
Fidelity Findings from the Arrels Foundation Housing First Programme in Barcelona, Spain

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➤ **Abstract** *Arrels Foundation is one of the oldest homeless service organisations in Barcelona, and is one of the main promoters of Housing First in Catalonia. The programme was launched in 2015 and one year later, Arrels Foundation evaluated programme fidelity for the first time using the self-assessment approach (Stefancic et al., 2013) and one-to-one structured interviews with key stakeholders. Nine staff members participated in the first phase and eleven took part in the qualitative phase. Results indicated higher fidelity scores in the Separation of Housing and Services domain and lower scores in the Service Array domain. Barriers to fidelity were identified in the domains of Services Provision, Team Structure, Housing Processes and Structure. These barriers appeared to be linked to systemic challenges of a difficult housing market, small public sector housing supply, and cultural resistance to the model. Facilitators of fidelity included the quality of public health and mental health services; organisational commitment to the consumer-led, recovery-oriented HF philosophy; and the stability and long-term dedication of Arrels Foundation's workers and volunteers. Analysis also underlined the benefits of local adaptations for programme fidelity. These findings provide context and perspective for comparison with other Housing First implementations and demonstrate how the programme is sufficient, sustainable, and effective in improving quality of life for adults with histories of homelessness and complex support needs.*

➤ **Keywords** *Homelessness, Housing First, Arrels Foundation, evaluation, fidelity*

Introduction

A 2017 homeless count conducted on a single night by a network of public services and social initiatives called Attention to Homeless People (XAPSLL) found that 3,383 people were homeless in Barcelona, of which 962 (28.4%) were sleeping rough, 2,006 (59.3%) were in municipal and social care facilities, and 415 (12.3%) were in settlements (Guijarro, Sales, Tello and De Inés, 2017, p.18). Settlements are public or private spaces that are occupied by people who spend the night in warehouses (factories or abandoned buildings) or plots of land with precarious housing structures (shacks, caravans, trucks....) that are maintained over time (Àrea d'Hàbitat Urbà, 2012, p.5).

Since 1985, Barcelona has had a Local Programme of Social Support for Homeless People (Ajuntament de Barcelona, 2005). In 2005 XAPSLL was created. XAPSLL is a network composed of 33 public and private organisations in the city, including Arrels Foundation, a founding member. In 2006, the Barcelona City Council published the Citizens' Agreement for an Inclusive Barcelona (Ajuntament de Barcelona, 2006).

In Barcelona, both the staircase approach and Housing First (HF) models are employed to address homelessness. Traditionally, programmes in Barcelona followed the staircase approach, an intervention model characterized by the gradual setting of goals with programme participants to help them become ready for independent living, both in terms of resources provision and social intervention (Matulič, Cabré and García, 2016, p.69). In recent years, programmes have begun to adopt the Housing First approach. In December 2014, the Arrels Foundation delivered the first conference on Housing First in Catalonia (Universitat de Barcelona, 2014). Professionals and academics from France and Portugal shared their knowledge and experiences. Over the following years, Arrels Foundation has continued to champion the HF model and, along with other organisations and municipalities in Catalonia, to disseminate the model to other towns and cities in the region. Catalonia's government works closely with other organisations, including Arrels Foundation, to prepare the Comprehensive Strategy for tackling Homelessness in Catalonia, which includes the implementation of Housing First programmes (Generalitat de Catalunya, 2017).

A more recent document (Xarxa d'Atenció a Persones Sense Llar Barcelona, 2017a) of the council's Plan for Fighting Against Homelessness 2016-2020 was released and described an intervention strategy for addressing homelessness. Housing First is one of the strategies presented in this plan. The City Council also created a process through which local authority agents consult with homeless services users who make suggestions for support services based on their own experiences. In 2015, Barcelona City Council's Social Rights Department launched a housing

service based on HF principles with 50 scattered housing units (Ajuntament de Barcelona, 2015). Arrels Foundation decided not to participate in this project in order to retain control over the organisation's philosophy and practice.

Most social and clinical services are brokered from public providers such as Barcelona City Council Social Services Centre and the Catalan Health Service, which includes general practitioners, specialists, and the city's mental health network. The Mental Health Team for Homeless People (ESMES) is composed of psychiatrists, nurses, and case managers that are integrated into the public mental healthcare sector as a pioneering project in the Spanish State. ESMES was created in 2005 after a pilot project launched in 1998, in which Arrels Foundation participated. The teams provide services on the ground to address the serious mental disorders or co-occurring mental disorders and addictions of individuals who have not yet received a diagnosis or dropped out of the mental health services.

Arrels Foundation

Since 1987, Arrels Foundation has had three main goals: to support homeless people, to raise public awareness about homelessness, and advocate for political change. Arrels Foundation was created by volunteers and, since the organisation's beginning, it has delivered support services to rough sleepers in Barcelona, especially the most vulnerable. One of Arrels Foundation's principles is the involvement of volunteers in all its programmes, services, and participation levels. Currently, around 397 volunteers collaborate one morning or afternoon at least once a week in one of the different services and departments (Arrels Fundació, 2017). All volunteers receive specific training on issues related to people experiencing homelessness and, on the values, and principles of the organisation. Of Arrels Foundation's budget for 2016, 70% came from private funds raised by 4,300 donors (Arrels Fundació, 2016). This allows the organisation to be self-governing and innovative.

In January 2015, Arrels Foundation's leadership made an important structural shift in the decision to implement Housing First. This transformation represented an important challenge for the organisation and required commitment to a culture of innovation, a reconfiguration of programmes and services, and the application of a client-centred approach (Uribe, 2014; Matulič and De Vicente, 2016). The Housing Support team and the Social Work department were restructured into Individual Support service, composed of three individual support teams that offer housing and client-led supports. The Arrels Foundation's open centre, the outreach service, and the care home Llar Pere Barnés were retained. These HF programme streams include volunteers, programme participants, and case managers.

Additionally, in January 2017, Arrels Foundation opened a new accommodation facility called “Flat Zero”, a flexible and low-threshold resource for individuals who live on the street, fail to adapt to the HF model, and are unable to find a place in any other resource. It is designed to provide a safe, secure, and clean shelter for the most vulnerable programme participants when they run out of other options. Approximately 20% of Arrels Foundation’s programme participants fall into this category. Flat Zero has 10 beds and is open only at night.

Description of the Arrels Foundation Housing First Programme

In 2016, 243 programme participants were enrolled in the Day Centre, the Outreach service, the Llar Pere Barnés care home, and the Individual Support service (218 men and 25 women). Some 90% of them were offered housing in self-contained or shared units, sub-tenancy rooms, pensions, care homes, or other accommodation centres. Regardless of the type of housing, they received social support based on the HF principles. These principles stress individual rights and provide person-centered supports.

The HF programme’s teams use a care plan based on the Intensive Case Management (ICM) model, a team-based approach that supports individuals through case management and public social, physical health, and mental health services. The principal aspects of the ICM model are: recovery-oriented supports with particular emphasis on education and employment, a ratio of 20 programme participants per case manager, centralized case management allocation; 12-hour coverage, seven days a week; monthly case management meetings; and support with medical appointments and paperwork (Macnaughton, Goering and Nelson, 2012). The current ratio in Arrels Foundation is 16 programme participants per case manager. Ten volunteers assist each team in providing support to programme participants.

Of the 243 participants of the HF programme, 89.7% (n=218) are male and 83.9% are older than 50. Seventy-three percent (n=178) are of Spanish nationality and 7% (n=17) are people who have immigrated without documentation. Of the 243 programme participants, 57.2% (n=139) earn less than €500/month and 13.6% of them (n=33) have no income. Based on contact with programme staff, it is estimated that 70.4% (n = 171) suffer some mental disorder although, of these, only 37.9% (n = 92) have been formally diagnosed. Regarding addictions, 82.7% (n = 201) suffer alcoholism and 28.8% (n = 70) suffer some substance abuse.

Objectives

This paper explains how Arrels Foundation reconfigured its programmes and services into a Housing First programme in Barcelona. In order to share our experience and serve as an example to other organisations, this paper describes the results of a fidelity assessment of the HF programme, identifies factors facilitating or impeding programme fidelity, and presents local adaptations to the programme.

Method

After 18 months, an evaluation was warranted to assess the new programme's success in implementing Housing First. The assessment was conducted using a mixed methods approach (quantitative and qualitative). This method was agreed upon with other Housing First programmes in various North America and European locations that were members of an international Housing First network. First, a quantitative self-assessment of fidelity was completed using the 38-item Pathways HF Fidelity Scale measure (Stefancic *et al.*, 2013). Following this, a focus group was conducted to arrive at a consensus among programme staff on fidelity scores. The evidence suggests that a higher level of model fidelity is associated with more positive client outcomes (Stefancic *et al.*, 2013; Davidson *et al.*, 2014; Gilmer *et al.*, 2014). Finally, a qualitative phase was conducted by key informant interviews identifying facilitators and obstacles to achieving a high level of fidelity. The methodology is detailed below.

The fidelity assessment

Procedure and sample

The self-assessment fidelity survey was translated from English into Catalan by professional translators and was checked for accuracy by two independent Housing First experts. To facilitate programme participants' understanding of the instrument, a supplementary, detailed document was created that expanded and contextualized some items.

The self-assessment of fidelity was carried out between June and July 2016. The aim of the quantitative phase was to assess model fidelity with the Housing First Fidelity Survey (Stefancic *et al.*, 2013), which was completed by staff members of the HF programme. Nine staff members completed and returned the self-assessment: five women and four men. The questions are designed to assess fidelity of a programme with the original Pathways to Housing model in five domains: Housing Process and Structure; Separation of Housing and Services; Service Philosophy; Service Array; and Team Structure and Human Resources.

Next, a focus group was organized in which the survey study participants met to discuss and reach agreement on a single score for each question. All nine staff members who completed the self-assessment participated in the focus group. The meeting was moderated by one of the advocacy team managers, who collected the consensus results. Ten additional members of the organisation, both employees and volunteers, attended the feedback meeting to observe. These members did not participate in the focus group discussion. They attended in order to facilitate internal communication and to ensure transparency. The managers of Arrels Foundation did not participate in the meeting to prevent any possible skewing of the focus group discussion. The meeting lasted for 2 hours and 30 minutes.

Data analysis

The scores for items on the fidelity measure were standardized on a 4-point fidelity scale. Scores below 3 were considered of low fidelity, scores of 3.5 and above reflected high fidelity, and scores between 3 and 3.5 were considered to represent moderate fidelity (Macnaughton *et al.*, 2015).

The key informant interviews

Procedure and sample

This second phase of the research was completed between January and March 2017. The goal of this qualitative phase was to explain the scores obtained in the survey and identify the facilitators and barriers to fidelity observed in the implementation process. Eleven members of the organisation were interviewed as key informants of Arrels Foundation: five men and six women. The sample included two volunteers, two programme participants, and seven programme staff in order to ensure representation of the organisation. The semi-structured interview guide included 38 questions across seven topics to obtain information about key aspects of the Arrels Foundation HF implementation in the five fidelity domains. The researchers were particularly interested in the local coordination among healthcare and social services networks, community integration, the role of volunteers in programme delivery as an essential part of the organisation, and evidence of the effects of the programme on service users' quality of life. Two of the eleven staff members who participated in the qualitative phase also completed the fidelity assessment. The average duration of the interviews was 2 hours and 15 minutes.

Data analysis

The interviews were recorded and transcribed using the qualitative data analysis ATLAS.ti 7. In order to carry out the qualitative analysis, a coding system was created based on an initial theoretical framework and established objectives. The two researchers from Barcelona University who carried out the interviews coded the data by separating the factors identified as facilitators and barriers to fidelity. The principal categories for analysis were: system of protection; housing; transfor-

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mation of the organisation; professional team; support; harm reduction; networking; incorporation of peers; volunteers; ethical dilemmas; the evaluation of services; participant profiles; stigma; collaboration of programme participants; integration into the community; quality of life of programme participants. In the following analysis section, excerpts from study participants' interviews are identified by code numbers that represent their role in the organisation: professionals as P1-P7, volunteers as V1-V2, and programme participants as U1-U2.

Results

The fidelity assessment

The overall fidelity score was 123 points out of a possible 169 (73%). Table 1 presents standard scores of all fidelity assessment survey items. High levels of fidelity were found on 45% of items. Low levels of fidelity were found on 36% of items. The remaining 19% of items indicated moderate fidelity. The results of the Arrels Foundation assessment indicate high Housing First fidelity in the domain of Separation of Housing and Services. Scores were lower in the domain of Housing Process and Structure because programme participants often cannot choose housing units in the neighbourhoods where they want to live, and must wait more than six months.

In the Service Philosophy domain, lower fidelity was observed in the area of individual rights to self-determination; although programme participants play an important role in decision-making, services are not always client-led. The lowest score was obtained in the Service Array domain, because of a lack of educational, vocational training, and employment opportunities and because peer-support workers have not yet been incorporated into the teams.

An examination of the scores in the Team Structure and Human Resources domain identifies two principal causes of lower fidelity. Firstly, there are few formal mechanisms to facilitate input from participants into the development of the programme, although some programme participants are members of the Board of Directors. Secondly, the team does not have enough time to thoroughly discuss and review ways to prevent future challenges related to living in the community (flat maintenance, problems with neighbours, etc.). The distribution of scores in the five domains is presented in Figure 1 for easy comparison to other evaluations.

The key informant interviews

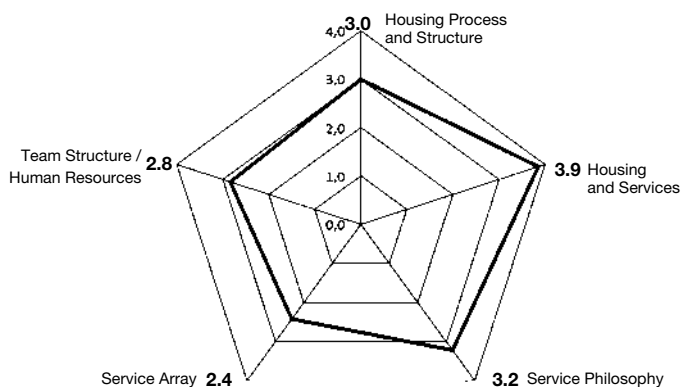
Key informants identified factors that affected fidelity in the five domains. We organized their responses as facilitators and barriers to model fidelity (see Table 2). We then organized facilitators and barriers into systemic, organisational, and individual categories.

Table 1: Fidelity Assessment Scores and Domain Means

Domain / Item	Domain Mean / Standard Item core (Out of 4)
<i>Housing Process and Structure</i>	3.0
1. Choice of housing	3.0
2. Choice of neighbourhood	2.0
3. Assistance with furniture	4.0
4. Affordable housing with subsidies	4.0
5. Proportion of income required for rent	4.0
6. Time from enrolment to housing	2.0
7. Types of housing	2.0
<i>Separation of Housing and Services</i>	3.9
8. Proportion of clients with shared bedrooms	4.0
9. Requirements to gain access to housing	4.0
10. Requirements to stay in housing	4.0
11a. Lease or occupancy agreement	4.0
11b. Provisions in the lease or agreement	4.0
12. Effect of losing housing on client housing support	3.0
13. Effect of losing housing on other client services	4.0
<i>Service Philosophy</i>	3.2
14. Choice of services	3.0
15. Requirements for serious mental illness treatment	4.0
16. Requirements for substance use treatment	4.0
17. Approach to client substance use	4.0
18. Promoting adherence to treatment plans	2.5
19. Elements of treatment plan and follow-up	1.6
20. Life areas addressed with program interventions	3.4
<i>Service Array</i>	2.4
21. Maintaining housing	4.0
22. Psychiatric services	4.0
23. Substance use treatment	2.4
24. Paid employment opportunities	0.8
25. Education services	0.8
26. Volunteer opportunities	3.2
27. Physical health treatment	3.2
28. Paid peer specialist on staff	1.0
29a. Social integration services	2.4
<i>Programme Structure</i>	2.8
31. Client background	2.0
33. Staff-to-client ratio	4.0
34b. Frequency of face-to-face contacts per month	4.0
35. Frequency of staff meetings to review services	3.0
36. Team meeting components	2.7
37. Opportunity for client input about the program	1.3
Total	3.0

Figure 1: Extent of Fidelity to Housing First Model

— Average Domain Rating on 4 Point Scale



Source: exclusively elaborated for this study from Arrels Foundation database

Facilitators of Housing First fidelity

Systemic factors

Key informants singled out one key systemic factor in the Service Array domain as a facilitator of HF fidelity: the city's healthcare and mental health services. These services are public and free. Moreover, there are specific support services for homeless people, such as ESMES. As mentioned above, they provide direct support to vulnerable individuals with serious mental health issues. Currently, ESMES staff members visit patients referred by the HF programme's teams at Arrels Foundation. ESMES staff members collaborate frequently with Arrels Foundation's case managers. These interventions help to improve the quality of life of programme participants with mental health disorders.

Organisational factors

At the organisational level, various factors were identified as facilitators of HF fidelity. A strong facilitator of fidelity in the Housing Process and Structure domain is the programme's commitment to supporting people's right to housing. Interviewees emphasised that Arrels Foundation is committed to vulnerable people's right to housing, as indicated by their contributions to programme participants' rent, by their commitment to providing services through housing loss, and by their new facility, Flat Zero. Key informants also pointed to the ongoing improvement of the social and healthcare situation of programme participants as evidence for fidelity in this domain.

Table 2: Summary of facilitators and barriers

	Systemic	Organisational	Individual
Facilitators	<p>1. Public Health Care and Mental Health services</p>	<p>2. Commitment to vulnerable people's right to housing</p> <p>3. Partnership with Mambré Foundation</p> <p>4. Arrels Foundation support people without documentation</p> <p>5. The support goes on despite loss of housing</p> <p>6. Local and international community networking</p> <p>7. Harm-reduction approach</p> <p>8. Stable and experienced staff teams</p> <p>9. Specific training sessions and visits to European HF programmes</p> <p>10. Volunteers participate with the teams</p> <p>11. Programme participants are part of the board of directors and collaborate with Arrels Foundation's services</p> <p>12. Strong relationships are built with programme participants</p> <p>13. Leisure and sport activities offered</p>	<p>14. Personal values and expertise</p>
Barriers	<p>1. Private housing market crisis in Catalonia</p> <p>2. Lack of public housing stock</p> <p>3. Rehabilitation of housing is needed</p> <p>4. Low incomes of the programme participants</p> <p>5. Stigmatisation</p>	<p>6. Community involvement of the programme participants</p> <p>7. Employment advice and occupational training are not a priority</p> <p>8. Lack of peer-support workers in the services</p> <p>9. A higher participant to case manager ratio entails less time intensive work</p> <p>10. Non-differentiation of case manager role</p> <p>11. Lack of assessment tools and services</p> <p>12. Lack of external teams supervision</p>	<p>13. Some residual staircase practices</p>

Key informants also identified the creation of Mambré Foundation as a facilitator of model fidelity. Mambré Foundation is a coalition of four major organisations in the city (Assís Shelter, Filles de la Caritat de Sant Vicenç de Paül, Sant Joan de Déu Hospital Order and Arrels Foundation). It contributes to the array of services offered to programme participants, such as housing supplies and employment advice. This is a local adaptation created due to the lack of private and public housing in Barcelona City. The partnership with Mambré Foundation is part of Arrels Foundation's current strategy to find and obtain housing in the area near the capital.

Since it was founded, Arrels Foundation has supported people who have immigrated without documentation and who have no access to any benefits. The beneficial effect of this local adaptation was expressed by various key informants, one of whom said, "It's worth pointing out that Arrels Foundation's position has always been extremely clear: when helping a person who is in a bad position – who has chronic problems – whether or not that person has documentation is not important" (P1).

Regarding the Separation of Housing and Services domain, key informants emphasised the benefits of knowing that their support will continue even if they lose their housing. This was a sentiment expressed by almost all the interviewees. One said: "[...] I think that housing is an important factor. However, it doesn't make any sense to only look after the house if you forget the original goal of supporting the person who lives there" (P5). The same service support in Arrels Foundation continues even if the participant goes to Flat Zero, returns to the streets, enters a rehabilitation centre, or goes to prison. Even after a participant passes away, Arrels Foundation ensures that the person has a dignified funeral.

In the Service Philosophy domain, key informants pointed to the local and international community networking as a facilitator of model fidelity. Working in a network is a strategy that favours and improves global perspectives in social intervention (Ubieto, 2007). Arrels Foundation has worked alongside European networks that implement Housing First for many years. Believing in a new and more efficient approach within an international context has provided much encouragement to the professionals who work in the organisation, which has been further strengthened by positive client outcomes. As a key informant said: "As an organisation, this decision to implicate ourselves in the international community has been beneficial; we have learned from international entities, we've developed. I think it has been a great help" (P2).

In the same domain, key informants also expressed that Arrels Foundation's experience of working in a harm-reduction model with street-dwellers facilitated their delivery of services with no pre-conditions. There was a consensus among several

interviewees that the fact that Arrels Foundation does not force programme participants to comply with treatment (for substance addiction, mental health issues, etc.) enables programme adherence.

In the Service Array domain, key informants described the teams as stable and experienced in working with homeless people, which helped to ensure an effective transition from a staircase model to a Housing First model. They also highlighted that case managers were aware of the difficulties that may arise from this cultural shift. Challenges to delivering the more client-led Housing First programme have been addressed through a variety of formative practices, including team collaboration and communication skills training sessions, international visits to HF programmes, and weekly team meetings, among others. The teams are coordinated in their service delivery and effectively support programme participants in self-regulation and relationships with neighbours.

Several key informants emphasized that the volunteers are a valuable local adaptation and an indispensable resource to the organisation and the people it attends to. Volunteers participate in support tasks alongside case managers' teams. They provide service users with a link to the community. As a key informant said: "[...] Volunteers are very important. In all the programmes, whether it's in the Housing First programme or at the centre or anywhere... They create bonds with participants and to me that is the key of all the work we do" (P2).

Key informants also identified the programme's emphasis on respect and fostering positive personal relationships as reflected in the team's cohesion and the organisation's Board of Directors' leadership style. It is important to note that programme participants are members of the Board of Directors and that some also collaborate in all of Arrels Foundation's services and departments. Arrels Foundation has worked for years to include programme participants in day-to-day tasks such as the administration and maintenance of materials and spaces, organising events and activities, and providing support to the Communication department. Although, this collaboration is not remunerated; they are not peer-support workers; it facilitates programme participants' influence on the services (Arrels Fundació, 2015). Key informants acknowledged that self-determination is crucial to recovery, a core HF principle (Gaetz *et al.*, 2013).

Several key informants highlighted the importance of building strong relationships among the volunteers, programme participants, and case managers. People engaged with Arrels Foundation have a very strong sense of belonging and consider the organisation as family. "A lot of people tell us: 'This is my family.' It's something we hear a lot. But for me it's important that this doesn't just refer to the four professionals in somebody's team, it means the whole of Arrels" said an interviewee (P3).

Key informants also identified the fact that Arrels Foundation offers both leisure and sports activities aimed at social integration within a holistic approach as a facilitator of fidelity in the domain of Service Array.

Individual factors

Key informants identified the personal values and expertise of the case managers as an individual factor facilitating programme fidelity in the Team Structure/Human Resources domain. Motivation and trust were seen as key factors that promote adherence to the programme. For professionals, this motivation is essential to team stability and to the development of workers' skills. One interviewee said: "I think in about 95% of the cases you're working with people who are animated, motivated, and who want to improve; who want to be more effective in what they do" (P1). The programme philosophy encourages team members' trust in the new approach. This is important because they are managing difficult situations with the programme participants whose complex financial, legal, and health problems can make them feel fearful and destabilize their housing situation.

Barriers to Housing First fidelity

Various factors were identified by key informants as barriers to model fidelity. These barriers are also organized according to systemic, organisational, or individual levels.

Systemic factors

The main barriers to model fidelity that key informants identified were systemic, especially in the area of access to affordable and appropriate housing in the Housing Process and Structure domain. The large number of evictions caused by the housing market crisis in Barcelona increased public awareness about the importance of the fundamental right to housing. Despite this increased awareness and the fact that homelessness is on local and regional governments' political agendas, investments have fallen short of what is needed to resolve the problem. The lack of public and private housing stock makes it difficult to access housing for programme participants.

There is an average six-month waiting period between housing unit acquisition and move-in for programme participants, mainly due to the lack of housing in Barcelona and the fact that housing units obtained are in poor conditions and require significant repairs. As a local adaptation, Arrels Foundation offers shared units or helps programme participants to rent rooms as sub-tenants. However, programme participants have few neighbourhoods to choose from.

As one key informant said: "It would be ideal to be able to choose which area to live in, but of course, if there are few flats available, the market shuts off the options you have to choose from" (P7). Another barrier identified by key informants to fidelity in this domain is programme participants' low-incomes. As stated earlier,

more than 7 out of 10 programme participants earn less than €500/month, the labour market is tight, and the number of employment services is low. Moreover, interviewees explained that their access to benefits and allowances designed to help guarantee personal autonomy is very limited. One key informant stated: “We always try and work to achieve autonomy for people. The problem we have is: can they ever really be autonomous while still receiving this income? Or are they dependent? That’s a conflict that I have struggled with” (P3).

Although Catalonia’s Parliament has approved legislation for a Minimum Citizen Income of €664/month – published in the Official Journal of the Generalitat of Catalonia (Llei 14/2017, de 20 de juliol, de la renda garantida de ciutadania) – recipients at the moment only receive 80% of it and some of the eligibility requirements are difficult to demonstrate for some homeless people. Although these issues affect the personal autonomy of Arrels Foundation’s programme participants, it does not hinder their access to housing, since the organisation uses its budget to pay rent even when programme participants have no income.

Key informants also pointed to the barrier of stigma around homelessness in the Service Array domain. Some key informants commented on cases in which programme participants have found themselves discriminated against by neighbours in their new communities. The stereotype of homeless people as a dangerous and unknown entity remains a force in the collective consciousness (Matulič, 2015, p.42). This is also notable in the difficulty Arrels Foundation has in finding flats to rent. As a key informant said: “I think the fact that Arrels Foundation is well known here [...] in some cases it actually works against us, because people associate Arrels with people who live on the street” (P7).

Organisational factors

Various organisational factors were identified as barriers to HF fidelity at Arrels Foundation. In the Service Array domain, key informants pointed out the difficulties programme participants encounter when trying to get involved with the community and the strong feelings of loneliness that some experience when they move into individual units to live. Participants have few people in their social networks and their community engagement is low. This makes the role of the volunteers very important. One participant said: “The volunteers... are a big support. We’re people who don’t have a family to surround us – we’re more or less alone in this life – and the volunteers cover the role that family or friends might provide, they give us company” (U2). Programme participants often find it hard to move away from the community network they created in the Arrels Foundation open centre and the neighbourhood where it is located. This is the district where the highest number of homeless people was identified in the 2017 count done by XAPSELL (Xarxa d’Atenció a Persones Sense LLar Barcelona, 2017b).

In the same domain, key informants also described how employment advice and occupational training are not, as of now, a priority for the organisation. One key informant said: “I think this barrier to accessing employment opportunities has to do with the fact that we don’t yet have a dedicated job search and insertion service, because that’s never been one of the entity’s priorities” (P4).

Although Arrels Foundation has been working for several years to increase clients’ participation in the different services and departments of the organisation, there is still scope to improve in this area. For example, peer- support workers have not yet been added to the organisation. Key informants explained that case managers and volunteers are still not fully convinced of the value of peer- support workers on the team and find it difficult to accept them as colleagues. One professional said, “We’re not at a stage yet where the participants can perform the same role as paid professionals” (P5).

Key informants identified the high participant to case manager ratio as a barrier in the Team Structure/Human Resources domain. “I think that often the participants need more support than they get. Sometimes we don’t provide it because we don’t have the resources [...] but it’s not just professionals working at Arrels: we are professionals and volunteers working together” said one professional (P3). A lower participant to case manager ratio allows the case managers and volunteers to spend more time working on emotional and social aspects of the programme participants’ support needs (Matulič, 2015).

Undifferentiated housing and support roles were also identified as an organisational barrier to model fidelity that lead to situations that undermine relationships with programme participants. For example, one key informant said, “It can’t be right that the person who tells you that you have to leave your flat is also the person who is in charge of supporting you afterwards, it ends up contaminating the relationship that you have” (P1). The key informants highlighted that the fact that the Individual Support Team is responsible for ensuring that programme participants pay their rent, maintain their housing, and mediate with their neighbours in case of difficulties can result in a weakening of the bonds between case managers and programme participants.

Some interviewees also signalled the lack of a global strategy for monitoring and evaluating the services and the support provided to volunteers and case managers as a barrier to fidelity in the Service Array domain. This is compounded by the lack of established processes through which programme participants can assess the impact of the programme on their quality of life and provide insight as to how it could be improved. One interviewee said: “There is no formal evaluation system with set indicators. All the evaluation we do is subjective” (P3).

The last organisational barrier pointed out by key informants was that the organisation does not provide spaces for external supervision where case managers can deal with the difficulties and emotional consequences of working with programme participants who have challenging support needs. One interviewee said: "Obviously the implementation of supervision and training of Arrels's service teams in mediation skills is something that needs to be given more impetus and to be worked on" (P1).

Individual factors

Key informants identified one individual factor to HF fidelity, which was in the Service Array domain. The organisation has undergone significant transformation, facilitated by continuous training of volunteers and case manager teams. However, some residual staircase practices are still evident. For example, the monitoring and control of service users' activities is still common. Case managers face challenges in determining the appropriate intensity of engagement. "We try and keep some form of control over the person's life in their home... We do so respectfully, but I think it's something that has to be done. It's just not viable not to have any type of control," explained one key informant (P4). These situations highlight several ethical dilemmas linked to the autonomy and self-sufficiency of the programme participants with, in some cases, a certain amount of disagreement among volunteers and case managers. Team monitoring is not always well received and case management intensity is not always a decision made by the participant.

Discussion

Knowledge of the history of the organisation is important to understanding the context of the current programme. As Macnaughton *et al.* (2015) pointed out, the success of a new HF programme relies, in part, on the team's prior experiences, values, and commitment to the project, and on the alignment of the organisation's values with those of the HF model. Even when an organisation's members are willing to adopt an innovative, evidence-based project like HF, the transition is not always easy (Greenwood *et al.*, 2013; Goering *et al.*, 2014; Stergiopoulos *et al.*, 2015).

Participating in this evaluation and international study has been a great opportunity for Arrels Foundation to reflect upon and discuss their daily work routines and to improve the alignment of Arrels Foundation's programme values with HF philosophy. These results confirm that, although the programme adheres closely to HF principles, there are several areas that require improvement. The strength of Arrels Foundation comes from its long tradition of working with homeless people using a philosophy similar to that of HF in terms of providing secure and permanent housing, its harm-reduction approach, and provision of flexible support for as long as is required (Pleace, 2016).

The highest fidelity scores were observed in the Separation of Housing and Services, Housing Process and Structure, and Service Philosophy domains. These findings suggest that Arrels Foundation has achieved levels of fidelity similar to those reported by other programmes, especially in the Separation of Housing and Services domain, which matched the same score obtained by Canada's *At Home/Chez Soi* programme in their third year of implementation (Macnaughton *et al.*, 2015). Arrels Foundation's lowest fidelity score was in the Service Array domain, mirroring the results that were also reported for the first year of *At Home/Chez Soi* (Nelson *et al.*, 2014).

It is very important to maintain relationships with other services and organisations in the sector in order to collectively influence local and regional policies and increase housing access for programme participants, access to mental health services and addictions treatment. Our results indicate that strengthening the bonds between public and private institutions and getting new partners involved is important to the maintenance and diffusion of HF in Catalonia, in Spain, and in other countries (Macnaughton *et al.*, 2015). Our findings highlight the indispensability of our collaboration with the network of XAPSL in Barcelona, of encouraging discussion and reflection about the HF model in Catalonia, and of participation in international HF networks and communities.

The results also demonstrate the importance of several local adaptations to the general success of the programme in the regional context. One of the most important has to do with the provision of housing. The provision of housing units helps the programme participants' recover their quality of life, especially in terms of material stability, restoring healthy habits, and re-establishing positive social and personal identities. These positive elements are in accordance with the results of other research projects carried out in different European countries (Bretherton and Pleace, 2015; Busch-Geertsema, 2013). As stated earlier, the partnership with Mambré Foundation plays an important role in helping the organisation to ensure the provision of housing.

Another local adaptation is that, since its beginning, Arrels Foundation has supported people who have immigrated without documentation and who have no access to benefits. Despite the evidence of the benefits of the HF model, options other than the HF model must also exist. Flat Zero, a low-threshold shelter for people who have been sleeping in the street long-term and for whom, for various reasons, it is difficult to access other resources or services in the city, is a valuable local adaptation. The cognitive deterioration caused by chronic psychiatric illnesses, loneliness, isolation, and aggressive behaviour, along with substance use,

and lack of income are examples of difficulties many programme participants face. The feeling of rejection, disengagement, and of not having access to their rights complicates their use of programmes and public services.

The large number of volunteers is an essential local adaptation that enhances programme participants' community engagement. As mentioned above, Arrels Foundation was created by volunteers, who are considered one of the driving forces of the organisation. Ramón Noró, one of the founders of the organisation who is currently the manager of the advocacy team, said that, "while volunteers help to engage individuals with the community and re-establish broken bonds, the Support Services team members ensure adequate case management is provided" (Noró, 2007, p.35). At the same time, volunteers contribute to increasing society's awareness of homelessness.

The results also confirm that the various teams that provide Arrels Foundation's services made up of case managers and volunteers are stable and have specific training and expertise in the HF model. They provide the knowledge and practical skills needed to deal with programme participants' complex situations. The commitment of the organisation's leadership to Arrels Foundation's mission is responsible in large part for the commitment of case managers and volunteers to providing long-term support to programme participants. These factors contribute to recovery orientation and adherence to individualized and client-driven support principles. It has also undertaken a significant cultural shift to adopt the Housing First model through trainings, conferences, and visits to other HF European programmes. These experiences have increased the team's sensitivity to service users' right to self-determination.

This evaluation identified several challenges to programme implementation and delivery that require attention. For example, the housing situation in Barcelona makes it remarkably difficult to obtain individual housing units at affordable prices, and therefore programme participants' choices become limited and the waiting times continue to increase. The extent of this problem complicates the adherence to the HF principle of providing immediate access to permanent housing. Without rapid growth in the public housing market, it will become increasingly difficult for Arrels Foundation to provide a solution to the housing needs of the programme participants.

The non-separation of housing and support services means that case managers must provide support services and attend to housing-related issues, and this can damage relationships between programme participants and case managers. The separation of the roles carried out by the case manager is an important aspect of the HF model (Tsemberis, 2010). The non-separation of housing and support service has not been implemented because it has not been a priority, nor has it

been a possibility due to financial restrictions. This is an important issue to which the organisation must pay special attention in order to ensure adherence to HF individualized and client-driven support principles.

The organisation needs to increase efforts to facilitate programme participants' community integration and access to the labour market in order to increase its adherence to HF principles of social and community integration. Programme participants' social isolation is also a new challenge that the organisation is addressing. As Realidades Association and RAIS Foundation state (Asociación Realidades and Fundación RAIS, 2007), an important goal and aspect of recovery is to help the programme participants create new relationships and rebuild relationships that were damaged during their homelessness. These new relationships enable new perspectives in the relations with primary welfare networks and community centres to pave the way for the process of social inclusion. The challenges that programme participants experience in building and rebuilding social connections reflect findings reported by other research on Housing First (Bretherton and Pleace, 2015; Bernad, Yuncal and Panadero, 2016; Bernad, Genjor and Yuncal, 2016).

Limitations

There are several limitations of the evaluation in relation to the fidelity assessment and the key informant interviews. Regarding the fidelity assessment, the survey was filled out individually by staff members. Final scores were obtained from discussion in a consensus meeting. This method was used in previous evaluations (Macnaughton *et al.*, 2015). Limitations of this type of procedure include the possibility of some study participants dominating the discussion in the consensus meeting and their influence on the conclusions. Nine out of nineteen service heads and case managers from the HF programme participated in the self-assessment survey and the consensus meeting. Another methodological limitation is that ten additional members of the organisation attended the feedback meeting to observe. This fact could also have influenced the results.

Concerning the key informant interviews, we used individual interviews with key informants to gain insight into the facilitators and barriers to fidelity in the five key domains. While interviews with key informants proved valuable, focus groups could be used to ensure that more staff members, volunteers, and programme participants are heard (Macnaughton *et al.*, 2012; Macnaughton *et al.*, 2015). Furthermore, a meeting in which the interviewees discuss and compare their findings has occurred.

Conclusion

The experience of evaluating the fidelity of the Arrels Foundation HF programme provided us with an opportunity to reflect on and improve HF fidelity. In addition, this evaluation has offered Arrels Foundation a unique opportunity to evaluate its own capacities within the HF programme and to incorporate such self-evaluation into its processes. Some improvements were already implemented during the evaluation process. First, Mambré Foundation began searching for cheaper flats in the surrounding areas of Barcelona (Metropolitan Area of Barcelona) to deal with the lack of housing. Also, La Troballa, an occupational and labour workshop that promotes personal habits and skills-recovery for Arrels Foundation's programme participants who are in vulnerable situations, hired more staff and moved into a new building that is more than triple the size it once was. It is designed to provide support for the reintegration of programme participants into the labour market, provide training in practical, work, and social skills, as well as employment advice. Finally, the Arrels Foundation began to carry out external supervision sessions with the teams. It has also created a working group to study strategies around how best to include peer-support workers into the services.

The results of the Arrels Foundation HF programme also provided some recommendations for areas that the organisation needs to work on in order to improve fidelity with the HF model. These include: implement a more clearly defined separation of the roles of the case manager; promote the community integration of the programme participants; establish a formal procedure for the evaluation of organisational practices; achieve a lower participant to case manager ratio; and improve the continuous training that is currently offered to professionals and volunteers.

In sum, comparing our results with other countries has enabled us to identify common challenges and design possible strategies to overcome them. Making these evaluations in an international context contributes to the project's credibility and sustainability (Nelson *et al.*, 2017). Cross-country comparisons will allow us to identify whether the systemic barriers we encountered are also encountered in other social and political contexts.

We share a history of significant economic recession and housing crises with other Western countries. This presented difficulties in accessing housing for our programme participants through the private and public markets. In the Catalan context, social support services for homeless people have increased, but are still not enough to meet demand.

Comparisons across Western countries will illuminate similarities and differences in systemic barriers to mobilizing effective support for programme participants. Cross-country comparisons may also highlight similarities and differences in cultural shifts toward client-led, recovery-oriented services. Taken together, these comparisons will yield important information about the context of implementation and the areas in which organisations need to focus their efforts in order to implement effective programmes with a high level of model fidelity.

► References

- Ajuntament de Barcelona (2005) *Barcelona Inclusiva: 2005-2010: Pla Municipal per a la Inclusió Social: 6 línies estratègiques i 37 accions* [*Inclusive Barcelona: 2005-2010: Municipal Plan for Social Inclusion: 6 Strategic Lines and 37 Actions*]. (Barcelona: Benestar Social). Retrieved from <http://hdl.handle.net/11703/105922>
- Ajuntament de Barcelona (2006) *Programa Municipal d'Atenció Social a Persones Sense Sostre*. [*Municipal Social Program for Attention for Homeless People*]. (Barcelona: Benestar Social). Retrieved from http://ajuntament.barcelona.cat/dretssocials/sites/default/files/arxiu-documents/Plans%20i%20Programes%20Municipals%202005-2010.Programa%20Municipal%20d'Atencio%20Persones%20Sense%20Sostre_200.pdf
- Ajuntament de Barcelona (2015) *L'Ajuntament adjudica la gestió del servei Primer la Llar (Housing First) per proporcionar accés immediat a un habitatge a persones sense sostre* [*The Council Assigns the Management of the Primer La Llar (Housing First) Service to Provide Immediate Access to Housing for Homeless People*]. Retrieved from <http://ajuntament.barcelona.cat/premsa/2015/05/03/lajuntament-adjudica-la-gestio-del-servei-primer-la-llar-housing-first-per-proporcionar-acces-immediat-a-un-habitatge-a-persones-sense-sostre/?hilit=%22Housing%22%2C%22First%22>
- Àrea d'Habitat Urbà (2012) *Pla d'assentaments irregulars: mesura de govern* [*Plan for Irregular Settlements: Government Measure*]. (Barcelona: Barcelona City Council). Retrieved from <http://hdl.handle.net/11703/84700>
- Arrels Fundació (2015) *The New Board in Arrels Includes Two Persons Who Have Experienced Homelessness*. Retrieved from <https://www.arrelsfundacio.org/en/new-board-arrels-includes-two-persons-experienced-homelessness/>
- Arrels Fundació (2016) *Els comptes clars* [*Transparent Accounts*]. Retrieved from <https://www.arrelsfundacio.org/en/about-us/straight-accounting/>
- Arrels Fundació (2017) *El nostre equip* [*Our Team*]. Retrieved from <https://www.arrelsfundacio.org/en/about-us/our-team/>
- Asociación Realidades and Fundación RAIS (2007) *Construyendo relaciones. Intervención psicosocial con personas sin hogar*. [*Constructing Relationships. Psycho-Social Intervention With Homeless People*]. (Madrid: Asociación Realidades and Fundación RAIS). Retrieved from <http://www.carm.es/ctra/cendoc/haddock/13374.pdf>

Bernad, R., Yuncal, R. and Panadero, S. (2016) Introducing the Housing First Model in Spain: First Results of the Habitat Programme, *European Journal of Homelessness* 10 (1) pp.53-82.

Bernad, R., Cenjor, V. and Yuncal, R. (2016) Housing First Model in Spain: Habitat Programme 12 Months – Results, *Barcelona Societat, Journal on Social Knowledge and Analysis*. Ajuntament de Barcelona, 20 pp.98-113. Retrieved from <http://ajuntament.barcelona.cat/dretssocials/sites/default/files/revista-ingles/11-housing-first-model-in-spain.pdf>

Bretherton, J. and Pleace, N. (2015) *Housing First in England: An Evaluation of Nine Services* (Centre for Housing Policy: University of York).

Busch-Geertsema, V. (2013) *Housing First Europe Final Report* (Bremen/Brussels: GISS).

Davidson, C., Neighbors, C., Hall, G., Hogue, A., Cho, R., Phil, M. and Morgenstern, J. (2014) Association of Housing First Implementation and Key Outcomes Among Homeless Persons With Problematic Substance Use, *Psychiatric Services* 65 (11) pp.1318-1324.

Gaetz, S., Scott, F. and Gulliver, T. (2013) *Housing First in Canada: Supporting Communities to End Homelessness* (Toronto: Canadian Homelessness Research Network Press).

Generalitat de Catalunya (2017) *L'estratègia integral per a l'abordatge del sensellarisme a Catalunya impulsada pel Govern presenta els primers treballs del model català de "La llar, primer" (Housing First)* [The Integral Strategy for Addressing Homelessness in Catalonia Proposed by the Government Sets Out the First Works of the Catalan Model of "La Llar, Primer" (Housing First)]. Retrieved from http://premsa.gencat.cat/pres_fsvp/AppJava/notaprem-savw/302251/ca/lestrategia-integral-labordatge-sensellarisme-catalunya-impulsada-pel-govern-presenta-treballs-model-catala-llar-housing-first.do

Gilmer, T.P., Stefancic, A., Katz, M.L., Sklar, M., Tsemberis, S. and Palinkas, L.A. (2014) Fidelity to the Housing First Model and Effectiveness of Permanent Supported Housing Programs in California, *Psychiatric Services* 65(11) pp.1311-1317.

Goering, P., Veldhuizen, S., Watson, A., Adair, C., Kopp, B., Latimer, E. and Aubry, T. (2014) *National At Home/Chez Soi Final Report* (Calgary, AB: Mental Health Commission of Canada).

Greenwood, R.M., Stefancic, A., Tsemberis, S., and Busch-Geertsema, V. (2013) Implementations of Housing First in Europe: Successes and Challenges in Maintaining Model Fidelity, *American Journal of Psychiatric Rehabilitation* 16(4) pp.2990-312.

Guijarro, L., Sales, A., Tello, J. and De Inés, A. (2017) *Diagnosi 2017: La situació del sensellarisme a Barcelona. Evolució i accés a l'habitatge. [Diagnosis 2017: The Homelessness Situation in Barcelona. Evolution and Access to Housing]*. (Barcelona: Network Of Attention To Homeless People In Barcelona). Retrieved from <http://www.bcn.cat/barcelonainclusiva/ca/2017/12/Diagnosi2017.pdf>

Llei 14/2017, de 20 de juliol, de la renda garantida de ciutadania, DOGC núm 7418 (2017) [Law 14/2017, 20th of July, of the Guaranteed Income of Citizenship, DOGC number 7418 (2017).] Retrieved from <http://portaldogc.gencat.cat/utillsEADOP/PDF/7418/1626989.pdf>

Macnaughton, E., Goering, P. and Nelson, G. (2012) Exploring the Value of Mixed Methods the At Home/Chez soi Housing First Project: A Strategy to Evaluate the Implementation of a Complex Population Health Intervention for People with Mental Illness Who Have Been Homeless, *Canadian Journal Public Health* 103(7) Supp. 1, Population Health Intervention Research: Advancing the Field, S57-S62.

Macnaughton, E., Stefancic, A., Nelson, G., Caplan, R., Townley, G. and Aubry, T. (2015) Implementing Housing First Across Sites and Over Time: Later Fidelity and Implementation Evaluation of a Pan-Canadian Multi-site Housing First Program for Homeless People with Mental Illness, *American Journal of Community Psychology* 55 (3-4) pp.279-291.

Matulić M.V. (2015) *Procesos de inclusión social de las personas sin hogar en la ciudad de Barcelona: Relatos de vida y acompañamiento social [Processes of Social Inclusion for Homeless People in the City of Barcelona: Examples of Life and Social Accompaniment]* (Phd research presented on 9th March 2015. Department of Social Work and Social Services. Barcelona University). Retrieved from <http://www.tesisenred.net/handle/10803/393958>

Matulić, M.V., Cabré, C. and García, A. (2016) L'atenció a les persones sense llar a la ciutat de Barcelona: una mirada històrica i de futur [Attention to Homeless People in the City of Barcelona: A Look to the Past and to the Future], *Barcelona Society, An Informative And Analytical Social Magazine, Barcelona City Council* 20, pp.59-77. Retrieved from <http://ajuntament.barcelona.cat/dretssocials/sites/default/files/revista/revista-20-completa.pdf>

Matulič, M.V. and De Vicente, I. (2016) *Housing First: un modelo de atención centrada en la persona en III Congreso Internacional: Trabajo Social, arte para generar vínculos* [*Housing First: a Model of Attention Based on People in the III International Congress: Social Work, an Art of Generating Links*]. (Deusto: Digital Publication of the University of Deusto). Retrieved from <http://www.deusto-publicaciones.es/deusto/pdfs/otraspub/otraspub12.pdf>

Nelson, G., Caplan, R., MacLeod, T., Macnaughton, E., Cherner, R., Aubry, T. and Goering, P. (2017) What Happens After the Demonstration Phase? The Sustainability of Canada's At Home/Chez Soi Housing First Programs for Homeless Person with Mental Illness, *American Journal of Community Psychology* 59(1-2) pp.144-157.

Nelson, G., Stefancic, A., Rae, J., Townley, G., Tsemberis, S., Macnaughton, E. and Goering, P. (2014) Early Implementation Evaluation of a Multi-Site Housing First Intervention for Homeless People with Mental Illness: A Mixed Methods Approach, *Evaluation and Program Planning* 43 pp.16-26.

Noró, R. (2007) Arrels Fundació: una resposta col·lectiva a la situació de les persones sense llar [Arrels Foundation: a Collective Response to the Situations of Homeless People], *Magazine of Social Work (RTS) Inclusion-Exclusion: opposites or complementary?* 180 pp.33-42. Retrieved from <http://www.tscat.cat/content/rts-180-bilingue>

Pleace, N. (2016) *Housing First Guide Europe* (Brussels: Feantsa/SNF).

Stefancic, A., Tsemberis, S., Messeri, P., Drake, R. and Goering, P. (2013) The Pathways Housing First Fidelity Scale for Individuals with Psychiatric Disabilities, *American Journal of Psychiatric Rehabilitation* 16(4) pp.240-261.

Stergiopoulos, V., Hwang, S.W., Gozdzik, A., Nisenbaum, R.; Latimer, E., Rabouin, D. and Goering, P.N. (2015) Effect of Scattered-Site Housing Using Rent Supplements and Intensive Case Management on Housing Stability Among Homeless Adults With Mental Illness. A Randomized Trial, *JAMA* 313(9) pp.905-915.

Tsemberis, S. (2010) *Housing First: The Pathways Model to End Homelessness for People with Mental Illness and Addiction* (Center City, Minnesota: Hazelden Press).

Universitat de Barcelona (2014) *Housing First, un nuevo modelo de apoyo para las personas sin hogar en Barcelona* [*Housing First, a New Model of Support for Homeless People in Barcelona*]. (Barcelona: Universitat de Barcelona).

Ubieto, J.R. (2007) Models de treball en xarxa [Models of Working in a Network], *Social Education. Magazine of Socio-educational Intervention* 36 pp.26-39. Retrieved from <https://www.raco.cat/index.php/EducacioSocial/article/view/165566/241137>

Uribe, J. (2014) *De la calle al hogar. Housing First como modelo de intervención y su aplicación en Barcelona [From the Street to the Home. Housing First as a Model of Intervention and its Application in Barcelona]*. (Barcelona: Sant Joan de Déu editions).

Xarxa d'Atenció a Persones Sense Llar Barcelona (2017a) 2016-2020 Barcelona Plan for Fighting Homelessness. (Barcelona: Network for the Attention to Homeless People in Barcelona). Retrieved from http://ajuntament.barcelona.cat/dretssocials/sites/default/files/arxius-documents/barcelona_plan_fighting_homelessness_2016-2020.pdf

Xarxa d'Atenció a Persones Sense Llar Barcelona (2017b) XAPSLL [Network for the Attention to Homeless People in Barcelona (2017b). XAPSLL] Retrieved from: https://recompte.barcelona/?page_id=65&lang=es