

ADDRESSING HOMELESSNESS IN EUROPE

**Service Provision
For Homeless People In Europe:
Regulation and Funding Implications
for Service Development**

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Introduction

This paper examines the development of services for homeless people in Europe. The main focus of the paper concerns the nature of regulation and funding of services and examines the extent to which this framework influences service provision.

The paper considers the situation in five countries that may be considered to illustrate the variety of experience across different welfare regimes: Austria, Finland, Greece, Portugal and the UK.



Legislative Framework for Service Provision and Action

The first issue to consider is whether a legislative basis exists for service provision and what is the nature of those statutory provisions. Furthermore, it is important also to understand the perception of homelessness in policy discourse at the national level - is homelessness perceived in a narrow sense of the no abode or is there a broader conception? In this context what framework does legislation provide for the funding and regulation of homeless services? Is there a specific locus of responsibility identified for the development of strategies and policy? Since the causes of homelessness embrace housing, social welfare and health we must also consider whether legislation provides a framework for an integrated approach to service provision both in relation to prevention, alleviation and re-settlement.

In the five countries under discussion, it is only in Finland and the UK that the legislative framework is drawn under housing or homelessness statutes. However, in Finland the responsibility of the municipality to provide social services to all people, including homeless people, is regulated under the social legislation as well as under the constitution. In all other countries, responsibilities, where they exist at all, are prepared under social welfare legislation.

In Austria, there is no federal legislative responsibility for homelessness although regional laws exist under social work legislation. It is only since 1977 that homelessness lost its status as a crime, although some counties and regions continued to include measures in their police statutes to criminalise 'vagabonds' (Salzburger Polizeistrafgesetz 1978 Section 3). Although the policy discourse has changed since the 1980s from traditional police and treatment models to a social model of prevention and support, there is no legal framework at the federal level, at any of the nine regional levels or at the level of the local authorities to support this. Instead of a federal housing act to guarantee a right to housing for vulnerable people, there are nine different laws on social benefits (Sozialhilfe), regulating an individual's right to social services.

Hence services for homeless people have emerged from a bottom-up process of lobbying and networking by social workers and by voluntary agencies (NGOs). The development of services has occurred therefore in a context of regional laws that are more or less restrictive and provide different bases for innovation and action in relation to service provision for homelessness and housing exclusion.

In Finland, historically, the services for homeless people were mostly provided by voluntary, religious organisations who provided temporary accommodations, shelters. Homelessness was a large problem after the war until the 1960s. In the 1960s and especially in the 1970's when the development of the welfare state was advanced, the service provision made a vast shift from night shelters to care and treatment oriented measures; a large number treatment institutes for substance abusers were established under the social welfare legislation. They were directly regulated and financed by the state authorities. However, even a greater shift took place in the late 1970's and especially in the 1980s, when the housing policy measures were chosen as dominant measures to reduce homeless, together with social welfare measures. Homelessness was considered to be a structural problem, mostly a problem of housing policy. Measures to diminish homelessness were developed from this approach. More recently, there has again been a shift to a more support oriented approach, due the fact that the profile of the homeless population has changed considerably during the last decade.

Thus in Finland, measures to combat homelessness and improve the housing conditions of homeless people are written into the legislation of the housing sector in the Act of the Development of the Housing Conditions (1985/919). This Act states that "the municipalities are obliged to develop housing conditions in their area so that they can provide reasonable housing for any people in their area who find themselves houseless and are not able to find a home for themselves without any difficulty" (§ 5). However, this Act is a skeleton law

that does not give any right for a person to housing. This legislation reflects every day speech where the concept 'homeless - koditon' is not used. Instead the concept 'houseless - asunnoton' is always used. A 'houseless' person is a person who primarily suffers from the lack of housing, but a 'houseless' person can also have many other problems. According to some more specific housing acts, some financial subsidies can be given to municipalities and housing associations to re-house homeless people; however according to the decision of the State Council the municipalities and the housing association should, when allocating social housing, give priority to applicants in urgent need of housing including homeless people.

The Social Welfare Act is the most important legislation steering all the provision of all social services in the area of a municipality, although many services for homeless people are provided under the Act on Services for Substance Abusers. The social welfare legislation allows considerable discretion to municipalities and does not give accurate norms how services for homeless people are to be arranged. Neither the concept of houseless ('*asunnoton*') nor the concept homeless ('*koditon*') is to be found in social welfare and health care legislation. The reason for this is that the legislation does not specifically identify obligations to provide services for homeless people but rather treats them as clients of service provision in a more generic context. Thus, although the notion of houselessness refers to the responsibility of the housing authority, social welfare authorities provide most of the social welfare services, including housing services as one element of care provision, for homeless people. In practice services for homeless people are partly provided by municipal social welfare services, by health care services and by voluntary agencies who specialise in these areas. Housing authorities and housing association also provide some support activities.

In Greece, there is no public authority dealing with housing and homelessness as such. In principle, there are particular

programmes and services aimed at addressing the housing needs of specific population groups such as: individuals or families unable to afford the cost of housing, refugees protected by the U.N High Commissioner for Refugees, victims of natural disasters (earthquakes, floods, etc.) or particular vulnerable groups (elderly people with no social security, people with disabilities etc.). A legal framework for the provision of housing to people who lack the means to secure it for themselves is provided, primarily, by the Greek Constitution which states that "the provision of housing to anyone who is homeless or living in substandard conditions constitutes a special task of the state". Yet, this remains merely theoretical as it does not correspond to concrete policies or any statutory duty of central or local government related to provision of housing to the poor. The right to social housing falls into the broad category of non-directly enforceable social rights that were introduced into the Greek legal order through the Constitution of 1975, and are included in the revised Constitution of 2001. According to article 21 (par.3 & 4): "The State will care for the health of citizens and will adopt special measures for the protection of young people, the elderly, handicapped as well as for the relief of the needy". In relation to homelessness the constitution states "For those without any or with insufficient accommodation, housing is subject to specific statutory measures". These provisions constitute the primary legal basis of public housing policy in Greece and seem to suggest that the protection of certain vulnerable groups, including provision of housing, should be a main objective of public action. In reality, in the majority of cases, there is little available to vulnerable groups in terms of housing provision by central or local government, apart from institutional care. The statutory agencies officially responsible for covering the needs of homeless people are the Department of Social Housing of the Ministry of Health and Welfare, and local authorities throughout the country which attempt to address the needs of the homeless in their area, through their social services, often in co-operation with central government agencies.



In Portugal, the juridical and institutional framework of social security has only been able to emerge following the 1974 revolution. However, the emergence of a welfare state has not occurred to the degree achieved in other European member states. Although social protection is intended to provide a universal coverage, the level of coverage is extremely low and thus does not provide effective social protection. It is in this context that some authors stress instead the idea of a welfare society where the family plays a decisive role in complementing (often replacing) this weak universal support. The role of the NGOs in the provision of social services has thus been decisive in this relationship between the state and civil society. It is only since 1996, with the introduction of a 'new generation' of social policies and particularly with the introduction of the Guaranteed Minimum Income (now called the Social Insertion Income), that there has been an effective evolution towards active social policies. The Co-operation Agreement on Welfare (1996) created the conditions for developing a co-operation strategy between private welfare institutions (IPSS), the central state and the local administration. The creation of social networks (Redes Sociais) in 1997 provided a range of different forms of support and partnership between private non-profit agencies and public agencies working in the field of social services to eradicate poverty and social exclusion and promote social development.

The UK has a lengthy history of statutory and voluntary provision of services for homeless people and rights under homeless legislation date back to the 1977 Homeless Persons Act. In contrast to the lengthy period of welfare retrenchment during the 1980s, the New Labour administration since 1997 has embraced the European social inclusion agenda. While this has not heralded a swing towards a universal welfare provision, homelessness has clearly been identified as a high priority social issue. Specific policy objectives to reduce street

homelessness and the use of bed and breakfast accommodation have recently been replaced by a more comprehensive approach to preventing and dealing with homelessness. The post 1997 homelessness policy review across the UK has now enshrined the strategic approach to homelessness in key legislation for Scotland (Homelessness etc Scotland Act 2003) and for England and Wales (Homelessness Act 2002). That is to say, local housing authorities need to make a strategic assessment of homelessness and support needs in their areas, and to devise and implement a co-ordinated response. In England, the Homelessness Directorate within the Office for the Deputy Prime Minister (ODPM) now co-ordinates homelessness policy. Homelessness policy is fully devolved to the Scottish Executive while the Welsh Assembly has some influence over homelessness policy and practice. The provision and funding of support services for a range of vulnerable groups including the homeless now comes under a Supporting People programme. Supporting People is a cross-departmental, UK-wide initiative, co-ordinated by the ODPM. Supporting People provides services for vulnerable people to improve their quality of life and enhance independence, and promotes housing related services which are 'cost effective, robustly funded and planned using a co-ordinated approach'. Essentially Supporting People will fund housing related support services through a 'single pot' of money co-ordinated by local authorities (DETR, 2001). Supporting People came fully into operation in April 2003. While local authorities were planning for Supporting People, the changes to the homelessness legislation were also introduced. This now necessitates the provision of *both* a Supporting People programme and a homelessness strategy, though the two should be integrated. In England, this is likely to be made more complex by the two-tier local government system, where not all local authorities have a strategic housing function. In contrast, Scotland has a single tier of unitary local authorities.

Role of the State in Providing and Influencing Service Provision

There is a wide variation in the central/local split in responsibilities for planning, implementation and funding of service provision across Europe. This occurs despite the decentralisation of government and trends of 'the hollowing out of the state' that is described as a context of European governments in recent years (Jessop, 1994; Esping-Anderson, 1999). However, state reliance on the NGO sector for service provision is evident across all five countries although the reasons for this differs as does the nature of the relationship. Note that in this context the state is taken to refer to government decision-making including central and local government as opposed to the agencies of the market or of civil society.

The Centre/Local Roles

The effectiveness of government intervention may be thought to depend upon strong central strategic policy direction providing a framework for local implementation using discretionary powers that enable the development of adequately resourced programmes to address local needs and problems. A review of the five countries under consideration here demonstrates a more complex and varied pattern of central/local relationship of government that does not conform to such an ideal model of intervention. Neither is it evident that the diversity in central / local relations reflects differences between countries that conform to the variation described by the Esping-Anderson typology of welfare regimes (Esping-Anderson, 1990). Three countries, Greece, the UK and Finland, are described here to illustrate this.

In Greece, Local Authorities were never empowered to take on an active role in relation to issues arising in their territory, or launch any programmes aiming at addressing specific social problems. Funding and decision-making processes have traditionally been centralised and Local Authorities have, generally, been lacking the funding and authority to take initiative in setting up services. Policies were directed primarily by the

Ministry of Health and Welfare, and services belonged to it or were managed and supervised directly by it. There was generally no notion of local government services, funded and managed by local authorities, addressing social problems in particular areas. In Greece, traditionally, policies concerning housing have been designed by central government on a national basis. Although they may concern particular areas or regions, local authorities have had no significant input or power. Although some local authorities are more sensitive to social problems than others and there are some municipal services set up by local authorities for homeless people or other groups, on the whole significant decisions regarding policy and service provision come from central government.

In recent years, there has been a general trend in Greek social policy towards decentralization of social services and 'sectorization' of health services. The revised Greek Constitution of 2001 renders local governments responsible for the administration of local issues and gives them more financial and administrative independence (article 102, par. 1&2). In line with this, there has been an increased tendency of local authorities to establish services or implement policies to address the needs of their residents. However, in general, with the exception of the municipality of Athens, there is very little in the field of homelessness in most municipalities - apart from general measures for assisting the poor (such as provision of free meals).

In the United Kingdom, on the other hand, central-local relations are more clearly demarcated. Since 1977, legislation has placed the duty to implement homeless policy upon the lowest executive tier of government. The Homeless Persons legislation places duties upon local housing authorities to secure housing for key 'priority groups' in the event of homelessness, usually within their own council housing stock. However, Central Government has increasingly made use of specific initiatives to target resources at particular groups. The RSI was one of the earliest examples of this type of approach. By the end of the 1980s, welfare retrenchment,

economic restructuring and the exclusion of non-family households from the statutory homeless safety net combined to produce an unprecedented increase in street homelessness in the UK, the response to which was the introduction of a specific, targeted Rough Sleepers Initiative (RSI). In another example, in 2002, ODPM announced £9m of funding specifically to tackle homelessness resulting from domestic violence. This was to support introduction of a 24-hour helpline, a database of refuge support and to develop new refuge provision (ODPM, 2002).

The post 1997 homelessness policy review across the UK has now enshrined the strategic approach to homelessness in key legislation for Scotland and for England and Wales. That is to say, local housing authorities need to make a strategic assessment of homelessness and support needs in their areas, and to devise and implement a co-ordinated response. In England, the Homelessness Directorate within the Office for the Deputy Prime Minister (ODPM) now co-ordinates homelessness policy. Homelessness policy is fully devolved to the Scottish Executive while the Welsh Assembly has some influence over homelessness policy and practice.

This twin-track approach of central policy direction and local implementation with, ostensibly, independent regulation and scrutiny is also evident in relation to the provision of support services for homeless people and other vulnerable groups. Supporting People is a cross-departmental, UK-wide initiative, co-ordinated by the ODPM. Essentially the programme introduces new procedures for providing support to a whole variety of special needs groups, including some homeless people (DETR, 2001). Supporting People provides services for vulnerable people to improve their quality of life and enhance independence, and promotes housing related services which are 'cost effective, robustly funded and planned using a co-ordinated approach'. Essentially Supporting People will fund housing related support services through a 'single pot' of money co-ordinated by local authorities (DETR, 2001).

Until the 1980s the public administration was centrally planned and the socio-political needs of the population of Finland and the resources for these purposes were defined mainly at the state level, even if, especially when the services for homeless people and inadequately housed groups were concerned, the targets were defined in consensus between the state and the municipalities. Central government finance, which was granted to the municipalities and to its different service sectors, were granted on the basis of services the municipality provided as well as the on the basis of the eligible expenditure for the services. The target of this planning

system was to guarantee that services were provided equally for the citizens of all municipalities. There were numerous targets, which were defined together by the housing authorities and the social welfare authorities. As late as in 1987 these two sectors started a program to eliminate homelessness that reduced the level of homelessness by half in ten years.

However, the Act on Social Welfare (1982) was introduced as a skeleton law that aimed to simplify the administrative process. Within this framework the municipalities have powers of decision to provide services in the manner they determine to be required at the local level. The institutional conception of municipalities stressed the significance of the municipal self-government. However, the system of transfers from the state still remained more or less the same. The state transfers to different kind of social and health care services were granted according to a specific percentage and the discretionary element was eliminated. Thus the municipalities had more power to design their own service provision. However, the period of the 1980s was a period of expansion of services and developed on the basis of an adequate resource base. This applied equally to the housing sector where the importance of special needs was given priority. In addition to the programme to eliminate homelessness, new forms of housing were planned for many groups with special needs.

Significant changes have occurred during the 1990s and the beginning of the 2000s both within the housing policy as well the social welfare services. In early 1990s the central bodies which guided and supervised the municipalities, the National Board of Social Welfare and the National Board of Health (as well as the National Housing Board) were abolished. The changes in the social welfare and health sector were assisted in 1992 in large measure by this legislative framework that allowed state transfers to be adjusted to meet economic imperatives rather than social policy objectives. In the middle of an economic depression, state transfers aimed to increase the flexibility of the municipal service provision and to encourage saving and effectiveness, while increasing community care instead of institutional care. The state transfer to municipalities now formed a single block grant using indicators (population, age structure, population density, and the rate of unemployment, sickness rate) rather than expenditure assessments. While the public economy at the same time was driven to an economic crisis, municipalities became the executors of the crisis of the public economy. Cuts in the state transfer have been carried out during the 1990s and 2000s several times. The cuts in the central government transfers were, at least in the late 1990s, the most notable saving that balanced the state economy. (Kaukonen 2000, Julkunen 2001).

The State and Civil Society

Different models of state and civil society interaction may be envisaged. We may expect that in countries where the state role is weak, civil society will have emerged to provide services for vulnerable people. However, in countries where the role of the family is strong, voluntary agencies may have been slow to develop outside of the church/confessional nexus. Equally, strong state intervention may either have developed using state administration to deliver services or have developed reliance upon voluntary action to deliver local services. The five countries examined here demonstrate a different history to the development of the civil society role within the context of strong or weak state intervention in homelessness service provision. However, in all five countries there is an increasing reliance upon civil society (NGOs) as providers of services for homeless people and other vulnerable groups.

In Portugal, for example, the role of the NGOs in the provision of social services has been decisive in this relationship between the State and the civil society. In this context the Portuguese experience is not a recent one. There is a long tradition of relationship between the State and private institutions working in the field of social action, which has been characterised by different forms of recognition, regulation and funding. Traditionally, there has been a strong influence of the role of charitable institutions in the provision of services for the poorest in society. The so-called *misericórdias* date back to the XVI century and although their importance is very heterogenous they have played an important role in the field of social intervention. As an example, in the field of homelessness, the *Santa Casa da Misericórdia de Lisboa* (the major social action service provider in the city) is responsible for the provision of a wide range of services: temporary accommodation, outreach teams, professional training, occupational activities, medical (i.e. psychiatric) support, food and other basic needs including social support. It must be stressed, however, that *Santa Casa da Misericórdia de Lisboa* has a specific status within the usual range of organisations working in the field of social action. It is financed through the State overall budget, although a large part of its financing comes from the lottery, which is its most important fund-raising activity. This description has echoes with Finland where, in a totally different welfare regime, the state lottery is also an important source of funding for services for the homeless.

Among the NGOs working in the field of social solidarity there is roughly two major groups in Portugal: those older institutions closely linked to the catholic church and a younger group of institutions that have emerged after 1974 and which

have been growing considerably over the years. New dynamics have been observed (Capucha, 1995) in the two decades following the Revolution: *"The initiatives linked to the church have gained a new character and those from an associative or entrepreneurial background have practically emerged since then. The Church, non-confessional associations and private enterprises seem to be the three sources of social initiative presenting an extremely significant dynamism; they seem to have become the State's partners, on whose intervention one should be counting on in a very important way in the coming years."* (Capucha, 1995: p9)

The recognition of the growing role played by these organisations in the provision of social support is not without criticism. There has been an ongoing debate on the type of protagonism to be assumed by the NGOs in their relationship with the State. This suggests that their role could be, on the one hand, acting as a "cushion" between the pressures over the State from the civil society and on the other hand, by depending largely on voluntary work, they release the State from a significant part of the financial burden of financing social support (Sousa Santos and Hespanha, 1995). Similar criticism exists in the totally different welfare regime context of the UK (Burrows, 2003). Others (Capucha, 1995) argue that the State should deepen its social responsibilities, which, inter alia, means that it should promote a stronger involvement of NGOs but also demand stronger responsibilities from NGOs and other social partners in the definition, implementation and evaluation of social policies.

In Greece, most of the services addressed towards homeless people as a special target group - i.e. distinct from traditional institutions for the care of children or of the elderly, or the chronically ill - have developed during the late 1980's and the 1990's, along with the development of homelessness as a distinct and noticeable social problem. The governing bodies, goals and target groups of these services vary widely. Some of them target social groups with specific types of problems distinct from but relevant to their state of homelessness (e.g. refugees, battered women, former psychiatric patients). Most of these services are charities, run by the Church or various NGOs and are affected adversely by the lack of regular sources of funding. Some services receive grants from the Ministry of Health and Welfare, and some services for refugees receive grants from the U.N. High Commissioner for Refugees. Church institutions usually have regular funding from the Church although they often rely on donations as well. However, the majority of services run by NGOs in Greece, in recent years operate mainly on EU funding.

According to a survey undertaken in 1997 (BAWO, 1998) three-quarters of the 272 identified services for the homeless in Austria were provided by non-governmental organisations. In some cases, these services were part of an integrated but autonomous part of Austrian-wide umbrella societies (like the Caritas). In the most cases, however, small organisations operated exclusively in one county (or even in one city). As a result of recent development of the organisational structures of the service providers in some counties (e.g. in the county of Salzburg), there was also an increasing number of services which were organized by non profit corporations (17.5%).

Historically, the voluntary sector in the UK has long had a key role in the relief of poverty and homelessness and in supporting client groups not catered for by statutory services. A feature of the changing profile of homeless households has been the continued increase in the proportion of single person households, a group traditionally supported by the NGO sector. A wide range of support services for homeless people have developed in the UK, provided by a large number of agencies, and provision has tended to be targeted at specific client groups within the homeless population. Services may be targeted by household type (e.g. age, gender, whether the household has children) or by 'needs' such as physical and mental health services. Labour market needs have also been recognised through support services to aid labour market reintegration (foyers, the New Futures programme¹).

The strategic approach to homelessness in the UK will present both opportunities and challenges for the voluntary sector. NGOs have the opportunity to contribute to co-ordinated needs assessment, planning and delivery, and to access more secure resources over the long term through Supporting People. However, this role will inevitably be associated with increased incorporation into the local or national state and will also bring more rigorous monitoring requirements. Some traditional aspects of voluntary provision are now firmly viewed as being totally outdated and inappropriate, and are consequently unlikely to be supported within local homelessness strategies.

In Finland, the principle of universalism is dominant in social welfare provision. All services of the welfare state are meant for all people equally. Hence, the state (that is to say the municipalities) assumes responsibility for providing services for everyone including homeless people. This may be characterised as a strong 'state' intervention regime where rights to health and social care are guaranteed and the right to housing is 'promoted'. All residents in Finland are provided with basic social security, social and health services. All are eligible for

basic benefits, independent of their position in the labour market, which is an important pre-requisite for homeless people. Hence the role of NGOs as providers of social services is only a secondary and complementary one compared to that of local authorities. The voluntary organisations usually receive their funds from local authorities (on the basis of client contracts) and direct funds from the Finnish Slot Machine Association (also subject to government control). Usually, the services provided by NGOs are purchased by local authorities and this means the municipality has a co-ordinating role over their work. However, in recent years the role of NGOs has become more important in many areas of Finland. Within Helsinki, however, the municipality has taken an increasing role in service provision for homeless people from the voluntary sector in order to guarantee better quality of provision. On the other hand, an example of nation-wide organisation is the Y-Foundation established, in 1985, especially to provide housing for homeless and houseless people and has continued its activities purchasing, on average, 200-400 dwellings a year for homeless people and refugees across Finland.

Public sector management

It has been argued that the role of the state (in industrialised countries) in relation to public services and public sector management changed over the last quarter of the twentieth century (Jessop, 1994; Esping-Anderson, 1999). These policy themes have emerged in the context of a crisis of the welfare state (Edgar et al, 2002) that has witnessed a 'hollowing out' of the state as governments of all political colours have grappled with the burgeoning costs of public services. In essence this change is reflected in a retrenchment of the state role in service provision opting instead for an enabling and planning role in which the state acts as a purchaser, on behalf of a commonweal public, of services provided by the market or the third sector. In this context, competitive bidding procedures replaced central allocative mechanisms of funding and limited resources are targeted to specific areas of need often using ad hoc funding mechanisms. Public sector accountability, value for money, and quality standards are ensured through mechanisms of state or quasi-state regulation frameworks and inspection. This section briefly considers to what extent these changes in the ethos of public management have influenced or affected service provision by state or third sector agencies for homeless people. The discussion is intended only to elaborate some of the key issues. This aspect will be considered in more detail in future work in which we examine the organisational structure, operational delivery and multi-agency working among homeless NGOs.

The impact of changes in governance (e.g. decentralisation) and public sector management varies between the countries under consideration and points to the need for more detailed consideration at a later date. However, it is apparent that this shift in ethos in public sector management has influenced access to (social) housing, the funding and regulation of services, as well as service provision.

In Finland, the aim to increase flexibility in service provision in the 1990s in the context of developing community care, coupled with public expenditure cuts at a time of economic recession, has led to a search for greater efficiency. At the same time the new public sector management policy introduced in municipal services has led to increased privatisation, management by results, pricing of services within the service structure, competitive bidding and increased co-operation with the third sector organisations. However, competitive bidding has not yet been practiced within the sector of homeless services.

The effects of the decentralisation of decision-making in housing policy to the regional and municipal tiers of government can be illustrated by Austria where the legislative and administrative competence for housing policy shifted from the Federal Government to the regional authorities in 1988. In Austria, this shift has been associated with the introduction of public subsidies to private building firms and plans to 'liberalise' the social housing market selling up to 300,000 dwellings to private investment funds, banks and insurance companies. This is occurring at a time of increasing localised housing shortages

in the regional capitals. Changing financial systems have also been instrumental in changing the institutional structure of social housing provision in the UK where restrictions on public sector borrowing by local authorities has led, over recent years, to an increasing trend to transfer council housing stock to housing association ownership. The shift to a greater reliance on private sector finance has meant that social landlords have had 'to minimise their risk while becoming more commercial and cost-effective' (Pryke and Whitehead, 1995 p630). Risk minimisation has been associated with policies to guarantee the rental stream - allocation policies favouring less risky tenants, a more stringent approach to evictions and the management of vacancies. In this case the 'hollowing out of the state', following the de-regulation of financial markets, is manifest in an increased role for regulation to guarantee accountability and risk management among social landlords.

In contrast, Portugal has witnessed a reinforcement of the role of the state in social housing during the 1990s and has adopted policies to increase the supply of social housing. On the other hand, there is evident retrenchment in the role of the state in relation to the financial support for NGOs at the present time. An increase in state involvement can also be argued to have occurred in Greece where, although the shortage and insecurity of state funding and organisational deficiencies undermine the effective operation of services, recent legislation has introduced external and independent inspection and control mechanisms to protect the rights of service users and to ensure compliance with legislation in relation to standards of provision.

1 *The New Futures programme is a Scottish Executive challenge fund initiative aimed at preparing homeless and vulnerable individuals for the labour market.*

Service Development

In the light of this understanding of the legislative and governance context, how have services for the homeless developed in recent years and what is the nature of service provision? It is evident that the nature of the social welfare regime, in itself, is not sufficient to explain the nature of service provision so what significant features exist to enable us to appreciate the nature of services and approaches to their provision? What can be said about the key gaps in provision and have these been the result of inadequacies in historical funding and planning or, more generally, the result of the aetiology of service development?

Recent history of service development

Services for homeless people reflect, to some degree, the differences in the welfare regimes in which they are embedded. This, in itself, is not sufficient to explain the development and innovation in service provision, nor does it help to understand the convergence we can perceive in recent innovation in the approach and purpose of services to alleviate and prevent homelessness. There is a trend, in all counties under consideration here, of development and innovation in service provision that reflects a move from a 'police' model to a 'treatment model' to a 'social' model (Edgar et al, 1999). This development is evident in a shift from emergency services focused on street homelessness to services aimed at re-settlement and prevention and targeted on an individual basis or on groups of homeless people with specific support needs. That shift is also evident in an increasing diversity in the actors involved and in the roles they perform in service provision.

Service provision in Portugal has been described (Capucha, 1995) by reference to four models of intervention: "traditional equipment and services", "risk groups", "non-traditional equipment and services" and "preventative actions". Over 75% of the 800 institutions surveyed have been classified under the first type. Contrary to "risk groups" (where some of the homeless specific services have been included), the dominant category ("traditional equipment and services") is geographically dispersed. The dominant type of intervention model is mainly to be found in the major urban areas. There also seems to be a close relationship between older institutions (misericórdias)

and a traditional type of intervention and a stronger association of more recent NGOs - usually non-confessional associations or enterprises - with the other types of intervention. Linked to the nature of intervention is also the dimension of structures which, once again, seem to introduce some clear trends within the universe of these social solidarity organisations: smaller size institutions have clearly increased in number after 1974 while the larger institutions tend to be older.

In terms of service provision it can be said that most NGOs are oriented towards the provision of traditional services to specific groups of clients (e.g. kindergartens, day centres, residential homes for the elderly), although there is a clear trend, in recent years and in the context of the emergence of new types of NGO, to address more complex situations and clients (e.g. drug addicts, learning disabled people, homeless, prostitutes, young people at risk). In the field of the fight against homelessness the role of these institutions has been traditionally oriented towards the provision of basic services, namely temporary shelter, food and personal hygiene. There has been a lack of prevention strategies as well as the prevalence of institutions working with "consolidated" situations of homelessness, focussing on the provision of "what is possible in such extreme cases".

However, in the specific domain of homelessness, it is also possible to identify different types of institutions: from long established agencies in the field of social action, such as the *Santa Casa da Misericórdia de Lisboa* to other more recent organisations such as *AMI* (the only institution whose services are scattered throughout the country) or other more specifically oriented services in the field of health (*ARIA* and *Médicos do Mundo*). The religious and non-religious motivation is also to be found among the institutions working with the homeless as well as a growing role of municipalities in the fight against homelessness.

In a context of institutional diversity where various institutions, private organisations and public agencies deal with different aspects of the vulnerabilities that affect homeless people it is nevertheless interesting to find a more or less common pattern of service provision. Thus, one can find a wide range of services providing for, on the one hand, the satisfaction of basic needs (food, clothes, personal hygiene, basic medical

care); those providing temporary shelter and other support (social and psychological support, medical support) and, on the other hand, those targeting more long term or specific forms of support (e.g. mental health and temporary lodging, occupational and professional training, community life). Most of the services providing temporary shelter and the satisfaction of basic needs (e.g. meals, showers, clothes) have long been established although some of them have recently undergone some major changes in order to focus on a more comprehensive and integrated response to the needs of the users.

Some of the shelters available in major urban centres (i.e. Lisbon and Oporto) are now in the process of undergoing important changes in terms of their specialisation in specific areas (e.g. drug addicts, immigrants). The evolution in the provision of services for the homeless has, thus, mainly been centred around the increase in the number of service providers and therefore in the number of basic services available which has been trying to respond to a growth of demand both from the homeless themselves but also from other institutions and other services.

The development of the services for the homeless in Austria can briefly be described in relation to the following trends:

- > the foundation of many small service providers at local / regional level;
- > the shift from large and universalistic institutions provided by communal authorities or churches to small specialized services by private organisations, funded by communal and / or regional authorities;
- > the provision of individual support; in the 1990's finally even the traditional asylums have started to improve their standards by employing social workers and/or to decrease the number of sleeping places (for example in Graz, Innsbruck etc.);
- > the development of services with the goal to prevent eviction - at least in the cities of Austria; but there is still a lack of services in the rural parts;
- > the diversification of facilities in the range of supported housing: residential homes instead of asylums (in some Austrian cities the traditional institutions have just been complemented by this); mobile support in shared accommodation instead of or in addition to residential homes; supported housing in dispersed flats for single people or families;

- > target-group specific services like residential homes for older homeless persons, for drug addicts, young homeless, for women (with or without children) in housing stress.

It is important to take into account that these developments in service provision took place at the level of voluntary and charitable organisations in the cities and is not based on legislative acts at a nationwide level. So, in effect, each Austrian city has developed its own special system of services for the homeless. However, overall the purpose of services in Austria has changed from a more traditional orientation towards approaches aimed at prevention, provision of individual support and (re)opening pathways and access into the mainstream housing market.

Instead of a federal Austrian housing act to guarantee a right to housing (especially for vulnerable people) and to ensure (re-)integration into mainstream housing there are nine different regional laws on social benefits (Sozialhilfe), regulating an individual right to social services (also in the case of homelessness) and, at the same time, regulating the framework of funding. Even at this level there is no special framework to provide planning of services, regulating access to services, defining and / or improving the standards of provisions, benefits and services for the homeless. Hence the development in the range of provisions and services for the homeless has depended on the voluntary sector and especially on the informal networks of non governmental service providers at federal, regional and communal level through the agency of BAWO (the federal umbrella organisation for service providers on homelessness) and its regional working groups (e.g. 'BAWO-knot' Vienna; 'Forum of Services for the Homeless' in Salzburg; 'Working Group on supported Housing' in the counties of Tyrol and Vorarlberg; 'Housing-Association in Styria'; 'Working Group Residential Homes' in Nether Austria, 'Services for the Homeless' and 'Housing-Association' in Upper Austria). Thus while the driver for the development and improvement of services lies with the practical experiences of social workers and service providers, the implementation of innovation and change depends on county-specific regulations in the different administrative frameworks of planning, regulation and funding.



A number of different services offering emergency as well as longer-term accommodation and support to homeless people have developed in Greece during the late 1980's and the 1990's, along with the development of homelessness as a distinct and noticeable social problem. The governing bodies, goals and target groups of these services vary widely. Three statutory "social hostels" providing short-term accommodation were set up by the Ministry of Health and Welfare in Athens in the mid 1980's, with a total capacity of 155 beds. However, one hostel, situated near an inner city area notorious for high levels of homelessness has, since the earthquake in 1999, been taken over by Doctors of the World and operates as a hostel for refugees and asylum seekers. In Greece, the role of local authorities in service provision in the field of social and community care has traditionally been limited. However, in recent years some services have been set up by the initiative of various local authorities. In particular, there are "public poorhouses" in various parts of Greece, offering accommodation to elderly people lacking an income and family support. In recent years, the Municipality of Athens has established a number of services including a Shelter for Abused Women, and a day care service for homeless people - an innovative service of its kind in Greece. The Municipality has also recently introduced a scheme for the provision of temporary accommodation to homeless people in partnership with two low-cost private-owned hotels in the centre of Athens. This service constitutes an innovation in Greece, as it is the only example of a local authority service actually providing accommodation to homeless people. Other local authorities have, however, made attempts to provide (non-accommodation) services to homeless people, often in collaboration with various churches and charitable organisations. However these remain isolated initiatives and do not amount to an organized local authority policy to address homelessness in a consistent manner.

The Church and various NGOs provide different types of hostel and guesthouses. The majority of the hostels belonging to the Church are Homes for the Elderly. They offer accommodation to elderly people with low income who have no other home and residents can stay there permanently. A variety of other hostels operate including: a YWCA hostel (homeless young women and refugees), the Guest House of Mother Theresa (women-refugees and their children), the House of Christian Love (homeless elderly women and young women). Arsis is an important homeless NGO that offers support to socially disadvantaged young people aged 15-25, many of who are ex-offenders or school dropouts, and who face the spectre of social exclusion and an increased risk of homelessness. However, the problem of homelessness for young

people may be addressed only indirectly, through reducing risk factors, due to the complete lack of appropriate supportive housing services.

During the 1990's, the massive rise in immigration has resulted in radical changes in Greek society, characterized by the presence of refugees and asylum seekers as distinct social groups facing acute social, economic and housing problems. The presence of these groups has generated a need for new kinds of services to address their urgent housing and social needs. The U.N. High Commissioner for Refugees supports three non-governmental organizations; namely, the Social Work Foundation, the Greek Council for Refugees and the International Social Service, which provide social and legal assistance to refugees and asylum seekers. Amongst voluntary organizations, the Doctors of the World and Voluntary Work have set up services providing accommodation, health care, counseling on legal, emigration and employment issues and general support to a number of refugees and asylum seekers. The Social Work Foundation, a well established voluntary agency operating since 1967, has recently launched the operation of supported housing projects for refugees and asylum seekers combining provision of accommodation in shared flats, for up to 6 months, along with provision of social work assistance, networking with employment, health and social services etc. with a view to promoting their overall social integration. The Greek Red Cross in co-operation with Social Work Foundation provides accommodation to up to 340 asylum-seekers in the Refugee Admission Centre.

The mid 1980s marked the beginning of a systematic effort for the de-institutionalisation of long-term psychiatric patients. The living conditions of patients in Greek public psychiatric institutions attracted a great deal of negative publicity, which, apart from its negative consequences, set the ground for the provision of funding by the EEC (regulation 815/84) for the de-institutionalisation and social rehabilitation of these patients. De-institutionalization programmes generally combine provision of supported housing, medical care, psychosocial support, social skills training, and some form of vocational training or daytime activity. In 1999 the second part of the EU-funded de-institutionalisation programme was launched, with a plan to establish 55 new "social rehabilitation units", with a capacity to accommodate approximately 700 people. These projects have either started or are about to start operating in the near future. Recent mental health legislation (N. 2716/1999) announced the introduction of a network of mental health services country-wide and stated that a variety of residential projects ("long-stay hostels" and "guesthouses") will be established aimed at providing accommodation to individuals with

mental disorders who “lack a family environment, or their temporary removal from their family environment is considered to be therapeutic, or need a period of adjustment and retraining into living in the community”. The main philosophy underlying the recent legislation is that of providing “care in the community” as an alternative to institutional care, by means of an organized network of residential and community services. This constitutes a milestone in Greek policy since, despite the recent de-institutionalization movement, the majority of people with mental health problems or mental disabilities either remain in institutions - largely due to the lack of appropriate community alternatives - or are cared for by their families. Although, therefore, the above legislation concerns primarily mental health rather than homelessness as such, in effect it tackles homelessness with regard to this particularly vulnerable population group. This legislation however has not, as yet, been implemented on a national scale.

Within the UK, approaches to explaining homelessness have largely revolved around the structure/agency debate within a mixed economy of welfare. A recent reconsideration of the published evidence concluded that the roots of homelessness continue to lie in poverty and disadvantage, with structural inequality largely explaining the existence of homelessness, and influencing individual capacities to cope with and move out of homelessness (Anderson and Christian, 2003). Nevertheless the analysis of individual agency (e.g. through psychological research) does also aid the understanding of the diversity of individual pathways through homelessness (Anderson, 2003). The broader links between housing and poverty in the UK are well illustrated by recent work by Burrows (2003) which revealed that over half of all poor people in the UK now live in the private housing sector.

The structure/agency debate is particularly salient to the changing framework for service provision in the UK and the understanding of homelessness as both a housing and a social problem. By the beginning of the 21st century, there was a strong consensus across the statutory and voluntary sectors that while the provision of quality housing may relieve a household’s immediate lack of shelter, it will not necessarily resolve other support needs. Provision of housing may be a necessary, but is not a sufficient, condition for the alleviation of poverty or disadvantage. Moreover, the provision of inadequate housing may even exacerbate related problems and support needs. Consequently, the importance of ancillary service provision to support households to move out of homelessness and enhance their general well-being has increasingly been recognised as fundamental to policy and practice. In this respect it could be argued that there has been a convergence

in policy between the UK and other European countries. Homelessness policy in the UK has developed from a housing approach towards a recognition of the need for social support while other countries have moved from a social welfare perspective towards a more housing oriented basis for policy.

While the legislative framework gives clarity of purpose to housing services for homeless people, traditionally there has been much greater diversity in the provision of support services and this has been a key area of provision for NGOs, including the voluntary housing sector. Historically, a wide range of support services for homeless people have developed in the UK, provided by a large number of agencies, and provision has tended to be targeted at specific client groups within the homeless population. Since the early 1990s, the importance of multi-agency working has been emphasised as essential to improving effectiveness in service delivery and again has become core to UK policy and practice. Programmes such as the RSI and Supporting People have explicitly embraced joint working across the housing, health and social work professions, while foyers and other work-oriented innovations have drawn education and employment services into joint working to relieve homelessness. Both statutory and voluntary sector agencies act as gatekeepers for housing and support services for homeless people. The need to join up services has long been recognised but fully effective joined up service delivery has not yet been achieved (Kennedy, et al 2001).

Of course support services have to be paid for and a variety of funding sources have been utilised. However, through the 1980s and 1990s, both local authorities and housing associations utilised Housing Benefit to fund support services, although this was strictly a benefit to cover rent. This was done by including support service costs within the rent for a hostel or supported dwelling. This practice was increasingly challenged by central government as Housing Benefit costs soared, and was a key trigger for the switch to the Supporting People (see section 5 below). Within the NGO sector, some organisations providing, say, hostel accommodation, would also have funded support services through Housing Benefit.

Finally, prevention of homelessness has been recognised as key area for contemporary policy development. This relates to the gradual acceptance of the need for a dynamic analysis of homelessness and the recognition of the need for longer-term support. For some households, temporary measures are not sufficient to relieve homelessness permanently. Research has highlighted the importance of early risk/trigger factors, the prevalence of repeat homelessness, and the complexity of the process of resettlement over the medium

to long term. Prevention is clearly linked to the need for broader planning to meet housing needs and to the targeting of key 'risk' groups. A key development in good practice has been that of housing education in schools, to raise awareness of the risks of homelessness on leaving home and offer guidance on how this can be avoided (e.g. SCSH, 2003).

Since 1997, significant resources have been dedicated to reviewing homelessness in England, Scotland and Wales. Devolution may have produced differences in the detail, but the need for a strategic approach to homelessness has emerged as essential across the UK. The development of a strategic approach represents an important attempt to embrace the dynamic and multi-dimensional nature of homelessness at the beginning of the 21st century and offers one possible framework for examining the changing context for services for homeless people. While the emphasis on strategic responses to homelessness has been driven by central government and statutory agencies, the voluntary sector has sometimes taken the lead in development of innovative operational practice. One such example is the Shelter Homeless to Home Service which has been rigorously evaluated by Jones et al (2002). The service was a three-year project funded by the Community Fund (itself funded through the National Lottery) to help formerly homeless people sustain their tenancies. Pilot projects in Birmingham, Bristol and Sheffield provided comprehensive resettlement assistance to help families make the transition from homelessness to a permanent home.

In Finland, during the 1990s the responsibility of municipalities in relation to service provision for homeless people has increased as the role of central government diminished. Municipal tax revenues are the main source for implementing social welfare, while allocations in the national budget have been reduced to the fifth of all municipal revenues. However, the allocations from the national budget still remain a major resource by which the municipality can fulfil its obligation for implementing social welfare although these allocations have recently been the subject of much debate. The local authorities have been given more authority to allocate these resources, albeit within a much reduced level of budget. In most municipalities services for homeless and houseless people are provided as part of the ordinary social service provision. Many middle-sized towns closed their emergency shelters and concentrated on other measures, on ordinary or supported housing for homeless people in 1990s. Recently, the need for emergency services and different kinds supported services has increased as the number of clients with multiple problems among homeless population has increased. The municipal social welfare services which administratively are divided to specific sections

along with the problems of the client (e.g. mental health patients, substance abusers, elderly people) is not yet properly repaired to the increasing number of clients with severe problems. In recent years, some municipal service providers and other agencies have begun to develop more innovative services for these people. However, the main approach in the development of homelessness services remains the provision of housing where previously homeless people can be supported to live independently in normal housing.

There are 220 municipalities in Finland where there are homeless people, according to the Housing Market Survey conducted by the Housing Fund of Finland. Every one of these municipalities provides services for homeless people in their own way. Thus it is not possible to describe the nature of service provision throughout Finland. However, unlike other municipalities, the City of Helsinki, created a special social services office to be responsible for the provision of housing services for single homeless adults and families. Helsinki, where half the homeless population live, has halved the number of beds in shelters and hostels since the late 1980s. The decision was taken then to replace unsuitable hostel accommodation and, to this end, the City purchased and closed private sector hostels and replaced them with a purpose built hostel with (74) private single rooms. Now the number of beds in shelters and hostel (of which a large share is owned by the third sector) is around 950. The special social services office now runs a network of care and support homes for formerly homeless people as well as supported housing. In addition, the office can also house homeless person in single apartments owned by the City or by the Y-Foundation. The number of these apartments is around 1800. Rising house prices has meant that the target of purchasing new apartments for homeless people, set by the City as well as by the Y-Foundation, has not been achieved in recent years.

Significant features

In each country it is possible to identify features that have been specific to that country and have been significant in influencing the development of service provision. The literature suggests that innovation in services will require a basic political, institutional and technical capacity (Jenkins and Smith, 2001) and, especially in the formative stages, may also require an institutional sponsor or leader. Several such features are evident in the countries under study.

The existence of political sponsors or key organisational leaders is important in mobilising actors in Portugal. The universe of social solidarity NGOs in general is still characterised by

the strong protagonism of their leadership. One of the most interesting conclusions of recent research (Capucha, 1995) concerns the organisational models that characterise these institutions. These institutions are usually presided over by individuals with a strong personal authority and protagonism, whose leadership is usually extended over the time. The very low level of turn over among the Presidents of the Boards of Directors is one of the indicators for this stability and strong protagonism. This feature is to be found both in the oldest and in the newer organisations.

These individuals, among whom one finds a strong presence of the clergy, usually come from the upper social classes and present high levels of school attainment that not only reinforces their leadership but also facilitates the requirements for voluntary service that usually characterises their work in the institution. The role of the President assumes a major importance not only inside the institution, in the decision-making processes (concerning personnel hiring, patrimonial assets, organisational strategies), but also in the relationship with the outside world. The question of financing is precisely one of the areas in which the President usually has a dominant and decisive role. In fact, in the actual proficiency of the President in accessing financing sources demonstrates, in many cases, one of the main reasons for these long-term mandates.

While the most significant feature in Finland is the strong public and municipal intervention, the establishment of an agency such as the Y-Foundation in Finland (in the mid-1980s) to undertake a particular role in acquiring housing for homeless people where this activity had previously been lacking or not co-ordinated, is evidence of the development of an institutional capacity that may be necessary to facilitate the development of services for homeless people. This illustrates that policy-makers need to be alive to the need to develop institutional capacity as well as to provide appropriate funding to existing agencies.

The growing professionalisation of social work, professional lobbying among social workers and informal co-operation and networking have all been important in the growth in technical competence in service delivery in Austria. Social workers, who began to lobby for the poor and homeless in the 1970s, initiated the foundation of new services and the implementation of alternative methods to treat poor and homeless persons. This innovation of the field of social work developed from a 'rights' based perspective. This bottom up process was continued in the next stage of development when these new facilities started to engage in networking and systematic Austrian-wide exchange when the services for the homeless decided to build up a regular structure for a common devel-

opment of standards and methods. At the end of the 1980's the Austrian umbrella organisation of services for the Homeless (BAWO) was founded. The exchange between services and social workers started with a discussion about definition of homelessness and elementary standards of services for the homeless. This led to a significant shift in policy discourse in relation to homelessness which is reflected in the definition of homelessness developed from these networking conferences and adopted by BAWO (see Table 1).

Having developed in a bottom up manner, operational practice therefore does not fit into a coherent system of provision and services for homeless people. On the contrary each of these innovative provisions is part of different local / regional systems which vary in many respects from each other.

Table 1 The definition of homelessness (adopted by BAWO, 1990).

Homelessness is not just characterized by the absence of appropriate and affordable lodgings but also by a multitude of individual requirements. Being homeless, therefore, is essentially the result of processes of exclusion and impoverishment.

According to this view homelessness is a special kind of combined and cumulated poverty. The absence of appropriate lodgings is joined by other material and non-material situations of marginalisation and scarcity. Together they constitute a differentiated situation of needs and requirements.

According to this the definition by the BAWO (1998a) suggests to distinguish following strains of homelessness:

- > Being acutely homeless means the absence of a flat for oneself, sleeping rough or residing in any kind of emergency accommodation with or without individual support.
- > Imminent homelessness means that the loss of lodging may happen in the near future because one's own resources are insufficient to secure one's accommodation or to prevent the loss of it.
- > Being potentially homeless means that a person lives under conditions of institutional care or custody (probably in prison, in a psychiatric ward etc.) and is not allowed to be released - may be - into probation because of the fact that there is no accommodation - may be - he or she can not leave the institutional treatment in the hospital without to risk homelessness.

The fragmentation of service provision in Greece is evidence of a slow growth of political, institutional and technical capacity. An important organizational problem lies in the on-going difficulties in co-operation between statutory and voluntary bodies and, as a result, many local or small-scale initiatives for establishing services for the homeless fail to flourish. This adverse situation for voluntary action and fragmentation of responsibility at government level is exacerbated by a high degree of dependency on EU funding initiatives that provide no certainty of long-term sustainability for NGOs.

The UK, on the other hand, has a well-developed legislative structure which demarcates state responsibilities for dealing with homelessness. It also has a strong base of voluntary agencies providing a diverse range of services across the country. However, it is only in the last five years that a strong political commitment to the prevention of homelessness has emerged, the evidence of which is embodied in recent legislation. This has occurred in parallel with devolution of political power to Scotland and Wales. Differences in approach have thus begun to emerge both in the development of the legislation and in its implementation. The Homelessness Task Force in Scotland represented all sectors involved in service provision or the evaluation of service provision and led to some fifty-nine recommendations that are being used to guide policy following enactment of the legislation. Thus, in the context of the devolution of political power, political sponsorship that prioritised homelessness as an issue together with a commitment to participation in developing policy has been effective in changing approaches to dealing with homelessness. This has led to an increasing diversity of policy and action within the UK where good practice in one area of the country is not necessarily replicated elsewhere.

Gaps in Service Provision

Gaps in service provision are evident in all five countries, although the nature and extent of those gaps may be characterised differently across the countries.

It is evident in Portugal and Greece that, although service provision is weakly developed overall and is concentrated in the major (and capital) cities, a key gap in service provision lies in the absence of supported housing. Although some transitional accommodation exists for specific groups, this allows only a short transition period (typically four to six months) and often requires the individual to have some form of employment. There is little available support for people to enable them to sustain a tenancy.

The emergence of services for homeless people from a bottom up approach and from the development and innovation within existing social work services in Austria has led to a patch-work quilt of service provision. This is evident in two main features. Firstly, there is simply a lack of services in some regions and especially in smaller towns and rural areas. Secondly, the pattern of service provision is diverse and reflects a particular geography of distinct structures for the planning and funding services.

Recent research in the UK allows us to highlight two aspects of gaps in service provision. Firstly, echoing the Austrian example, there is a particular geography of service gaps particularly in rural areas (see Cloke et al, 1999 and related research). Secondly, the move to a new 'Supporting People' funding model leaves some marginal groups at risk of exclusion from services. Recent research (Watson et al, 2003) suggests that these will include:

- > Complex or multiple needs (e.g. mental health, substance abuse, offending)
- > Hard to reach, resistant to using/receiving services
- > High risk - a danger to selves or others, or at risk from others (including violence and victimisation)
- > Remote from services (e.g. minority communities, private sector housing, receiving informal support).

Evidence from Finland also suggests that there is a lack of services for people with multiple and complex needs.

Funding Provision

Although state services exist in most countries, the predominant pattern of service provision is one of voluntary sector provision and reliance upon the state for funding. This section considers the nature of that funding and how approaches to funding influence the development of service provision. Existing research suggests that we may expect two key trends to be significant in this context. First, decentralisation and public expenditure restraint that occurred during the 1980s and 1990s suggests that lack of resources has affected service provision. Secondly, public sector management has developed private sector approaches including competitive bidding and targeting.. These trends together have a significant impact upon service provision and development in all countries although the specific nature of these effects varies across Europe. The reality for service providers is one of short term funding often won by a bidding process, of funding derived from diverse sources and of funding limited to annual or short time periods thus providing for an uncertain medium or long term stability.

Source(s) of funding

Because of the bottom-up process of service development in Austria, the systems of funding differ across the regions of the country. However, in a recent study, less than a third of services had an elaborated system of funding developed on a regular basis of long-term contracts. Basically this represented the services provided by the “Association for probation and social work” or by associated organisations. The majority of service providers (57%) depended on annual contracts with different partners at federal, regional and local level. This highly insecure funding situation was more noticeable in some counties (Carinthia (87%), Upper Austria (69%) and Nether Austria (67%).

Service providers relied upon multiple sources of funding, on average from about three different sources (average: 2.7). Because the funding of services for the homeless was primarily a matter of the regional laws of social benefit (Sozialhilfe) it was no surprise that in the most cases the counties (69%) and the cities (54%) were clearly over-represented in the funding of the services. The federal government provided funding to only a quarter of the services that came either from proba-

tion and social work or from the office for labour affairs. Almost one-third of services had to rely on their own funds to some extent and the same proportion depended on contributions from charity (31%). The contribution of charitable funding from churches and abbeys varied considerably across Austria with only 4% of the services profiting by direct church funding in some counties to more than a quarter in other counties.

A variety of funding sources have been utilised in the UK to fund services for homeless people. Some support services have been provided by local housing authorities from their own housing or social work budgets. Local authority budgets are heavily dependent on central government funding, with a proportion raised by local taxation (council tax) and are stretched across other key policy areas such as education, regeneration, social care. Some strands of provision are linked to specific initiatives (e.g. RSI). However, through the 1980s and 1990s, both local authorities and housing associations utilised Housing Benefit to fund support services, although it was strictly a benefit to cover rent. This was done by including support service costs within the rent for a hostel or supported dwelling. This practice was increasingly challenged by central government as Housing Benefit costs soared, and was a key trigger for the switch to the Supporting People approach. Within the NGO sector, some organisations providing, say, hostel accommodation, would also have funded support services through Housing Benefit.

NGOs can also raise ‘purely charitable’ funding, according to their capacity to raise public funds. Religious organisations and the well known campaigning agencies like Shelter and Crisis were likely to be particularly successful in attracting voluntary donations as well as private/business donations, and would be accountable only to their own committees and the charity commission (if registered) for how such money was spent. Some NGOs may receive grant funding direct from local authorities, and would have to account to authorities for this expenditure. NGOs have also increasingly benefited from access to central government ‘challenge funding’ through a bidding process (e.g. RSI and New Futures funds). Such funds come with very specific constraints on expenditure and on monitoring as part of a partnership arrangement, but resources can be substantial. NGOs are likely to operate on the basis of a combination of funding

streams for different aspects of service provision and budgeting can become highly complex, with significant proportions of management time spent applying for new and continuing funding, as well as on reporting to different funding agencies.

State dependency best describes the funding pattern of most social solidarity NGOs in Portugal, among which the service providers for the homeless population are included. However, the funding of third sector organisations has to be understood in the context of the importance of the dependency on the 'leader', which is discussed above, and the importance of this leadership role in securing funding for the organisation.

The relationship with the State - the main financial supporter of most activities developed within the institutional context - is a vital component of the organisation and functioning of social solidarity organisations. The channelling of funds towards the activities is usually made through the Social Security system. Most of these NGOs have a specific status - the so-called Private Institutions of Social Solidarity (IPSS). Created as non-profit making organisations they are recognised by the State through a record in a specific department within the Social Action. Their public utility recognition being granted, they automatically have access to a range of benefits (i.e. fiscal benefits). Apart from these benefits their activities are directly supported through the establishment of agreements with the Regional Centres for Social Security, under the scope of social action.

The municipalities can also be an important source of funding for many of these organisations, although mostly for ad hoc initiatives. In the relationship with the local authorities it should be stressed that political shifts at a local level can make a big difference in the channelling of resources to different organisations.

“To the strong presence of social initiatives linked to the Catholic Church has, in recent years, been added the creation of other initiatives of citizens in the field of social provision (namely the co-operative movement and parents' associations). One might say that, in spite of the overall contribution of these initiatives (namely in number and diversity of activities), their existence is strongly rooted in the state support, a circumstance that may rise questions on their real autonomy and on the identity of “other” interests.” (Rodrigues and Stoer, 1998: 96).

Other less relevant sources of financing have also been identified: private donations and sponsorships, including resources in kind, legacies, own income, public-raising campaigns and EU co-funding for specific projects and activities. In some areas the contribution of the users is also an additional source of funding.

In Greece, central government provision of services for the homeless is funded by the Ministry of Health and Welfare. Although local government service provision has historically been weak there is an emerging development of services for some groups (domestic abuse, day centre for the homeless and accommodation projects) that are being funded by municipal levels of government (although this is still predominantly in Athens). Although the voluntary sector receives some funding from the Ministry of Health and Welfare there is still reliance upon church and charitable donations. The majority of services run by NGOs in recent years operate using EU funding.

According to the Nordic welfare model social housing and social and welfare costs are funded mainly by central government (by transfers) and by the municipalities (own revenues). Decentralisation to municipal authority level, since the 1980s, has placed an emphasis on municipal funding of homeless services in recent years. In the social welfare and health care field Finland's Slot Machine Association plays an important role as a funder of voluntary organisations (although services funded in this way are normally intended to be short-term projects). However, as a proportion of the income of voluntary organisations this is, on average, much less than that received from the municipalities. The churches in Finland perform a similar role to that found in other countries. The Evangelical Lutheran Church of Finland provides a large variety of services for vulnerable people (although not accommodation services). Since 1994 the Y-Foundation, the Finnish Association for mental health, local associations for mental health and local authorities arrange housing and support for people with mental illness (mainly in the seven southern municipalities). The Y-Foundation arranges dwellings with funding from the Housing Fund, the Slot Machine association and the local authorities.

Because expenditure on social welfare and health care services are the largest item of municipal expenditure, the cuts in expenditure have been the largest in these services. However, there has been no research to date to confirm what impact, if any, this has had on services for homeless people although the City of Helsinki has recommended that the Special Welfare Office should achieve cuts in their costs of substance abuse services this year.

Issues of reliability and continuity

It is apparent that service provision, development and innovation are affected by financial uncertainties in all countries although the nature of these uncertainties varies. A common pattern is the provision of services by NGOs who are reliant

upon multiple sources of funding, or packages of funding, within an overall dependency upon central or local government finance. In addition, competitive bidding for finance that is time-limited, either to specific programme or budget cycles, is a typical scenario that we may expect will also affect continuity and quality of service provision.

In Austria and Greece, in particular, only a minority of services have any regular funding streams and these rely on multiple sources of finance. In Austria, forward planning is made more difficult by the annual and detailed nature of commissioning contracts with different partners at federal, regional and local level. In Greece, the increased reliance on EU funding threatens the sustainability of services for whom no commitment to replacement funding has yet been agreed by central or local government.

Recent expenditure constraints and local decision-making are impacting on services, though in different ways, in Finland and in Portugal. In Finland, services which are not regulated by law, like support in ordinary housing, are not properly developed, partly due to financial constraints. There are some support projects but their coverage is small. Some local authorities pay an annual fee to the Finnish Association for mental health for each supported person. Written annual contracts define these responsibilities and levels of funding. In Helsinki all the supported persons are homeless clients of the Special Social Welfare bureau and the local authority pays an annual fee per person for the professional housing support received from the Settlement Association. In Portugal, reasons for dissatisfaction in accessing financial resources mentioned by service providers in a recent study included: recent constraints in the financial support received, bureaucratic obstacles linked to the lack of sensibility of public entities to the specificity of the population, very scattered financing and the lack of co-ordination in the granting of subsidies to different organisations in the same area. The demand for a reinforcement of the State's role in financing (referred to by over 60% of the institutions) is stronger among medium sized organisations. Larger organisations, long established in Portugal, and usually from a catholic origin, have stronger possibilities to diversify their financing sources while smaller sized organisations (with less than 5 workers) are more willing to look for other sources of financing as an alternative/complement to the State's funding reinforcement.

In the UK, Supporting People separates the costs of care and support from the costs of accommodation through a 'single pot' of money to cover all housing related support services across all client groups. However, local authorities expressly have to work in partnership with Probation/Criminal Justice

and Health Services in delivering Supporting People. Homeless people are one of many groups competing for the resources available through Supporting People, and service providers need to provide evidence of the need for their services to be funded.

Within the devolved government of the UK, the Scottish regulations distinguish between Supporting People services and personal care. However, homeless people may receive lower priority in the Scottish task-based approach, compared to the English criteria which specifically refer to homelessness. Further, the strong orientation towards delivering services to 'ordinary housing' in both systems may tip the balance of service provision away from street homeless people and those in temporary accommodation, to those who have gained a tenancy (e.g. recently homeless people). This outcome would, however, run counter to the strategic approach required for responding to homelessness at all points in the process.

While Supporting People has created an opportunity for allocating funding to groups who had not been prioritised under the previous Community Care regime (e.g. those with mental health problems or substance abusers), the bureaucracy of the system could still put clients off engaging with services. Expanding services to harder to reach groups (often delivered by NGOs) has often meant greater management and financial risk and it is not clear that budgets will be sufficient. The emphasis on delivering services to ordinary housing has the potential to help homeless people but there remains difficulties in providing intensive or complex support packages (Watson et al, 2003).

Service providers were realistic about initial difficulties were but keen to achieve improvement in service provision (Watson et al, 2003). They expressed concern regarding budget limitations and a lack of scope to enhance resources by reshaping existing provision, highlighting the pressures in a cash-limited, competitive system. Following a 'pot-sizing' exercise, each authority receives a fixed budget per annum, for allocation across services.

Overall, it is still too early to ascertain whether homeless service providers, and indeed their clients, have been winners or losers in the allocation of Supporting People funds. While many in the sector accept the wisdom of separating housing and support costs, the fear has been that the new single pot will not be big enough to maintain, let alone extend service provision. Outcomes of the allocation process and the implications for service delivery for homeless people will be a key focus for future research and evaluation, along with the impact of local homelessness strategies and the survival (or otherwise) of other budget headings for homelessness services.

Regulation and Standards

Regulation of homeless services may be implemented as part of a national system of social service regulatory frameworks or it may be associated with specific programmes or funding mechanisms. This section considers the extent to which different funding approaches, and the conditions attached to that funding, and specific regulatory mechanisms have influenced the quality and effectiveness of service provision. On the one hand, we may expect that unreliable and inadequate resources will have a detrimental effect upon service development and quality and hence on overall effectiveness of services in alleviating or reducing homelessness. On the other hand, we may expect that state funding will require a minimum standard of provision and accountability that allows for monitoring and evaluation of services to guarantee effectiveness and value for money. It is clear, however, from our overview of the situation across Europe that there is very little information available on the effectiveness of services that draws upon regulation and funding guidelines or upon guidance on standards of service quality.

Different forms of evaluation and monitoring need to be distinguished. These include, state or independent evaluation or regulation to ensure protection of vulnerable groups and maintenance of norms of behaviour and services. This may occur through legislation and be independent of any state funding provision for services. Secondly, there can exist regulation and evaluation or monitoring procedures that are tied to specific funding and commissioning procedures. Thirdly, there are normal business monitoring and evaluation procedures internal to the organisational structure that are intended to ensure that the organisation achieves its objectives and reacts to changes in the external environment. Evidence of each of these forms of regulation through evaluation and monitoring occur in all countries.

In Greece, for example, although the State provides only limited financial support to service providers, there is an established and recently enhanced system of regulation for agencies providing services to vulnerable groups. The Ministry of Health and Welfare provides a licence for the operation of services of the private and voluntary sector and records them in a special register. The Ministry is responsible for the inspection and supervision of all statutory, voluntary and private ser-

vices falling within its domain. Recent legislation has also introduced a number of external, independent inspection and control mechanisms, with a view to preventing mal-administration or any violation of the rights of service users, ensuring compliance with legislation and with quality-standards set by the law, and providing an overall supervision of public services. These inspecting bodies are:

- > The Body of Inspectors of Health and Welfare Services belonging directly to the Ministry of Health and Welfare. (Law 2920/2001). This body authorised to inspect the operation of all health and welfare services whether run by central government, local government or any NGOs.
- > The Citizen's Advocate (the Greek "ombudsman"). (Laws 2477/1997 ch. A, 3094/2003). The revised Constitution of 2001 and revised law for the operation of the Citizen's Advocate (Law 3094/2003) introduce a new section, which has recently launched its operation, dealing with the protection of the Rights of Children against any violation, including violations of rights or other problems that may arise within the system of statutory child-care services.
- > The Department for the Protection of the Rights of the People with Mental Disorders within the Ministry of Health and Welfare, as well as the Committee for the Protection of the Rights of People with Mental Disorders, as a subsection of the Committee for the Protection of the Rights of Hospital Patients (Law 2716/1999, article 2) are responsible for the protection of basic human rights of people with mental disorders.

In addition to the above, recent legislation relating to the structure and responsibilities of the various sub-divisions of the Ministry of Health and Welfare has introduced a special Department for the Protection of Vulnerable Groups as a sub-division of the Ministry's Directorate of Social Awareness and Solidarity (P.D. 95/2000, art. 22, par.2a). The responsibilities of the Department for the Protection of Vulnerable Groups include:

- > the development and implementation of programmes and special measures for the social protection of individuals or groups in a state of emergency due to natural disasters or other unforeseeable occurrences
- > the development and implementation of programmes of social protection or financial assistance of people in finan-



cial need, of people socially maladjusted (tramps or beggars), of Greek repatriates as well as people fleeing to Greece from other countries under threat of violence or because of other emergency, as well as of other vulnerable population groups

- > the evaluation of proposals regarding the need for general or specific measures for securing suitable accommodation to families that are homeless or live in unfavourable conditions and are economically unable to secure accommodation by their own means as well as the introduction and implementation of programmes of housing assistance
- > the housing resettlement of victims of natural disasters who are not included in programmes of the Ministry of the Environment, Urban Development and Public Works (YPEHODE)
- > the supervision of the progress of housing projects currently under way

An important feature of this legislation in relation to homelessness is that it explicitly recognizes homeless people as a vulnerable group and renders the state responsible for their protection and assistance. However important this may seem on the level of policy, however, what its implementation will amount to in practice remains to be seen.

On the other hand, regulation in Austria and the UK is more specifically implemented through funding regulation. Funding and commissioning mechanisms provide eligibility criteria that establish standards regarding levels of accommodation, staffing and related matters. In Austria, the registration of services has led to a strict definition of targets and target groups and sets down basic standards to be achieved. The funding contracts in many counties often require documentation in relation to matters such as length of stay and standards of success.

Arguably, the homelessness sector in the UK, has escaped regulation for longer than other aspects of the housing service which have faced more rigorous scrutiny. A number of bodies are charged with the regulation of standards of service provision to homeless households, often linked to funding frameworks. New single regulatory frameworks have recently been introduced for UK housing providers. The Audit Commission's Housing Inspectorate now regulates local housing authorities and housing associations in England, while in Scot-

land this role now lies with Communities Scotland. Where local authorities fund voluntary sector organisations, those agencies will be accountable to the authority for expenditure of grant aid, though it may be only one of many funding sources. Specific initiatives such as the Rough Sleepers Initiative require extensive documentation to evaluate progress measured against established targets and standards.

Support services funded through social work services have traditionally been regulated separately from those funded through housing agencies. The Supporting People programme is partly designed to simplify and streamline the funding of housing related support services. However, the Care Standards Act 2000 in England and Wales and the Regulation of Care Act 2001 in Scotland provide the legislative basis that underpins the registration and inspection of health and social care. This legislation covers most client groups and supported housing as well as day care services; thus it includes residential accommodation for people with a drug or alcohol dependency or a mental illness subject to the legislation. Generally, it is the housing support service, rather than simply the accommodation, that is regulated. However, in Scotland (in contrast to England and Wales), support services in homeless accommodation such as temporary housing or homeless hostels will be included in regulation and, in these situations, the regulator will have an interest in the accommodation facilities (where no tenancy exists) although guidance under the legislation is still emerging.

In Portugal, the lack of evaluation both at an internal level and externally is one of the most urgent needs in order to improve the quality of service provision and the adequacy of resources. In Finland, services owned and run by the municipality are regulated under the Social Welfare Act, which regulates all the social services. Further more some services used by homeless people are also regulated under the Act on Services for Substance Abuser. However, the majority of the hostels for homeless people are run by voluntary organisations or private entrepreneurs. If the hostel is run as an accommodation business, it is subject to regulation as a business under a decree governing 'accommodation and restaurant business' rather than under the Law of the Supervision of Private Social Welfare Provision. This appears to be an anomalous situation that is under review.

Homelessness

Policy and Planning

The development of service provision and the improvement of effectiveness in services rely upon an integrated and coordinated planning of services and reliable and stable funding. There is a clear division in this respect between the countries under consideration.

From our discussion so far it is evident that there are countries that have a strong intervention approach (Finland and the UK), and countries with a weak intervention regime (Portugal and Greece). Austria appears to lie between these two extremes with a weak history of federal intervention in homelessness and a diverse experience at the level of regional governments with both strong and weak intervention strategies in evidence.

Social planning in Austria in the area of housing policy in general and / or the services for the homeless did not exist until the end of the 1990s. Development of planning mechanisms has occurred differently across the country. Several specific planning models are discernible.

a. Restrictive model of planning (e.g. county of Salzburg): inflexible funding schemes in the whole range of the social services and infrastructure. As one consequence all services for the Homeless were registered in a planning process that was more of a controlling process than headed on development and / or improvement of standards. The registration of services led to a strict definition of targets, target groups and basic standards like qualification of the professionals as well as how these services were to be provided. Until now the system of social administration and planning is an instrument of control, to prevent changes and development which are lead by bottom up processes. Changes in the general direction of development depend on administrative and / or political decisions. The actual role of services and social workers in the process of social planning is very limited. Services for homeless are developed on a strict contract and commissioning framework.

b. The “social fund” (county of Vorarlberg): Social planning and regulation of services in the county of Vorarlberg is unique in Austria. There is a very specific framework provided which consists mainly in the implementation of an administrative board, dealing with the “social fund”. The administrative body of this social fund consists of representatives of the three relevant partners of social policy and administration: the public authority of the county, the cities and villages which spend a high share of the money into the fund, the private organisations which are responsible to carry out the social services. In this way the services for the homeless are an integrated part in a democratic procedure of fact finding and decision making about services, provisions and standards.

c. A participative model of planning (Upper Austria): in this process the providers of social services including the services for the homeless were integrated partner in a participative project and were therefore invited to fill in their expectations and needs. This project of amendment is finished now and there is a new basis for the role of NGO service providers in the process of systematic exchange, discourse about changes of needs and frameworks for social services.

d. Systematic planning and regulation (Vienna): the implementation of a social planning body is established where all the projects and directives of development are gathered and led together in an adjusted and planned manner. One of the most important aspects of this planning initiative by the city of Vienna is the fact that the social planning office has now the responsibility to undertake the yearly evaluation of the services for the homeless. An important aspect of this approach has emerged to implement the re-provisioning of the large traditional and problematic institutions (like the Meldemannstraße), to a modern system of small-scale supported housing and therapeutic residential homes. Social planning in Vienna is integrated in a network of the existing services which are provided by NGOs and therefore is an intermediary partner in the development of services, standards and methods.

Finland has developed two programmes to combat homelessness. The first program was undertaken in the late 1980s and, more recently, the programme for the period 2001-2003. The memorandum, on which the latter programme was based, was prepared by a working group convened by the Ministry of the Environment and included representatives of NGOs in the planning process. The aim of this recent program is to stem the spread of homelessness and to bring about a downturn in the number of homeless people by 2004. It is aimed to produce 4,000 new dwellings for the homeless in the capital region. The program also assesses the need for extra care serviced accommodation and it will develop supporting services for homeless people and other vulnerable groups. In order to enhance the effectiveness of services, the programme has established co-operative bodies consisting of representatives of municipalities, service providers, the third sector and owners of rental apartment buildings in the major growth regions. The decision about joint action in the greater Helsinki area resulted in a specific joint action contract which representatives of central government and local authorities co-signed. The programme has been extended to 2005.

The post 1997 homelessness policy review across the UK has now enshrined the strategic approach to homelessness in key legislation for Scotland and for England and Wales. That is to say, local housing authorities need to make a strategic assessment of homelessness and support needs in their areas, and to devise and implement a co-ordinated response. In England, the Homelessness Directorate within the Office for the Deputy Prime Minister (ODPM) now co-ordinates homelessness policy. Homelessness policy is fully devolved to the Scottish Executive while the Welsh Assembly has some influence over homelessness policy and practice.

The Housing (Scotland) Act 2001, extended the duties of Local Authorities to the provision of temporary accommodation for non-priority homeless households. This marked a significant enhancement of the rights of mainly single homeless people in Scotland. The Act also required Local Authorities to undertake a review of homelessness in their area and to develop a homelessness strategy. The Homelessness, etc. (Scotland) Act 2003 radically overhauls and amends the existing law (Chartered Institute of Housing (Scotland), 2003). In a further

widening of local authority responsibilities, the Act extended the categories of priority groups (enshrining much of what was already recommended good practice) and made provision for the gradual abolition of the priority/non-priority divide. It also introduced changes to the test of intentionality and a duty to provide some accommodation for intentionally homeless households. There were also powers to modify local connection and changes to the rules regarding asylum seekers.

The Homelessness Act 2002 applies to England and Wales and strengthened the homelessness safety net but it also moved the focus of local authority duties towards prevention rather than crisis intervention. The Act placed a new duty on all local housing authorities to carry out a review of homelessness in their district and to adopt and publish a homelessness strategy. Statutory guidance to assist authorities in this work was also issued in 2002.

The strategic approach implies co-ordination across agencies at national and local levels. Strategy is led from central government departments in London and Edinburgh, but local housing authorities will be key to planning and service delivery, irrespective of their political complexion in comparison to that of the national government. In short, they may have less discretion than under previous regimes. While the 1977 legislative framework was largely responsive, that of 2001/2 is explicitly proactive.

It is to be hoped that the overall aim of the strategic approach is to improve the quality and delivery of housing and support services for homeless people. In the new model, this implies joint working and the strategic approach does hinge on central co-ordination of partnerships across statutory and voluntary sector agencies. Voluntary sector agencies will ever increasingly find themselves drawn into formalised partnerships within these local authority led strategies if they seek to play a key role in service provision and to gain access to associated funding streams. In short, while there may be a process of consultation and negotiation, the role they are prepared to accept will determine both access to funding and the degree of regulation to which they will have to subscribe. In turn, this will effect monitoring and evaluation of the effectiveness of the agency's service provision.

In theory, strategic planning should always be directly linked to budgetary control. Therein lies one of the key weaknesses in the UK's strategic approaches to homelessness. Budgetary frameworks have not necessarily been revised in line with the frameworks for service planning. Indeed the range and complexity of funding sources, combined with their short term nature in many cases, has been a key issue of consternation of NGOs seeking to deliver services to homeless people.

There are effectively no national or integrated systems of planning of services for the homeless in Greece or Portugal. In Greece, there are no housing authorities or public authority dealing with housing and homelessness and thus no planning of services or needs assessment. In Portugal, although there is no government planning process, some emerging initiatives may point to an evolving integration of strategy. In Lisbon, a

new municipal plan has recently been launched called the *Plano Municipal de Prevenção e Inclusão de Toxicodependentes e Sem-Abrigo* (PMPITS) [Municipal Plan for the Prevention and Inclusion of Drug Addicts and Homeless] aiming at the “co-ordination of all services providing support to this population” and at the same time “getting people to join a reinsertion programme, that goes through training, employment and, at a later stage, permanent re-housing”. The Plan has been publicly presented and several meetings have taken place involving most of the NGOs working in the field in the city of Lisbon. At the same time the Plan is also integrating different public bodies (ministries) with responsibilities in the area of employment, health, social security and housing. The Plan is divided into three main programmes: a) the primary prevention programme; b) the secondary prevention and inclusion programme; c) support programme to non-included population.

Conclusions

This report provides a baseline description of the development of service provision for homeless people in the five countries under consideration. This provides a framework for future reports which aim to consider the organisational structure of service providers and issues of multi-agency working and, in the final report, the effectiveness and outcomes of services. It has not been possible, in developing this baseline, to fully articulate a comparative perspective; this will be developed in future reports. However, some general trends can be highlighted.

Firstly, the welfare regime typology frequently referred to by Esping-Anderson and others does not provide a good predictive or explanatory model of service development in the different countries considered here. This may in part be explained by the weak role of the state in provision of services for homeless people and in part by the recent evolution of services, from the traditional emergency level of provision, in many countries. Secondly, there is some evidence of a convergence of policy discourse, objectives of service provision

and approaches to implementation. This is reflected in the fact that homelessness is perceived to be more than simply rough sleeping and is coming to be understood, within the perspective of social exclusion, as a more complex problem affecting a range of vulnerable people. This change in policy discourse recognises the need to respond to both the housing and the social welfare dimensions of the problem. This in turn is reflected in an increasing diversity of providers and in a mix of generalist and specialist services, although the nature and pace of this evolution varies between the countries examined. Thirdly, the provision of services in most countries (with the possible exception of Finland) relies on the voluntary sector which, in turn, relies heavily upon public sector funding (though to a lesser extent in Greece). This is true even in countries such as the UK and Finland where statutory obligations to provide services for homeless people result in a mix of public sector provision and purchase of services from the voluntary sector. Fourthly, services rely upon multiple sources of funding which is often targeted and time-limited. This affects service planning, innovation and quality of services.

It is more difficult to identify common trends in relation to issues of regulation and planning of service provision. It is arguable that, services for homeless people provided in the main by voluntary sector agencies are not subject to strong external regulation in most countries. Regulation occurs mainly in respect to the criteria of eligibility for funding and the achievement of specific funding targets. Regulation in relation to preservation of the rights of users or the maintenance of minimum standards of service provision is less well developed or has only recently been introduced. There is a marked difference between the five countries in relation to the role of the state in planning and co-ordination of services for homeless people. In the UK and Finland there is a more direct level of intervention through the provision of central government and/or local authority strategies for homelessness. In Austria different models of planning are evident in each of the regions of the federal state. In Portugal and Greece, there remains no clear role for the state in providing a coherent strategic framework of planning for the prevention or alleviation of homelessness.

Each of the five countries examined demonstrates significant features of service provision that we can identify as characteristic of that country. This illustrates the diversity of service development. Austria is characterised by a bottom-up development of services that has resulted in diversity between the regions and in a strong role for the umbrella organisation - BAWO - in relation to developing models of good practice. In Finland, the strong role given to municipalities has also led to a diversity of provision within the country at the same time that the share of voluntary sector has been increasing in the

service provision. Reliance on the voluntary sector varies in different municipalities. However, services for homeless people are provided in Finland as a part of the municipal structure of social welfare and municipal housing services which means that they are produced under a coherent service structure covering the whole country. The earlier direct central government direction of the homelessness programme of the late 1980s and early 1990s produced instruments to estimate the extent of homelessness in each municipality and it was on this basis that the need of the services is assessed in many municipalities. Recently, a new programme has been initiated under the direction of the Ministry of the Environment (and including all key actors) to reduce homelessness especially in the growth region of Helsinki. However, this programme does not include direct instruments to steer the municipalities. Greece is characterised by the twin features of fragmentation (lack of co-ordination and related organisational deficiencies) and a lack of resources. The lack of funding reflects the weak role and lack of commitment from central government. In Portugal there has been a clear shift from the dominance of 'confessional' services to an increasing role of 'non-confessional' services and an embryonic development of the state role in funding services. In the UK, a key feature has been the shift from a housing perspective of the problem towards a co-ordination of housing and support underpinned by the development of a single funding program to support people to live independently in the community. These developments have been paralleled by the legislative requirement for local authorities to provide homelessness strategies to improve the co-ordination of strategic planning for services to prevent homelessness and to provide for the re-settlement of homeless people.

REFERENCES

- Anderson, I. (2003) Synthesizing Homelessness Research: Trends, Lessons and Prospects, *Journal of Community and Applied Social Psychology*, 13:197-205.
- Anderson, I. and Christian, J. (2003) Causes of homelessness in the UK: a dynamic analysis, *Journal of Community and Applied Social Psychology*, 13:105-118.
- BAWO (1998) *Services for the Homeless in Austria*, BAWO Vienna
- Burrows, R. (2003) *Poverty and home ownership in contemporary Britain*. Bristol: The Policy Press.
- Capucha, L (ed) (1995) *ONG's de solidariedade social: Práticas e Disposições*, Cadernos REAPN, Rede Europeia Anti-Pobreza, Porto.
- Chartered Institute of Housing (Scotland) (2003) *Homelessness etc (Scotland) Act 2003. A briefing from the Chartered Institute of Housing in Scotland*. Edinburgh: CIH.
- Cloke P, Milbourne P and Widdowfield R (2001) 'The Geographies of Homelessness in Rural England', *Regional Studies* vol 35 no 3 pp23-37
- DETR (2001) *Supporting People: policy into practice*. London: DETR
- Edgar W, Doherty J and Mina-Coull A (1999) *Services for Homeless People: innovation and change in the European Union*, Policy Press, Bristol
- Edgar W, Doherty J and Meert H (2002) *Access to Housing: homelessness and vulnerability in Europe*, Policy Press Bristol
- Esping-Andersen, G. (1990) *The three worlds of welfare capitalism*, Cambridge: Polity Press.
- Esping-Andersen, G. (1999) *Social foundations of post-industrial economies*, Oxford: Oxford University Press.
- Jenkins P and Smith H (2001) 'An institutional approach to analysis of state capacity in housing systems in the developing world: case studies in South Africa and Costa Rica' *Housing Studies* vol16 no 4 pp485-508
- Jessop, B (1994) 'Post-fordism and the state' in Amin A (ed) *Post-Fordism: A reader*, Oxford Blackwell pp251-79
- Jones, A., Pleace, N. and Quilgars, D. (2002) *Firm Foundations: An evaluation of the Shelter Homeless to Home Service*. London: Shelter.
- Julkunen, R. Suunnanmuutos, 1990-luvun sosiaalipoliittinen reformi Suomessa, Osuuskunta Vastapaino, Tampere 2001
- Kaukonen, Olavi. Päihdepalvelut jakaantuneessa hyvinvointivaltiossa. Helsingin Yliopisto, Valtiotieteellinen tiedekunta, STAKES, Tutkimuksia 107. Saarijärvi 2000
- Kärkkäinen, S.-L. (ed.). Homelessness in Finland, STAKES, Feantsa Group in Finland, Housing Fund of Finland, Y-foundation. Jyväskylä, 1996
- Kärkkäinen, S.-L. Housing Policy and Homelessness in Finland, in Avramov D (ed.): *Coping with homelessness: Issues to be tackled and best practices in Europe*, Ashgate, Aldershot, Hampshire 1999
- Kärkkäinen, S.-L.; Hannikainen, K.; Heikkilä, I. Services for Homeless People: The Policy Context from the 1960s Until the Present Day and Two Examples of Innovative Services, STAKES, Themes 2/1998. Helsinki. 1998
- Kennedy, C., Lynch, E. and Goodlad, R. (2001) *Good practice in joint/multi-agency working in homelessness*. Homelessness Task Force Series. Edinburgh: Scottish Executive Central Research Unit.
- Office of the Deputy Prime Minister. (2002) *Supporting People Directions and Grant Conditions*. London: ODPM.
- Pryke M and Whitehead C (1995) *Private finance and the risks of social housing provision*, Discussion Paper 46 Cambridge Department of Land Economy, Cambridge University
- Rodrigues, F and Stoer S (1998) *Entre Parceria e Partenariado*, Celta Editora, Oeiras.
- SCSH (Scottish Council for Single Homeless). (2003) *Streets Ahead: The national guide to leaving home and housing for young people in Scotland*. Edinburgh: SCSH.
- Sousa Santos, B and Hespanha, P (1987) "O Estado, a Sociedade e as Políticas Sociais: o Caso das Políticas de Saúde", in *Revista Crítica de Ciências Sociais*, nº 23.
- Watson, L., Tarpey, M., Alexander, K. and Humphreys, C. (2003) *Supporting people real change? Planning housing and support for marginal groups*. York: Joseph Rowntree Foundation.

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