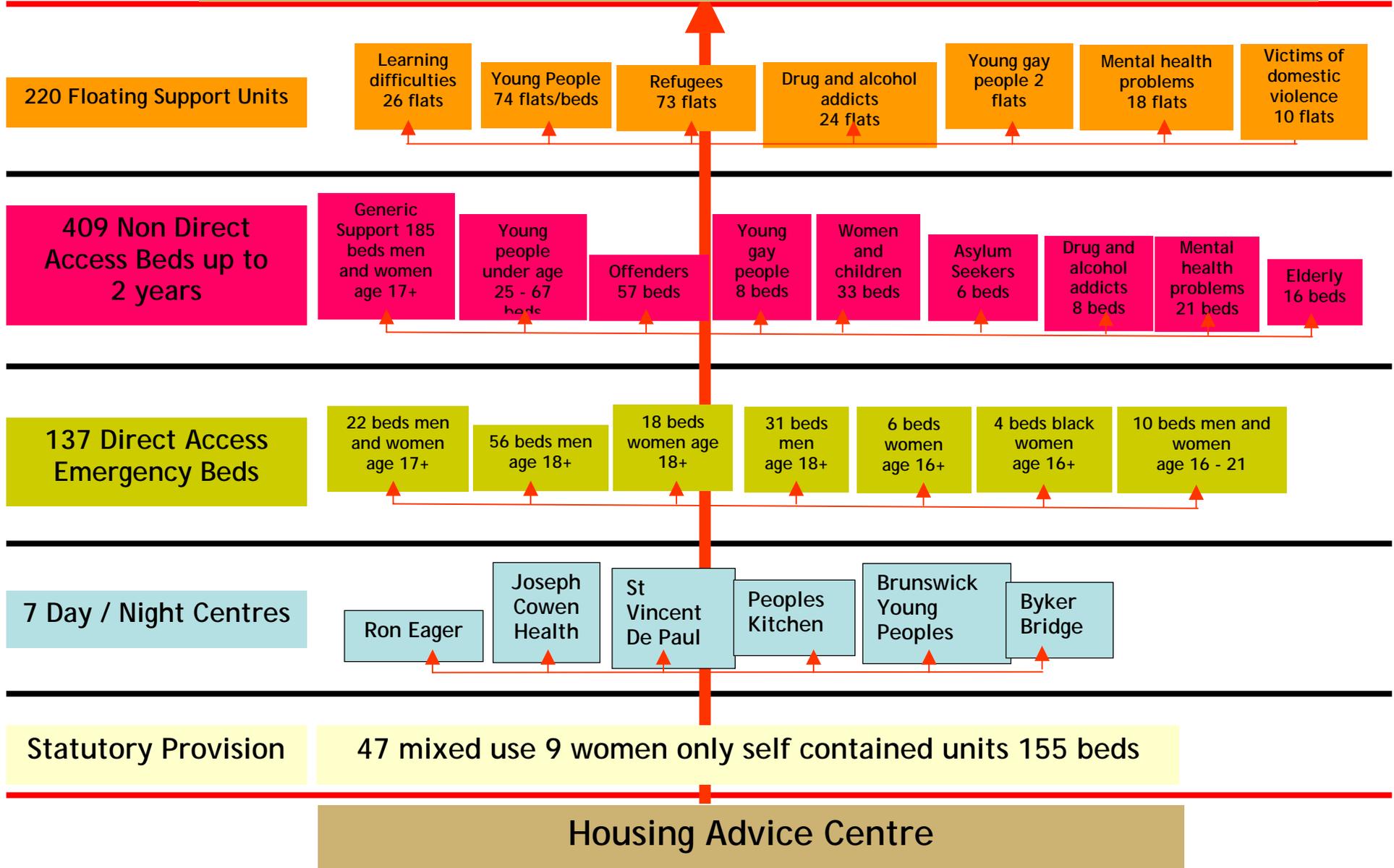


# SUPPORT FOR THE HOMELESS IN HELSINKI 2004

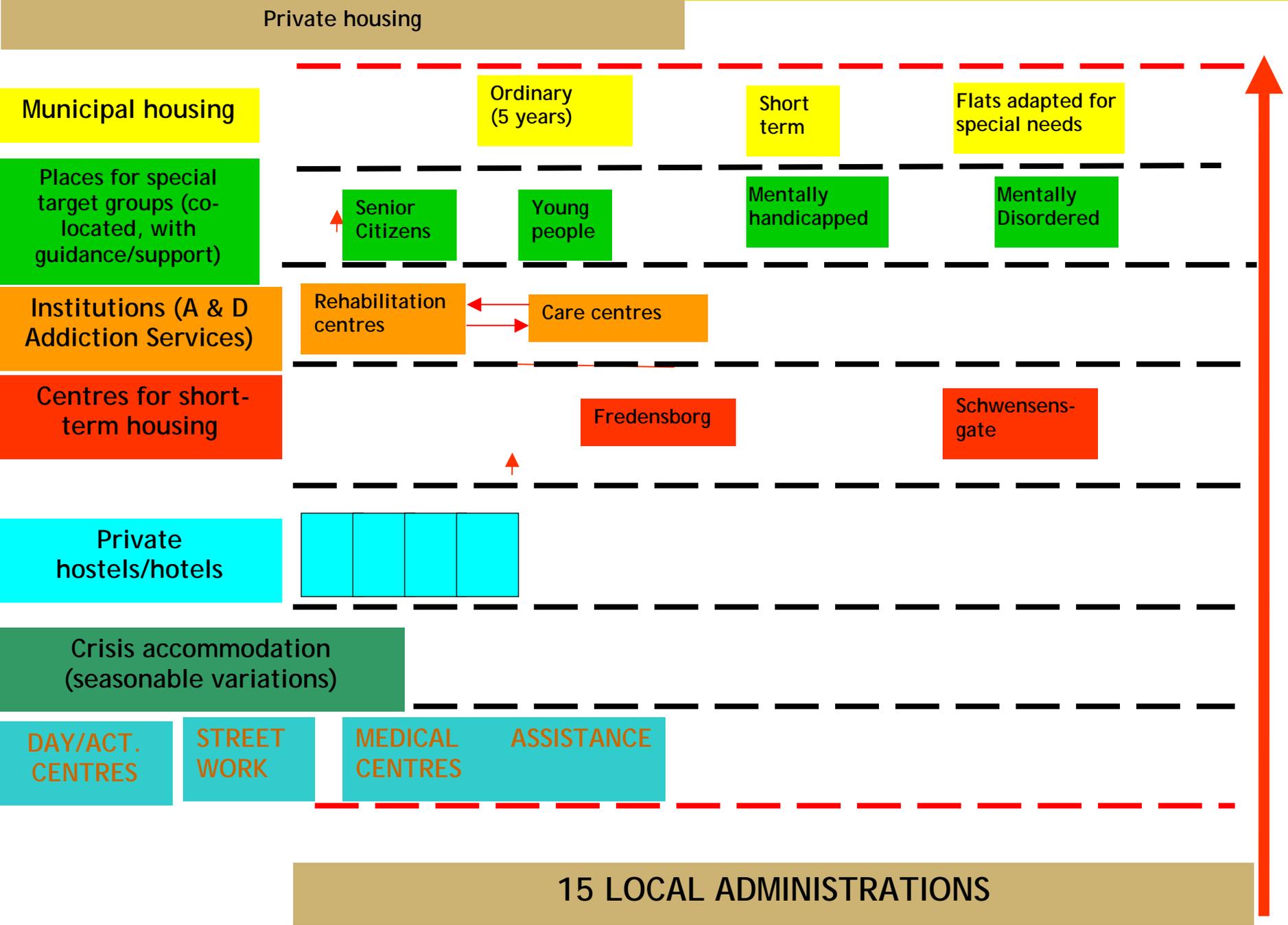


# SUPPORT FOR THE HOMELESS IN NEWCASTLE 2004

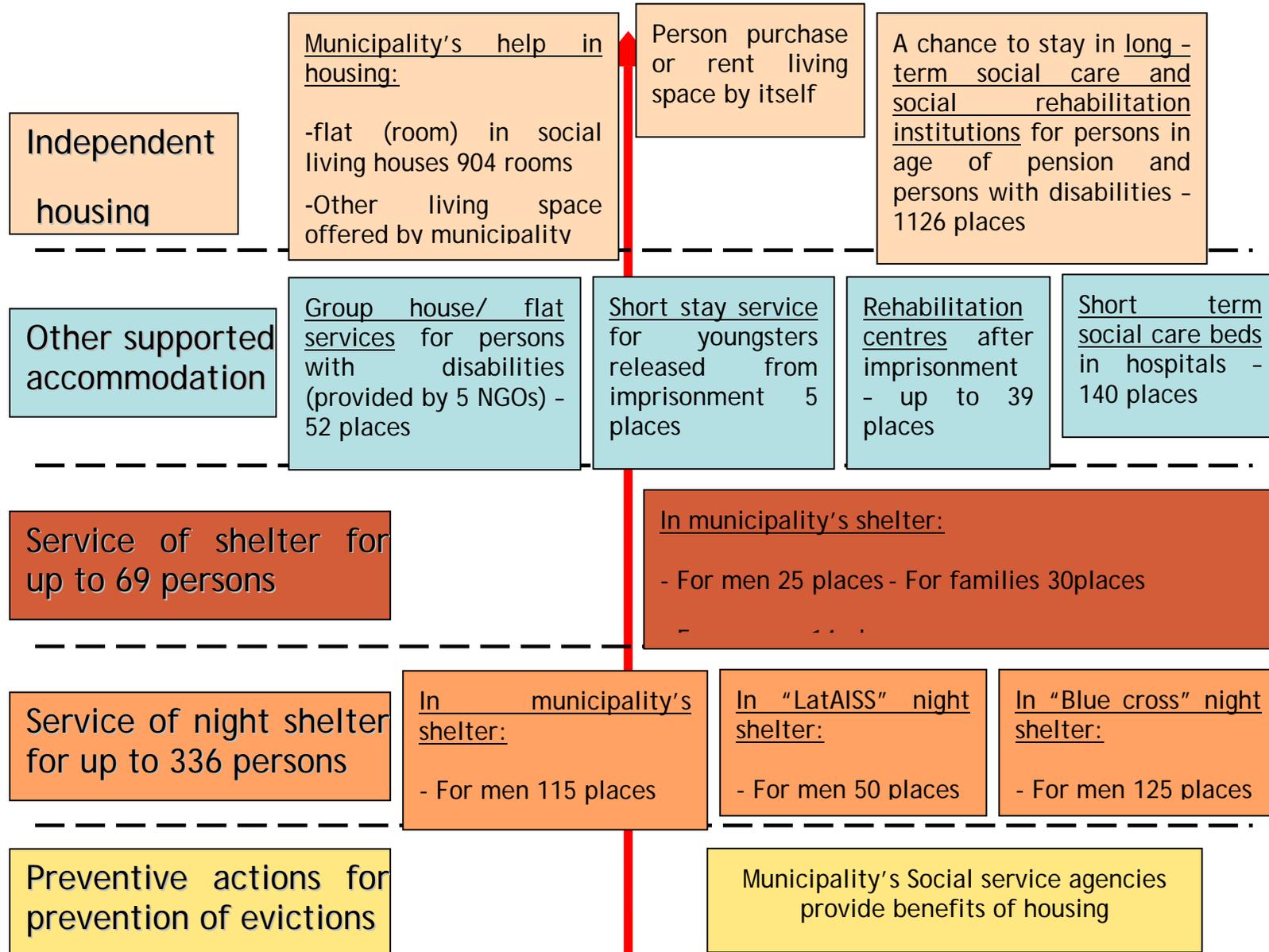
## Independent Living Low level support from housing officers

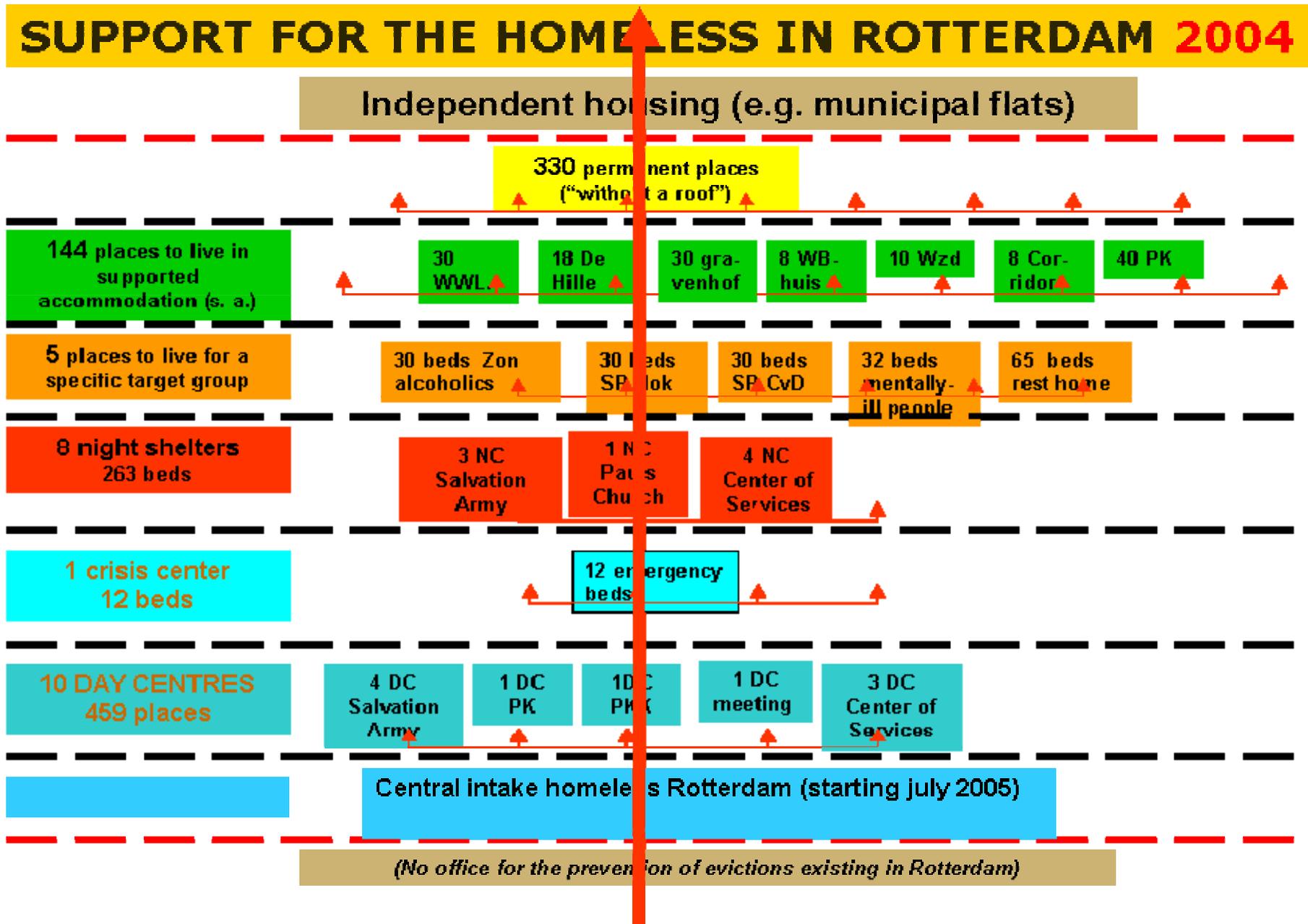


# SUPPORT FOR THE HOMELESS IN Oslo 2005

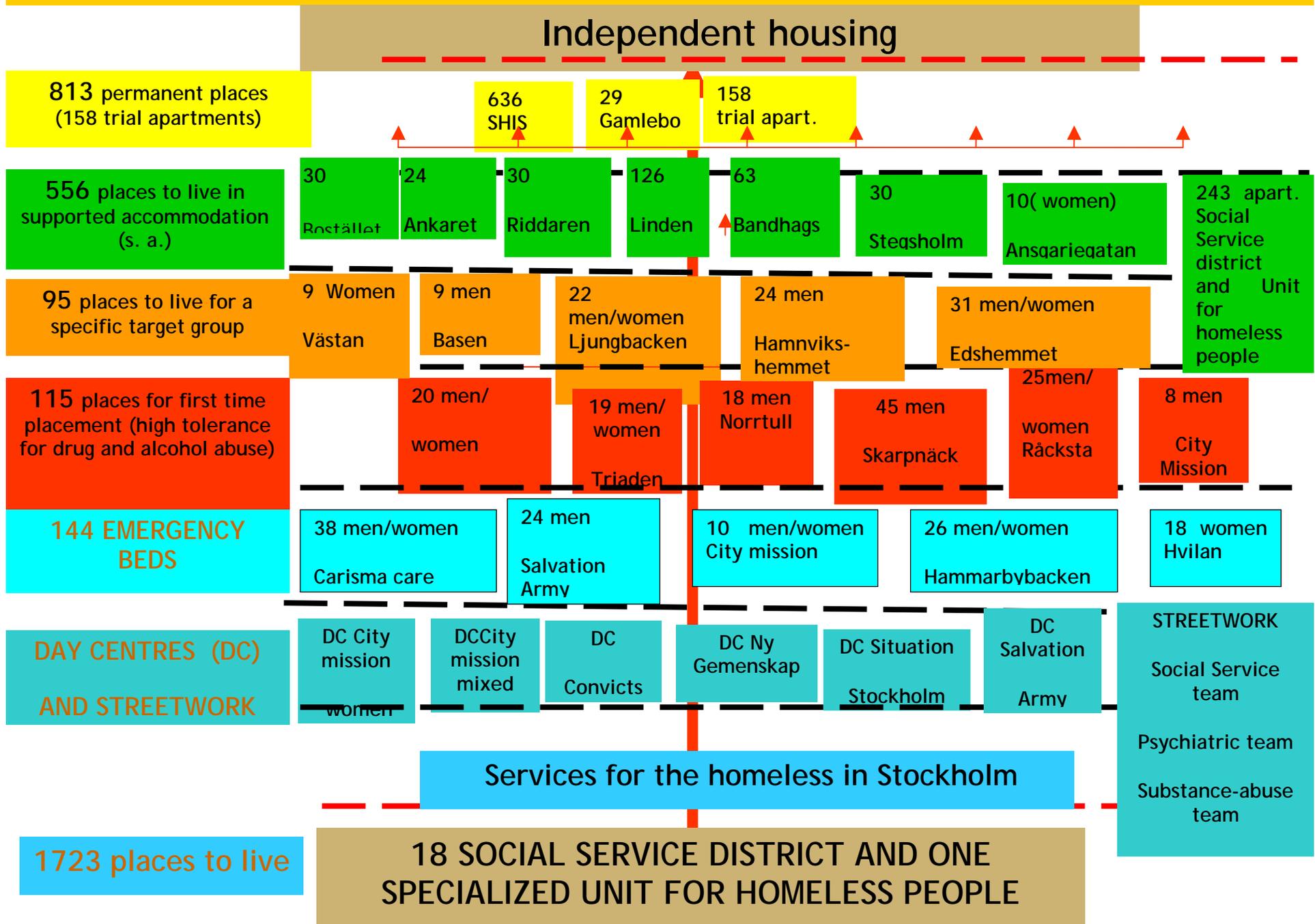


# SUPPORT FOR THE HOMELESSNESS IN Riga 2004





# SUPPORT FOR THE HOMELESS IN STOCKHOLM 2004



# SUPPORT FOR THE HOMELESS IN UTRECHT 2004

## Independent housing

Outreaching support  
when housed

112  
mixed

13 supported  
accommodations: 201 beds

35 HDU

60  
Youngsters

97  
no-HDU

10 after  
imprisonment

19  
Families

9 places for specific  
target groups: 278 beds

23  
alcoholics

68 HDU  
(20  
women)

77 mixed,  
no-HDU

52  
mentally-ill  
people

32  
Youngsters

26 Recently  
homeless

## Central Intake Homeless

5 CRISIS CENTRES & TIME  
OUT: 128 beds

12  
Youngsters

41  
Adults

15  
Medical care

36  
Time out

4 NIGHT SHELTERS 116  
beds (winter 185)

55  
SI

12  
HVR

25  
NOIZ

24  
Hotel

7 DAY CENTERS +  
OUTREACHING

3 user rooms:  
350 HDU

4 Day centres:  
145 /day

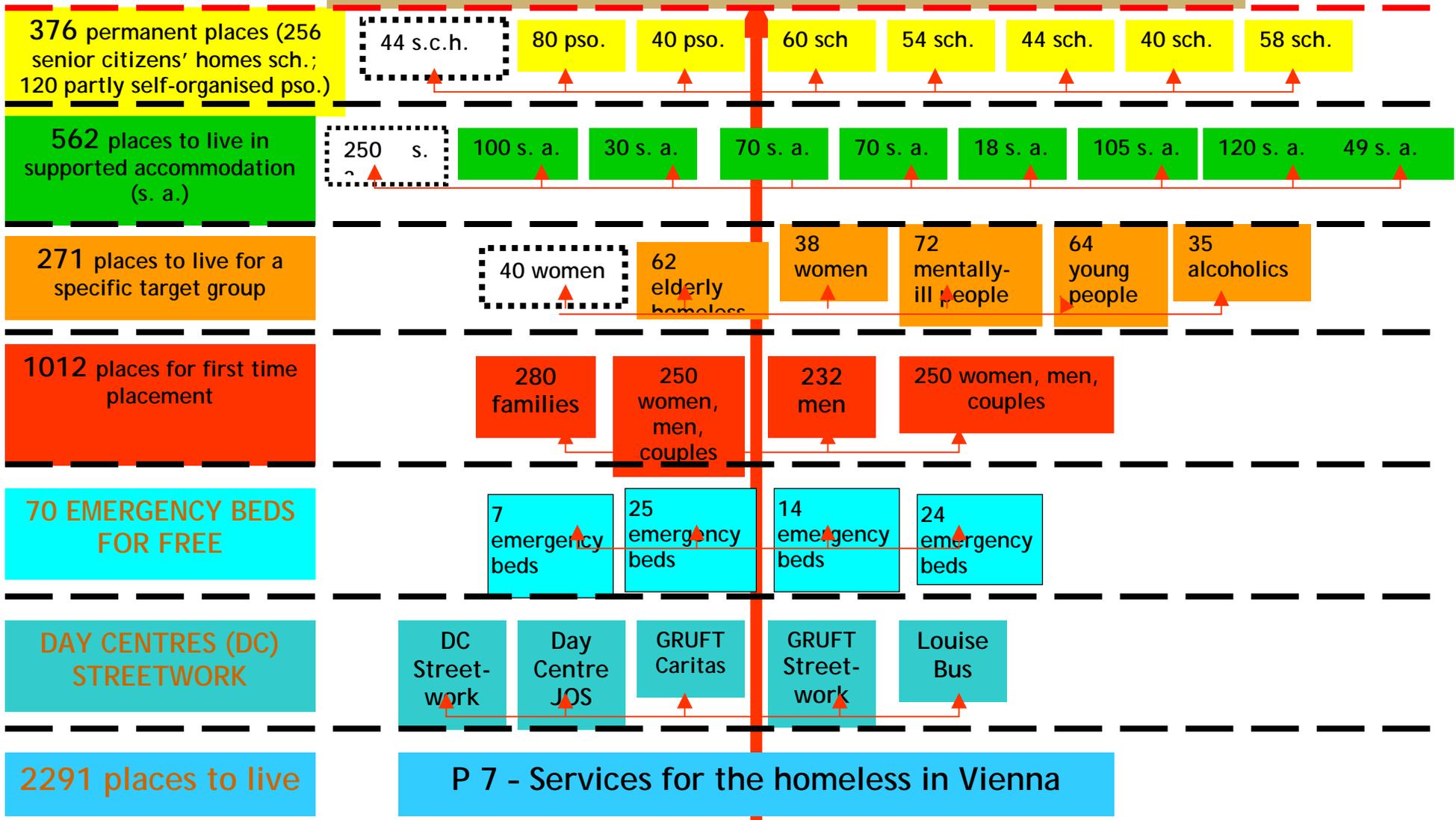
Outreaching ZCT:  
300/year (120 ACT)

Outreaching: 45  
youngsters

Prevention of evictions in 6 local districts

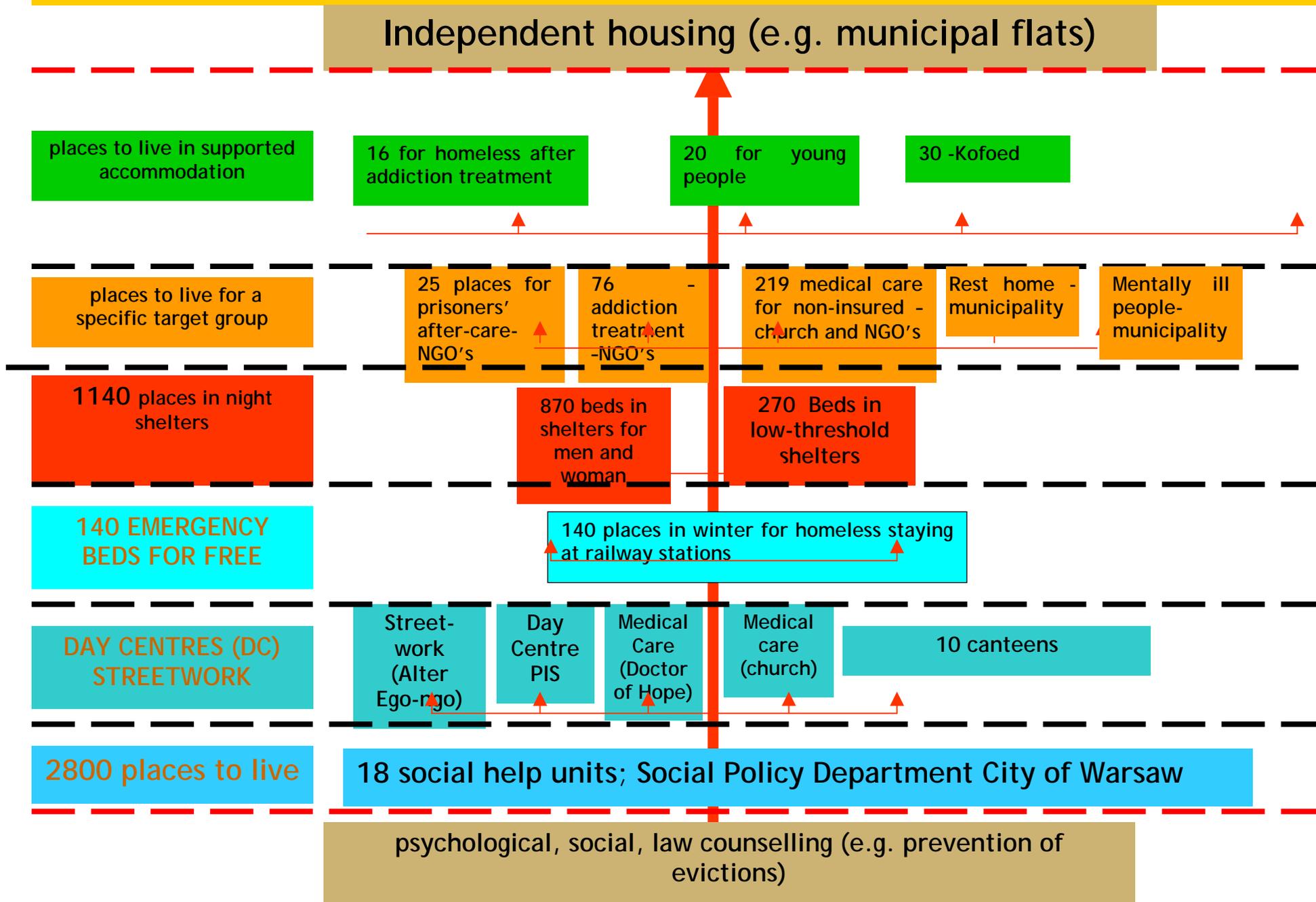
# SUPPORT FOR THE HOMELESS IN VIENNA 2004

## Independent housing (e.g. municipal flats)



FAWOS - Office for the prevention of evictions

# SUPPORT FOR THE HOMELESS IN WARSAW 2004



## Appendix 6: Selected Services

## Selected services - Copenhagen

Conceptual category	Operational category		Services		
			Type	Number	Capacity/case load
Houseless	Temporary accommodation (3.2)		Temporary housing (longer stay)	7	301
			Temporary housing (transitional defined)	1	5
			Temporary housing (no defined time)	9	66
	Nr of pers	Ca. 441			
	Yr of count	2004			
	Homeless hostel (3.1)		Short-stay homeless hostel	6	314
	Nr of pers	786			
	Yr of count	2004			
Roofless	Stay in a night shelter and/or forced to spend several hours a day in a public space (2)		Short-stay hostel	3	29 of which 18 beds is only for the period 15/11 - 1/4
			Low-threshold/Direct access shelter	2 night shelter/cafés	99
	Nr of pers	Ca. 683			
	Yr of count	2004			
	Rough sleepers (1)		Outreach services (fieldworkers)	1 team with 19 full-time man-hours on 34 persons	Closer contact to 450 homeless persons on the streets
	Nr of pers	Ca. 450			
	Yr of count	2004			

## Selected services - Genoa

Conceptual category	Operational category		Services		
			Type	Number	Capacity/case load
Houseless	Temporary accommodation (3.2)		Temporary housing (longer stay)	4	32
			Temporary housing (transitional defined)	8	n.a.
			Temporary housing (no defined time)	4	45
			Nr of pers	n.a.	
	Yr of count				
	Homeless hostel (3.1)		Short-stay homeless hostel	4	26
	Nr of pers	n.a.			
	Yr of count				
Roofless	Stay in a night shelter and/or forced to spend several hours a day in a public space (2)		Short-stay hostel		
			Low-threshold/Direct access shelter	2	30
	Nr of pers	n.a.			
	Yr of count				
	Rough sleepers (1)		Outreach services (fieldworkers)	1 Street work	
	Nr of pers	n.a.			
	Yr of count				

## Selected services - Glasgow

Conceptual category	Operational category		Services			
Houseless			Type	Number	Capacity/case load	
	Temporary accommodation (3.2)		Temporary housing (longer stay)	3	104	
			Temporary housing (transitional defined)	8	542	
			Temporary housing (no defined time)	2	1330	
	Nr of pers	n.a.				
	Yr of count					
	Homeless hostel (3.1)		Short-stay homeless hostel	7	657	
	Nr of pers	n.a.				
	Yr of count					
	Roofless	Stay in a night shelter and/or forced to spend several hours a day in a public space (2)		Short-stay hostel	1	
				Commercial low budget hotels	1	200
			Low-threshold/Direct access shelter	3	186	
Nr of pers		n.a.				
Yr of count						
Rough sleepers (1)			Outreach services (fieldworkers)	5		
Nr of pers		n.a.				
Yr of count						

## Selected services - Helsinki

Conceptual category	Operational category		Services		
			Type	Number	Capacity/case load
Houseless	Temporary accommodation (3.2)		Temporary housing (transitional defined)		535
			Temporary housing (no defined time)	4	2079
	Nr of pers	n.a.			
	Yr of count				
	Homeless hostel (3.1)		Short-stay homeless hostel		857
	Nr of pers	n.a.			
	Yr of count				
	Stay in a night shelter and/or forced to spend several hours a day in a public space (2)		Short-stay hostel	1	50
	Nr of pers	n.a.			
	Yr of count				
Rough sleepers (1)		Outreach services (fieldworkers)	6		
Nr of pers	100				
Yr of count	2003				

## Selected services - Newcastle

Conceptual category	Operational category		Services		
			Type	Number	Capacity/case load
Houseless	Temporary accommodation (3.2)		Temporary housing (no defined time)	56 units short stay	330 beds
	Nr of pers	477	Used service in year		
	Yr of count	2004			
	Homeless hostel (3.1)		Short-stay homeless hostel	403 beds	173 beds
	Nr of pers	441			
	Yr of count	2001			
Roofless	Stay in a night shelter and/or forced to spend several hours a day in a public space (2)		Low-threshold/Direct access shelter	5 Direct access units 137 beds	263 beds
	Nr of pers	797	No count of hotels and this is direct access hostels, not quite the same as night shelters		
	Yr of count	2004			
	Rough sleepers (1)		Last address of people and snap shot counts (fieldworkers)	1 health centre and day centre	300 people
	Nr of pers	82			
	Yr of count	2004			

## Selected services - Oslo

Conceptual category	Operational category		Services		
			Type	Number	Capacity/case load
Houseless	Temporary accommodation (3.2)		Temporary housing (longer stay)	Appr 11 000 dwellings	
			Temporary housing (transitional defined)	2 Centres and dwellings for short term housing	120 Dwellings 450
				Temporary housing for youth	
			Temporary housing (no defined time)	Rehabilitation Centres Care Centres	} Appr. 800
	Nr of pers	n.a.			
	Yr of count				
	Homeless hostel (3.1)		Short-stay homeless hostel	Crisis accomodation	Appr. 45
	Nr of pers	n.a.			
	Yr of count				
	Roofless	Stay in a night shelter and/or forced to spend several hours a day in a public space (2)		Commercial low budget hotels	4
Nr of pers		n.a.			
Yr of count					
Rough sleepers (1)		Outreach services (fieldworkers)	Outreach service teams	52 employees	
Nr of pers			- 20	8 Medical Ass. Centres	
Yr of count			Estimate	10 Day/act. Centres	200-300

## Selected services - Riga

Conceptual category	Operational category		Services		
Houseless			Type	Number	Capacity/case load
	Temporary accommodation (3.2)		Temporary housing (transitional defined)	3 shelters	380 beds
Nr of pers		1716			
Yr of count		2004			
Homeless hostel (3.1)			3 shelters	380 beds	
Nr of pers		1716			
Yr of count		2004			
Roofless	Stay in a night shelter and/or forced to spend several hours a day in a public space (2)		Low-threshold/Direct access shelter	3 shelters	380 beds
	Nr of pers		1716		
	Yr of count		2004		
Rough sleepers (1)		Outreach services (fieldworkers)	3	380	

## Selected services - Rotterdam

Conceptual category	Operational category		Services		
			Type	Number	Capacity/case load
Houseless	Temporary accommodation (3.2)		Temporary housing (no defined time)	200 houses	330
	Nr of pers	330			
	Yr of count	2004			
	Homeless hostel (3.1)		Short-stay homeless hostel	6 pensions	173
	Nr of pers	226			
	Yr of count	2001			
Roofless	Stay in a night shelter and/or forced to spend several hours a day in a public space (2)		Low-threshold/Direct access shelter	8	263
	Nr of pers	1648			
	Yr of count	2001			
	Rough sleepers (1)		Outreach services (fieldworkers)	4 teams	300 people
	Nr of pers	219			
	Yr of count	2001			

### Selected services - Utrecht

Conceptual Category	Operational Category	Services			
		Type	Number	Capacity/Caseload	
<b>Houseless</b>	Temporary accommodation (3.2)	Temporary housing longer stay		52	
		Temporary housing (transitional defined)		240	
		Temporary housing (no defined time)		123	
	Nr of pers	411			
	Yr of count	2004			
	Homeless hostel (3.1)		Short stay hostels	2 pensions	77
	Nr of persons	77			
	Yr of count	2004			
<b>Roofless</b>	Stay in a night shelter and/or forces to spend several hours in public (2)	Short stay hostel		36	
		Commercial low budget hotels		50	
		Low threshold/Direct access shelter	4 day shelter/3 night shelters/3 24-hours shelters for Hard drugs Users + crisis shelter	205 Hard drug Users 265 No-Hard drug Users 60 crisis beds	
	Nr of persons	530			
	Yr of count	2004			
	<b>Rough sleepers (1)</b>				
	Nr of persons	350	Using only winter sleeping facilities (20 people)	Outreach services (field services)	350
Yr of count	2004				

## Selected services - Stockholm

Conceptual category	Operational category		Services		
			Type	Number	Capacity/case load
<b>Houseless</b>	Temporary accommodation (3.2)		Temporary housing (longer stay)	1 435	1 435
			Temporary housing (transitional defined)	674	674
			Temporary housing (no defined time)	29	330
			Nr of pers	n.a.	
	Yr of count				
	Homeless hostel (3.1)		Short-stay homeless hostel	6	173
	Nr of pers	n.a.			
	Yr of count				
<b>Roofless</b>	Stay in a night shelter and/or forced to spend several hours a day in a public space (2)		Short-stay hostel	6	137
			Low-threshold/Direct access shelter	5	152
	Nr of pers	2309			
	Yr of count	2004			
	Rough sleepers (1)		Outreach services	1 team social service	
	Nr of pers	70	(fieldworkers)	2 teams health care	?
	Yr of count	2004			

## Selected services - Vienna

Conceptual category	Operational category		Services		
Houseless	Temporary accommodation (3.2)		Type	Number	Capacity/case load
			Temporary housing (longer stay)		
		Temporary housing in flats (transitional defined) (3.3)	8	562	
		Temporary housing for target groups (no defined time)	5	271	
	Nr of pers	3371			
	Yr of count	2004			
	Homeless hostel (3.1)		Temporary housing (no defined time)	4	1012
	Nr of pers	3371			
	Yr of count	2004			
Roofless	Stay in a night shelter and/or forced to spend several hours a day in a public space (2)		Short-stay hostel	2	96
			Low-threshold/Direct access shelter	4	144
	Nr of pers	500			
	Yr of count	2004			
	Rough sleepers (1)		Outreach services (fieldworkers)	5	48 staff
	Nr of pers	800			
	Yr of count	2004			

## Selected services - Warsaw

Conceptual category	Operational category		Services			
			Type	Number	Capacity/case load	
Houseless	Temporary accommodation (3.2)		Temporary housing (longer stay)	12	473 beds	
			Temporary housing (transitional defined)	7	351 beds	
			Temporary housing (no defined time)	3	824 beds	
			Nr of pers	n.a.		
	Yr of count					
	Homeless hostel (3.1)		Short-stay homeless hostel	-	-	
			Nr of pers	n.a.		
			Yr of count			
	Roofless	Stay in a night shelter and/or forced to spend several hours a day in a public space (2)		Short-stay hostel	6	870 beds
				Low-threshold/Direct access shelter	4	270 beds
Nr of pers		n.a.				
Yr of count						
Rough sleepers (1)		Outreach services (fieldworkers)	1 team (NGO)	ca. 200 persons		

## Appendix 7: Description of Services

### City of Copenhagen

#### **Name of project: Health project for Homeless**

#### Core objectives:

The project is aimed at homeless people with heavier health problems, who, for different reasons, do not or cannot receive healthcare from the established system, but need medical treatment and support in order to improve their state of health.

Core service: Outreaching fieldwork, healthcare for homeless by a health team offering diagnoses, treatment and, if necessary, helps contacting and coordinating with hospitals etc.

Additional support: N/A

Target group and their needs: The project is aimed to serve homeless people with: problematic drug or alcohol abuse, problems caused by leaving rehabilitation or other treatment, chaotic persons not currently in treatment or support

Capacity = The number of spaces/people the project can work with at any one time: N/A

Description of accommodation offered: Not yet

House rules of the project: N/A

Governance arrangement: The City Council has executive responsibility for the project.

User involvement in decision making: Users are motivated for treatment and involved in decision making of their individual plan of action towards a better health, but only in development of the project through questionnaire research and evaluations.

Support planning processes: N/A

Staff number and qualification: There are 1 doctor, 4 nurses and ½ an office assistant employed in the project.

Opening hours: All days

Access: The clients can access the service direct by contact through shelters, health clinics for homeless, low-threshold or night centres or local social street workers.

Costs: The gross expenditure of the project is annual 360.000 Euro including rent of office.

Reasons for suspension: The project was started as a pilot project but has now become a permanent part of the municipality's system of combat and support to homeless.

Research and reporting systems: The services' effectiveness in meeting core objectives will be demonstrated through annual reports to the central administration as part of the general development of quality in the municipality.

What formal mechanisms do you have for cooperating with other agencies and for contributing to

the homeless sector as a whole: Organizationally, the project is related to a specific homeless shelter, and a steering group representing the outreaching street work, the central administration and the healthcare system has been established.

Complaints procedure: Council procedure

City of Glasgow

## **CONNECT PROJECT (Continuing Personal Support Service)**

Service Provider: Scottish Association for Mental Health (SAMH)

Who is the Service for?

The Service will provide planned, continuous emotional, practical and social support to vulnerable individuals who are aged 18+ years and considered to be homeless/potentially homeless.

The service is for people, who have been assessed as having complex and/or multiple needs, and/or people whose behaviour is perceived as offering a particular challenge to existing services. The service will be capable of responding to the needs of individuals who often either do not engage, or who often disengage with services. A key feature of the service will be consistency and continuity whereby a person will be supported to navigate through engagement, crisis support and pre-settlement, and back through crisis support and pre-settlement if necessary, by the same member of staff where possible. The service capacity will amount to approximately 100 service users at any one time and the service will operate citywide. The service will be available 24 hours per day, 7 days per week, 365 days per year.

What is the Service?

Connect Project will provide varying levels of support /assistance, which will be needs led, and may include:

Provision of high quality emotional, practical and social support.

Link with existing services and fulfil a supportive/mediating role in the lives of individuals who have particularly complex and/or multiple needs.

Negotiate access to ongoing supports and services as needs and circumstances change.

Advise individuals on how to access and work with services constructively.

Support individuals to attend reviews and other such appointments.

Make referrals to internal and external services.

Assist individuals to retain and sustain their accommodation.

Identify and manage risk in a constructive way.

Negotiate with agencies/organisations with, and on behalf of service users, where appropriate.

In addition to direct service provision, the service will determine the effectiveness and impact of the delivery of this type of service and provide a comprehensive outlook of homelessness services in Glasgow that directly or indirectly play a part in service users' lives.

Making a Referral

Minimum assessment requirement is the Homelessness Integrated Complex Assessment (HIA) or equivalent. Connect Project will accept a baseline assessment initially where accompanied by referral form and risk assessment. A complex assessment must follow within 7 days. Initial referral sources are Hamish Allan Centre (HAC), Assessment & Diversion, Hostel Assessment & Resettlement and Homeless Persons Team. The Connect Project referral form must be completed along with risk assessment, and should be forwarded direct to Connect Project, as above, together with a copy of HIA.

## City of Glasgow

### COMMUNITY DIRECTIONS SERVICES

#### Supported accommodation for Individuals who are Likely to Continue to Drink

##### Service Provider:

Scottish Association for Mental Health (SAMH)

##### Who is the Service for?

The service will provide medium to long-term social care and housing support to men and women, aged 18 and over, with a history of alcohol misuse and who are homeless (or at risk of becoming homeless) and who have expressed the view that they will, or are likely to continue to, misuse alcohol, often to what is considered to be dangerous levels. Initial work will include finding tenancies that meet individual needs and preferences, and working with each individual to develop the service that will be delivered to people within their own home.

##### What is the Service?

The service will provide support to individuals to develop the necessary practical, emotional, coping and communication skills in order to sustain and enjoy life in their community. The Service is not abstinence-based and will provide and promote a range of therapeutic interventions designed to maximise individual health and well-being, accommodating the needs and wishes of individuals to engage with services at different levels at different stages.

The Service is designed to encourage and support individuals to (re) engage with other agencies such as health and addictions services, and education and employment agencies. The Service will work with each individual within the context of their family and community and is committed to support individuals to recognise their roles as parents and/or carers.

##### Making a referral

All referrals should come via the Hostel Assessment & Resettlement Team, the Assessment & Diversion Team or the Homeless Person's Team and should be accompanied by a completed Assessment & Resettlement Plan and Initial Referral form. They should be made directly to SAMH at the address below. The Initial Referral form should be signed by both the assessment coordinator and the person for whom the referral is being made.

**City of Newcastle**

**Name of project: Newcastle Vulnerable People Homelessness Prevention Project**

Core objectives: Purpose of the project

to identify obstacles to preventing homelessness of:

problematic drug or alcohol users currently involved with treatment agencies or leaving rehabilitation or other treatment

chaotic drug and alcohol users not currently engaging with treatment or support

young people at risk including leaving care

people leaving prison

people leaving hospital

individuals in more than one of those groups (e.g. young offenders with drug or alcohol problems, people with a dual diagnosis)

and who have a housing and support need which cannot easily be resolved, including:

people who are at risk of losing long term accommodation, and

people who have no accommodation or only a short term solution, for whom it is either difficult to find an appropriate housing and support solution, or whose care and treatment packages cannot be accessed at the same time as appropriate housing and support solutions

Core service: Strategic action research

Additional support: N/A

Target group and their needs = Who the project aims to serve:

problematic drug or alcohol users currently involved with treatment agencies or leaving rehabilitation or other treatment

chaotic drug and alcohol users not currently engaging with treatment or support

young people at risk including leaving care

leaving prison

leaving hospital

individuals in more than one of those groups (e.g. young offenders with drug or alcohol problems, people with a dual diagnosis)

Capacity = The number of spaces/people the project can work with at any one time: N/A

Description of accommodation offered: N/A

House rules = Rules of the project: N/A

Governance arrangement = Who has executive responsibility for the project: City Council

User involvement in decision making: Users are involved in action research and developing programmes to overcome obstacles

Support planning processes: N/A

Staff number and qualification: 3 employees have experience in homeless service and degree level education

Opening hours: Mon - Fri, 9-5

Access = How do clients access your service: Via referral from other workers frustrated by failure to reconcile accommodation and support

Costs = What is the gross annual expenditure of the project: £157,744

Reasons for suspension = What are the reasons why this service may be withdrawn from the client: N/A

Research and reporting systems = How do you record and analysis the services' effectiveness in meeting core objectives, demonstrate value to the whole homeless sector and identify unmet needs: Report to steering group of senior officers

What formal mechanisms do you have for cooperating with other agencies and for contributing to the homeless sector as a whole. All statutory agencies represented in the steering group

Complaints procedure: Council procedure

Risk assessments: N/A

Client information: Yes

Contracts Yes

## City of Riga

### **Name of project: The service of Riga shelter**

#### Core objectives: Purpose of project

To provide people without definite place of living and people in crisis situation the opportunity of short-term stay accommodation, food, opportunities of personal hygiene and services of social work specialists.

Core services: night-shelter for men; 24-hours shelter for men; 24-hours shelter for families; night shelter for women; 24-hours shelter for women with children; Isolator.

#### Additional support:

Customers in Riga shelter have a chance to receive services of primary health care, as well as in social services agency to receive material aid.

Target groups: The homeless; People in crisis situation. The main problems of the target groups are - lack of social functioning skills, lack of cheap accommodation, unsatisfactory qualification and motivation of those people to be able to work, addiction problems, bad health condition, stereotypes of society that promote the exclusion of those people. The homeless people are able to solve their problems, but they are not able to keep the achieved level of life and behaviour. They never have only one problem, that is why work with the homeless is very complicated, and to achieve results, it requires huge investments of time and work, as well as multi-natured approach to the solving problems.

Capacity: 170 persons in summertime; Up to 230 persons in wintertime

#### Description of accommodation offered

For the help of the Municipality in solving their housing problems, people have to wait for a long time, therefore despite the fact that shelter is short-term stay accommodation many of the customers (particularly elderly, people with invalidity as well as families with children) are forced to stay there- half a year or longer. The situation deteriorates due to the fact that their problems can not be solved because of lack of accommodation. To show the situation, it has to be mentioned, that in 2005 during 9 months the services of Riga shelter has been rendered to 39 families, including 66 children. The majority of Riga shelter customers, in line with legislation of Republic of Latvia, are not registered for the help of the municipality for solving their housing problems. For that reason receivers of state pensions or able-bodied persons with low income, because it is problematic for them to find appropriate flat to rent stay also protractedly in Riga shelter. Approximately 80% of residents of night-shelters and shelters are of working age. Very important are preventive measures, and that is why people with low income in Riga are able to receive housing benefit.

#### House rules: Rules of the project

Staying time in the shelter is up to 6 months. During stay in shelter regulations of the shelter must be kept.

Governance arrangement: Riga shelter is subordinated to Riga City Council

User involvement in decision making:

The user - customer - has an opportunity to work together with social worker in solving his/ her social problems. Each customer has its own social rehabilitation plan. Once in half a year the informative meetings are organized, where everybody is welcome to offer his/her opinion about any question related to the work of shelter. There is an "advice box" in the shelter, where everyone can leave his/her recommendations and advices for the development of the service.

Customers are welcome to turn to director of shelter, social workers or Riga City Council officers with their advices.

Support planning processes:

Support and help are planned in accordance with the customer's individual needs and rehabilitation plan by informing the customer about opportunities of solving the social problems, as well as keeping in touch with various institutions and involving various professionals.

**Staff number and qualification:** 45 staff members whose qualification fits the defined requirements in legislation of the Republic of Latvia.

**Opening hours:** 24 hours a day.

**Access:** Information on the service is given by Social services agencies, municipal police, as well as by mass media. To receive the service of shelter, customer turns to the service provider, but the consignment from Social services agency is needed.

**Costs:** Financing for the 2005 is intended to be LVL 257 720 (EUR 181 127)

**Reasons for suspension:** The reasons of service withdrawal could be disinclination of regulations of the shelter, as well as lifestyle of "sleeping on the street".

**Research and reporting systems:** Regularly inquiries are made about customers of Riga shelter. Social work specialists try to maintain information about how customers have managed in solving their social problems - housing problems, unemployment, addiction problems (unfortunately these data are imperfect).

The existing services providers and other organisations are kindly asked with mediation of mass media and in various meetings to develop the services for the homeless. The municipality evaluates the opportunities of financing.

**Complaints procedure:** In accordance with legislation of the Republic of Latvia (governing body of the shelter > Riga City Council > The court)

**Risk assessment:** The evaluation of the establishment has been carried out by Riga City Council and other institutions that are legally allowed to carry out the evaluation of provision of qualitative service.

**Client information:** Information in the shelter can be found on the information desk or in brochures. Brochures are available also in Social service agencies.

## City of Stockholm

### Shelter guarantee

The roof-over-your-head guarantee (shelter guarantee) started in June 1999. It is an initiative with measurable goals. It assumes that it is always possible for the social service emergency office to offer temporary shelter for a homeless person. The policy says that a person who him-or herself can not find shelter for the night will, if they contact social services before 12 am, be offered a shelter for the night. Homeless people that are threatening or violent are not covered by the guarantee. The policy states that the homeless person should if it is at all possible, contact his or her local district administration during office hours to make sure he/she has shelter for the night. After office hours the emergency social service office (*socialjouren*) is the last safety net for a person in need of shelter.

A register was created at the Social Service Administration In order to get a good routine for following up the number of shelter beds, the number of bed used etc. Every morning the numbers of used shelter beds get reported from the different shelters in the city to the co-ordinator at the Social Service Administration. Even the shelters run by NGOs´ and private entrepreneurs report their numbers. The register also contains information about how each person was referred to the shelter and if anyone was turned down (and the reason why). The purpose of this register is to gain knowledge about how many nights each client has to use shelters. This knowledge creates a more thorough picture of each individuals case and enables the responsible social worker to find alternatives to shelter living The co-ordinator meets regularly with the directors of the different shelters to track changes in the numbers of clients and their needs.

“Roof-over-your-head guarantee” is a clear political initiative from the city and its Executive Board. Four political parties had this as a prioritized issue. The Social Service Administration appointed a coordinator for implementing the policy and initiating the co-operation with different partners. The minority on the Executive Board was critical to the initiative. In their view the “ roof-over-your-head guarantee” policy emphasized the temporary, emergency solutions, to the detriment of the long-term continuity, which they believed must be at the forefront for all efforts to help homeless people. The initiative sparked a political debate about short-term emergency efforts vs. long-term treatment and care for homeless people. However all parties agree that instant versus more systematic long-term work demands different types of activities/measures.

## City of Stockholm

### **Women's team at the unit for homeless people**

The Social Service Administration by the Women's Team at the unit for homeless people works with women who fit the definition of homelessness used by Stockholm Social Service Administration. In practice, that means homeless women with a substance abuse problem or psychiatric illness, often in combination. Homeless women are a minority in Stockholm (23 %). The team is financed by the annual budget of the Social Service Administration. The team works with around 150 women/year and the staff of seven women is comprised of six social worker (one who is the director of the team) and one outreach worker.

The team's short-term goal is to create a good, trusting relationship with the women. With that relationship as a base an individual plan can be made together with the woman to get her in to some kind of housing. The long-term goal is to provide a wide range of support - i.e. substance abuse treatment, psychiatric care, etc. - to make it possible for women to get their own living arrangements. Because the team is a part of the Social Service Administration, it is also required by law to investigate and suggest compulsory treatment if a woman is at danger of dying, if she continues her substance abuse, or if she has psychiatric illness that puts her life at risk.

The women's team has a clearly women-oriented perspective. Social work with homeless people is traditionally provided with male needs as the norm. This team is the first and only special service team for homeless women organized within the public social welfare system in Sweden. A lot of the services for homeless have been focused on men, with the result that many homeless women have tended not to seek help. Homeless women are more vulnerable than men. The women often become victims of violence and rape. It is not uncommon, for example, that they have to "buy" a bed for the night through sexual favours. Many homeless women have been very dependent on men and lived in quite destructive relationships all their lives. These women's relationships with other women and their pictures of themselves as women have often been very heavily influenced by men. There has often been a lack of female role models. The Women's Team is therefore convinced that initially homeless women should have a chance to receive help and support from an exclusively female staff. This applies to the shelters, social service agencies and treatment centres. This team is the first and only special service team for homeless women in Sweden organised within the public social welfare system. Because it is a part of Stockholm's city's social welfare system it legitimizes women's need for women-focused services. The municipality has by law the final responsibility for all people's dwellings in the area. Homeless women have become much more visible and have gotten access to better services due to the work of the Women's team. (The team celebrates its 10th anniversary this spring).

The team has also had a strong commitment to keep women and women's need on the agenda in the debate and implementation of services to homeless people in Stockholm and in Sweden. The team has also pointed out the connection between women's homelessness and domestic violence, prostitution, incest, eating disorders, etc. The Social Service Administration has opened second-stage shelters and a special outreach group for homeless women as a result of the needs made visible by the team. The Team has started a network made up of all women-focused programs (domestic violence programs, prostitution projects, programs aimed at young immigrant women etc) in the Social Service Administration. The purpose of that network is to be able to provide an extensive continuing education in gender studies for all staff. It is also planning to organize study groups with the goal of writing a method book in women-focused social work.

By making homeless women's issues visible as sometimes different than men's, new services for women have been developed. By including homeless women's role as mothers as one issue for homeless women, the other team working with homeless men is slowly incorporating homeless men's role as father in their work. Men's violence against women even in this group of women has been more visible.

## City of Vienna

### Supported Housing in dwellings

#### 1. Costs:

Staff costs: € 328.250,-

Other costs: € 261.700,-

#### 2. Employees and their qualifications:

1 manager	40 hs a week
2 social workers	à 40 hs a week
4 social workers	à 30 hs a week
1 secretary	à 15 hs a week
1 civilian service staff	40 hs a week
1 cleaning staff	minimum employment contract

#### 3. Target group and their needs:

##### 3.1. Target group:

Single women and men, couples, families and single mothers/fathers,

special programme for HIV positive clients and AIDS patients ;

##### 3.2. Their needs:

As many clients have been homeless for years, the focus is on meeting basic needs like housing, regular source of income, official papers, medical care, clothing, etc.

→ see item 5, support by social workers

##### 3.3. Objective:

The programme aims to enable homeless people to eventually live an independent life in an affordable flat of their own - a council flat in most cases. Building on the clients' desire to live in their own flat, the programme promotes their individual strengths and abilities to develop self-responsibility and problem awareness. The clients are trained in basic social competences that enable them to live together with the people around them and develop conflict solving skills that are indispensable in every community.

For clients with addictive behaviour, the aim is to promote awareness and self-control in dealing with their condition. To prevent future problems, clients are shown how to stay calm and

competent in their contacts with official authorities. By the time they leave the starter flat, clients should be able to keep their final flat clean and tidy, and possibly handle minor repairs on their own. We put special emphasis on clients accepting the responsibility for their flat and furniture provided.

#### 4. Standards of housing quality:

This is a transitory housing facility. It has 118 places in 83 flats, all of them furnished and with their own bathroom/shower, radiators, and toilet (either inside the flat or across the corridor).

#### 5. Standards of supervised accommodation - support by social workers:

The transitory supported housing programme consists in

providing a furnished starter flat

asserting clients' (legal) claims (e.g. nursing allowance, pension payments, .... )

accompanying clients in contacts with official authorities

supporting clients in managing their debts

helping them find a job

referring them to medical care

referring them to counselling points and therapy centres

mediating in possible conflicts with neighbours and other residents

suggesting constructive leisure activities

helping clients to learn the basics of economical household management

(e.g. saving energy)

supporting clients in decorating their flat and keeping it tidy

#### 6. Conditions of access:

Criteria for access to accompanied housing:

minimum age: applicants must be of legal age

immediate need of a flat, or immediate risk of becoming homeless

Austrian citizenship, or citizenship of an EU country, or refugee status under the Geneva convention, official notice that Austrian citizenship will be granted, proof of minimum stay in Austria for 5 years for applicants without EU citizenship

need for and possibility of support by a social worker, and readiness to actively co-operate with the social worker

clients should actively face the problems that may, in the long term, lead to homelessness

no acute alcohol or other substance abuse

sorting out financial problems

basic income or means of subsistence

if clients have accumulated rent arrears in a council flat in the past they should manage to settle their arrears while they are in accompanied housing so they can again be admitted as council tenants by *Wiener Wohnen* (Housing in Vienna).

ability and readiness to keep important appointments and meet payment deadlines of housing costs

clients' medical conditions or problems must not exceed the possibilities of a transitory supported housing facility

clients are required to pay a safety deposit

the objective (client moving into a council flat) should be attainable within about two years

#### 7. Limitation of restrictions:

no regular income, active substance abuse, need for intensive extra care due to psychological conditions, lack of readiness to cooperate

#### 8. Structures to involve those concerned in the decision-making processes:

Results of a survey among clients in autumn 2003:

78% were very satisfied with the programme. 65% were satisfied with their flat (furniture, cleanness). Measures to improve the quality of the housing units were already taken in 2004 (improved checklist, basic cleaning etc.) to ensure that the flats are in good state when new residents move in.

#### 9. Research/Reporting systems:

KLIVEST client management programme (client data, client support documentation, rent accounting, housing costs, support and service contacts, statistics, etc.) Also: detailed case history, client files, monthly take-up statistics, monthly occupancy statistics to MA 15A - Municipal Dept. for Social Welfare, monthly accounting information (nominal vs. actual values), annual reports and statistics

#### 10. Methods of co-operation:

##### 10.1. Internal communication:

Meeting with other facilities, partly on a regular basis - homeless aid housing facilities, "Gruft" counselling centre for the homeless, P 7 service for the homeless people in Vienna, Vienna Social Counselling Service (*Sozialberatung Wien*), Caritas camps (*Caritas*), socio-economic work projects, *Frauenwohnzimmer* project for women, etc.

##### 10.2. external communication:

Meetings with other services, partly on a regular basis (at the Vienna *BAWO* centre), a local working group for housing support (*ARGE Wohnplätze*), working group staff meetings, MA 15A -

Cities' strategies against homelessness

Municipal Dept. for Social Welfare; Joint meeting of all MA 15A contractors, etc. ;

Individual communication (on a case-by-case basis) with clients of Vienna AIDS Aid, local prisons, Municipal Dept. 11A - Vienna Family Office, associations for social reintegration (*Verein Neustart*), etc.

## City of Vienna

### **Permanent Housing for Elderly former homeless People**

#### Costs based on the year 2003

Operating costs	€ 100, 474,--
Rent, electricity, heating	€ 135,170,--
Staff costs including civilian service staff	€ 181,149,--

Operating costs include pro rata overhead costs and administrative overhead costs

#### Employees and their qualifications:

1 managerial position (manager)	graduate social worker, 30 hours per week
1 vice-manager	graduate social worker, 40 hours per week
1 graduate nurse	graduate nurse, 19 hours per week
2 home aids	home aid, 40 hours per week
1 physician (minimal employment)	physician, 10 hours per week
1 house mother	care taker, 40 hours per week
1 alternate civilian service	40 hours per week

#### Target groups and their needs:

##### Target group:

Homeless people, elderly women and couples who are at least 45 years old and for whom the standards of "accompanied housing" are too high-threshold and/or who have failed in other institutions.

Women and homeless people eligible according to the Vienna Welfare Benefit Act

Women and couples autonomous enough to live on their own

Women and couples who receive no more than a certain amount of nursing allowance (level 2) at the time they move in

##### Operative targets:

Providing a safe space

Stabilising the clients' personal situation of life

Drawing up a personally adapted health standard

Reinforcing and promoting their own competencies and encouraging autonomy

Clarifying the financial situation (paying debts, supporting them when making claims etc.)

Enabling access to resources (legal counselling, financial possibilities, clothing, household effects, food)

Supporting social contacts

Integration in the community life

Help with official tasks

When needed: information about Social Services

Contact with other institutions

Standards of housing quality:

This is a permanent housing facility.

Standards of supervised accommodation-support by social workers:

This is a permanent housing facility.

Conditions of access:

The residential home for the elderly is a facility of the Vienna Hilfswerk, which provides small flats for elderly homeless women and couples. The clients have to fulfil certain criteria to live in the home.

Limitations/restrictions:

The house rules and a certain degree of order and cleanliness have to be respected in order to guarantee the friction-free operation of the residential home and the good coexistence of the residents. Residents who violate the house rules or put the safety of others at risk will be ordered to stay away from the house.

Structures to involve those concerned in the decision-making processes:

Three years ago we started to carry out annual surveys to show the changes in the residents' health condition and their degree of satisfaction. The results will illustrate the link between homeless people and their subjective health condition. House meetings are held every three months. The residents elect a confidant who acts as their spokesperson. There are weekly office hours of the managers and the social worker, and daily visits of the flats.

Research/reporting systems:

Client-oriented: Medical history sheets, Health reports on a voluntary basis at the clients' wish, General client files (kept by the graduate social workers) and special sheets on changes in health condition (kept by the graduate nurse)

Organisational: Daily team meetings + Weekly office meetings

Administrative: Yearly statistics, Annual documentation of highlights (visits and events), Documentation of the house meetings, Ongoing administration of the clients' personal finance, Reports and participation in different work groups

Methods of cooperation:

We have a partnership with the City of Vienna / Vienna Social Welfare Fund. The cooperation and exchange with other institutions (P7, Vienna Homeless Aid, other associations, private sponsors, volunteers and others) as well as with different authorities is indispensable for our work.

The form of this cooperation may vary. On the one hand we create networks in different bodies and project/work groups (internal, Vienna Homeless Aid, multidisciplinary) or when we invite other institutions to come visit the team. On the other hand networks are created in the daily work with other institutions and regarding every individual case social workers are confronted with.

Others:

The associations offer several different services to their clients. Depending on resources they include voluntarily organised leisure time activities, lunch/dinner packs, food vouchers or financial assistance.

## City of Vienna

### Day Centre for Homeless People

#### Costs:

Operating cost	€ 149,400.-
Rent, electricity, heating:	€ 70,000.-
Staff costs:	€ 485,977.-
Costs for civilian service staff:	€ 7,848.-

Operating costs include pro rata overhead costs and administrative overhead costs

#### Employees and their qualifications:

- 1 managerial position for a graduate social worker à 40 hours per week
- 1 position as vice manager for a graduate social worker à 40 hours per week
- 5 posts for graduate social workers à 40 hours per week
- 1 post for a graduate social worker à 20 hours per week
- 2 social workers (trained in first-aid, fire prevention, specific trainings)
- 1 person carrying out alternate civilian service
- 2 cleaners of Municipal Department 34 - Building and Facility Management

#### Target groups and their needs:

Target group: homeless people that are eligible in accordance with the Vienna Welfare Benefit Act.

The facility is open to currently homeless adults living on the street, and to men or women at risk of becoming homeless.

#### Operative targets:

Providing a safe space during the day

Offering basic care services in health, hygiene and social issues

Enabling access to resources (Wiener Wohnungslosenhilfe - Vienna Homeless Aid, possibilities of financial assistance etc.)

Determining responsibilities

Reinforcing and promoting the customers' own competencies and encouraging autonomy

"Social learning": regaining social competencies

Standards of housing quality:

This is a transitory housing facility.

Standards of supervised accommodation - support by social workers:

This is a transitory housing facility.

Conditions of access:

The day centre is a low threshold walk-in facility and serves as a "portal" for homeless people to the Vienna Homeless Aid. To use the day centre clients have to meet no other criteria than being homeless. The low-threshold services are characterised by their flexibility: It is easy and always possible to switch between the different forms of social services (information, short-time counselling, care services). Visitors only have to respect the house rules and certain other rules in order to assure friction-free coexistence.

Limitations and restrictions:

In order to guarantee the undisturbed operation of the centre, the house rules have to be respected.

Alcohol or drugs are not allowed in the day centre. Visitors who are visibly under the influence of alcohol or drugs may be asked to leave the centre.

Visitors who threaten to use violence or who are violent will be asked to leave.

Trade of any kind (especially in alcohol, drugs...) is prohibited.

Visitors must not bring weapons to the centre.

Visitors must not behave in a noisy or damaging way; they have to use the available ash trays and trash bins.

Visitors have to follow the staff's instructions.

Anyone who violates the house rules or compromises the safety of others will be ordered to stay away from the centre.

Structures to involve those concerned in the decision-making processes:

In the last month we have measured the clients' degree of satisfaction with the day centre. These results should show us whether the services meet the demand (needs, wishes). This analysis will be institutionalised and carried out at regular intervals.

We will be able to report on it in September.

Research/Reporting systems:

*Dienstbuch* (-service book), *Kliad* (client database), files, visitor statistics, monthly statistics, shower list, depot database, list of deposits (Labour market service, pensions, social aid), locker folder;

*Dienstbuch* (DB): any kind of event and all contacts with clients are noted in the DB by all staff members. The DB will be in electronic form, which will allow for specific inquiries for statistical purposes and simple client requests.

Methods of cooperation:

Cooperation and exchange with other institutions (Vienna Homeless Aid, private and other institutions) and different authorities are indispensable for our work. The form of this cooperation may vary. On the one hand, we create networks in different bodies and project/work groups (internal, Vienna Homeless Aid, multidisciplinary) or when we invite other institutions to come visit the team. On the other hand, networks are created in the daily work with other institutions and with every individual case social workers are confronted with.

Others:

The day centre's services also include street work and leisure time activities, "holidays off the street" aside from the regular office hours and the operation of the centre.

The standards mentioned above only apply to the operation of the centre.