
Revisiting the Concept of Shelterisation: Insights from Athens, Greece

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› **Abstract** _ *This paper reflects on findings from a recent study on the provisions for homeless and poor people in Greece. The paper revisits the concept of 'shelterisation' and assesses whether it can be usefully employed, albeit with certain modifications, in the current discussion of urban and social policy responses to poverty and homelessness. Using Athens, Greece as a case study, we comment on policy changes in Southern European welfare regimes and the countries most affected by the current financial crisis. We argue that shelterisation forms an integral part of an emergency model for managing the social effects associated with the sovereign debt crisis and austerity, we highlight criticisms of the concept and we set out alternatives that have been suggested by service providers and civil society organisations.*

› **Keywords** _ *Shelterisation, Greece, homelessness, social exclusion, social policy*

Introduction

Homelessness as a social policy issue in Europe, in general, and in the crisis-ridden countries of the south, especially in Greece, has only recently been recognized in the context of the prolonged economic crisis. Data from recent FEANTSA reports (2012) emphasize the dramatic increases (25-30 percent) in homelessness in those countries most affected by the current crisis – namely, Greece, Portugal and Spain. This paper reflects on the findings of recent research, which was conducted in 2014, aiming to assess the magnitude of different forms of homelessness and housing deprivation in Athens, by using participative methods and a variety of sources (Arapoglou and Gounis, 2014). The core of the research was a survey of the largest and most significant shelter providers in the wider metropolitan area of Athens.

Representatives of local authorities, the ministries of Health and Employment, the Greek Housing Network and the Greek Anti Poverty Network were invited to participate in two workshops; in the first we discussed the research tools and in the second we discussed the results. We compiled a comprehensive list of forty organisations; they were approached and we received responses from twenty-five of them. Amongst those unable to respond were the welfare agencies of the Church of Greece, some charities administering community homes for children and juveniles, and one shelter for asylum seekers.

The twenty-five organisations that completed our survey were implementing a total of 77 projects of direct assistance, addressing the needs of approximately 120,000 people; these included 30 housing assistance schemes and 47 schemes providing access to other elementary resources. The survey collected a variety of diverse data including the number of accommodation units; the type of services offered and the numbers of individuals accommodated and/or served in 2013; and data on shelter capacity, costs, sources of finance and personnel. In addition, open questions were asked in an effort to capture the effects of austerity on both the organisations and the people they serve.

Inevitably, survey data are confined to those in contact with services, as a result of which some populations that do not have access to services are underrepresented. To address this gap, we included specific questions on rejection rates and capacity utilisation.

Additionally, we conducted fourteen in-depth interviews with directors and administrative personnel in shelters, clinics and day centres, and four interviews with central administration organisations: the National Centre of Social Solidarity and the Ministry of Employment. Three case studies of NGOs examined the challenges to expanding supported housing schemes in Greece. In focus groups, personnel

from each organisation explored their experience of the daily operation of shelters and the applicability of supported housing schemes to the complex needs of homeless people.

The research has also contributed to the consolidation of a database through combining various sources that map the spatial distribution of various levels of housing inadequacy and insecurity. The database combines variables mainly derived from the registries of mental health and welfare agencies in Greece, the reports of the Greek Ombudsman and the 2011 census on population and housing conditions, which, despite its limitations, is a valuable source of information for devising indicators to enrich the ETHOS categories on inadequate and insecure housing (for a relevant discussion in Europe, see Baptista *et al.*, 2012).

Adapting the ETHOS typology developed by FEANTSA, our findings demonstrate a significant rise in visible homelessness and an excessive magnitude of hidden poverty, housing inadequacy and insecurity. These are generating demands that can barely be met. A total of 17,800 people were estimated to have been in the ETHOS categories of rooflessness and houselessness during 2013 in the wider metropolitan area of Athens. However, this figure is only a fragment of the whole picture; in a metropolis of 3.8 million people, 305,000 Greek and 209,000 foreign nationals in private rented accommodation are at risk of poverty and social exclusion, as defined by Eurostat. A total of 514,000 individuals can be taken as an estimate of those in insecure and inadequate housing, whose trajectories into and out of visible homelessness are affected by strict regulations for the receipt of assistance and complex societal processes, which shape access to secure housing, income and community care. Significantly, the demand for assistance comes not only from people on the streets but from an invisible population in insecure and inadequate housing, whose needs can hardly be met by existing and newly funded shelters.

Compared to the last decade (Arapoglou, 2004; Sapounakis, 2004), these numbers indicate a rise for all the ETHOS categories of homelessness. The increase in the numbers of those in the roofless and houseless categories is moderate and largely due to the establishment of new emergency and crisis related structures. Alarming, however, it has been reported that for those in these categories, the conditions of their exclusion have worsened – especially as regards their physical and mental health conditions. Most significantly, the figure for those in insecure and inadequate housing has doubled since the early years of the 2000s. Comparison of our recent findings with similar studies in the past also reveals that the demographic profile of the serviced population has changed and includes more Greeks, because the dramatic rise in housing insecurity due to unemployment is now coupled with the loss of insurance coverage and income. At the same time, our research confirms

reports by international human rights organisations and FEANTSA (2012) on the degrading conditions in which refugees and asylum seekers are forced to subsist in prisons and detention centres, on increased coercion by the police and on violence perpetrated against them in public spaces.

The aims of this paper are to reflect on the inadequacy of new, crisis-related and older provisions for homeless people in Athens, to highlight changes in social policies for homeless and poor people in Greece, and to look at these from a comparative perspective. A key concern is to revisit the concept of 'shelterisation' and assess whether it can be usefully employed, albeit with certain modifications, in the current discussion.

The Management of Homelessness and Shelterisation: North American and European Versions

'Shelterisation', a type of institutionalisation specific to homelessness, refers to the effects of prolonged dependency on institutional regimes that tend to colonize a homeless person's everyday routines in ways that render long(er)-term life paths and objectives impossible even to contemplate. Contrary to what may appear the obvious meaning of the term, we view shelterisation as a structural condition (Hopper 1990; Gounis, 1992a; 1993), rather than a personal, subjective state of apathy and resignation (Grunberg and Eagle, 1990). Since first used in the 1980s, the term has been associated with the large shelters that sprang up in US cities in the face of a dramatic rise in visible homelessness (Dear and Wolch, 1987; Gounis, 1992a). In line with Goffman's commanding analysis of what he calls 'total institutions' (1961), there is ample documentation of the ways in which these settings, as well as the wider array of emergency services for homeless persons, capture the time and exhaust the energy of those that have to stay there (Gounis, 1992b; Lovell, 1992; Desjarlais, 1997; Marcus, 2003). In the US, use of the concept of shelterisation gradually receded as community interventions and housing-led solutions grew in strength. Yet, in reviewing newer forms and functions of shelters in Los Angeles, DeVertuil (2006) documented a diffused shelter system, which functions to subtly conceal visible homelessness, and a hands-off local policy that shifts the direct provision of sheltering to the voluntary sector.

Thus, it may be instructive and relevant to current conditions in Europe to point out that the essential features of shelterisation involve more than the specific institutional settings. First, as already mentioned, shelterisation is generated by an emergency-oriented system of limited, inadequate and/or inappropriate resources that homeless people have to compete for. Second, in times of crisis, the whole circuit of agencies and services for the homeless – a whole 'homelessness industry'

– ends up functioning as an abeyance mechanism (Hopper and Bauhmol, 1994), which either endlessly ‘prepares’ people for re-integration (for example, through training programmes for non-existent employment opportunities), or, alternatively, stores them away, out of sight, in ‘specialized’ facilities. Third, in a combination of the above, the emergency-minded orientation of institutional responses, whether public or private (e.g., NGOs), renders both providers and ‘clients’, the servers and the served, unable or unwilling to consider pathways to exiting homelessness other than a gradual trajectory along a continuum of care that aims to build ‘housing-readiness’ (in contrast with the Housing First model developed by Pathways to Housing – see Tsemberis, 2010). Using evidence from our study of homelessness in Athens, we explore whether these features of shelterisation continue to dominate the urban landscape across which homeless people and services are distributed.

Our understanding of shelterisation is placed within a historical context of broader social policy changes that have an effect on the competencies and initiatives of homeless service providers (for Europe, Cloke *et al.*, 2010; for the U.S., Wolch and DeVertuil, 2001; for a recent cross-Atlantic comparison, DeVerteuil, 2014). We wish to consider how shelterisation may result under conditions that favour the promotion of ‘welfare pluralism’, ‘urban governance’ and ‘social innovations’, which permeate most suggestions for policy reforms in the European context (see recent EU guidelines to address homelessness in FEANTSA, 2012; 2013).

In this broad context, questions about the persistence of shelterisation, as defined above, can be dealt with by examining whether homelessness policy is narrowly designed so as to address only the visible aspects of poverty as opposed to a more comprehensive approach, which could include its invisible dimensions – the population in insecure and inadequate housing. Additionally, choices on the welfare mix of services (public, private, non-profit), the decentralisation of resources and responsibilities, the targeting of vulnerable groups or the universality of services, as well as choices on provisions in cash or kind, are related to the issue of a ‘homelessness industry’ being fashioned as part of the wider management of poverty and the ultimate determination of whether it is a ‘care’ or a ‘control’ component that prevails in policy reform (Wolch and DeVertuil, 2001; Lyon-Callo, 2008).

Choices on the balance between ‘short-term’ and ‘long-term’ provisions, and on the balance between housing, health and employment assistance, are indicative of the extent to which shelterisation persists as an inescapable component, or effect, of this industry. Although such choices are made centrally and relate to regulations and social protection provisions, the type of care available is also shaped by the ability of providers to attract funding, their expertise in a specific field or service, their alliances and partnerships, and the methods used to assess the needs of

homeless people. The international literature suggests that 'emergency' solutions, the decentralisation of competencies without resources, and preferential treatment by certain providers give rise to fragmentation and the 'creaming-off' of applicants, and, ultimately, to a series of exclusions (Wolch and Deverteuil, 2001; Hopper, 2003; Cloke *et al.*, 2010). On the other hand, it is worth exploring how social innovations and advocacy for supported housing have been successful in certain cases as viable alternatives to shelterisation and advancing inclusive strategies for homeless people (Hopper and Barrow, 2003).

In the European context, much of the national variation in policy responses to homelessness can be explained by the historical features of welfare regimes, which either countervail or complement neoliberal processes (O'Sullivan, 2010; von Mahs, 2011). Recently, in European Union policies the idea of 'social innovation' has been advanced in connection with poverty and homelessness. Nonetheless, according to recent conceptualisations of innovation, research is needed as to which policy reforms can counterbalance the social effects of austerity measures and advance social cohesion (Moulaert *et al.*, 2007; Peck, 2011; Novy *et al.*, 2012). Although the idea of social innovation has attracted the attention of not-for-profit organisations and homeless advocates, particularly with the introduction of Housing First models (Gosme, 2014), some of its applications could be criticized for introducing market forms of provision and finance and for neglecting the context of implementation.

Bonifacio (2014) suggested that social innovation could better be viewed as a policy compromise that can detract from the debate around the need to develop a fully-fledged EU social policy. In this sense, we suggest that social innovation ideas that orient EU anti-poverty policies should not be viewed as involving deep-seated consensus but rather as a compromise, formulated within what Peck (2011), called a 'zone of experimentation' delineated by the market ideology. However, such 'zones of experimentation' can actually be limited to a narrow range of available options of policy change – tight fiscal constraints thwart the development of integrated anti-homelessness strategies, while clientelistic, discriminating, or populist practices, impose additional local impediments to change. It could also be the case that priority is given to financing and diffusing short-sighted/short-lived experiments attempting to shape homeless lives according to workfare principles by disregarding their long-term needs for treatment and housing stability. The remainder of this paper examines whether policy reforms encourage the deployment of managerial practices and encourage forms of shelterisation, which are consistent with both the historical features of a Southern European welfare regimes to which Greece belongs, and the introduction of neoliberal austerity policies.

The Rise of an Emergency Model of Social Crisis Management: A Greek Version of Shelterisation?

A brief history of policy changes: 2011-2014

Specific policy changes directly affecting the institutional framework and the financing of policies for poor and homeless people in Greece can be traced back to 2011 when the Greek government and the EU had to finalize the bailout package and secure the transfer of emergency aid for Greece. Two main processes delineated the arena for policy experimentation for local and civil society actors: residualisation of key social policy areas and devolution of central state powers.

Other than the social impact of structural adjustments through wage squeezes, weakening public services and social protection associated with memoranda and aid policies, residualisation constitutes a drift from universal coverage to state responsibility being limited to the more vulnerable populations and basic necessities. Similarly to other Southern European countries, universalism in the Greek welfare regime has been weak, but the national health care system, despite its belated development, had achieved a considerable level of population coverage. Housing, on the other hand, has historically been an area of limited state intervention, mainly involving the construction of dwellings for workers by the Greek social housing agency. The bailout package specifically included the abolition of the main Greek social housing agency in 2012 and a set of measures promoting the gradual drift away from universal health coverage (Petmesidou, 2013).

Furthermore, the decentralisation of social policy competences, which was instituted in 2010 – the so-called Kallikratis reform – took place within a crisis-ridden environment, parallel to significant local administration budget cuts of more than 50 percent in some cases, strict budget control, and limitations – if not an outright prohibition – on hiring new personnel. The Greek Government was also advised by the troika to give priority to the most vulnerable groups, to local social service delivery, and to urban regeneration so as to make effective use of EU structural funds. In addition, EU funding regulations enforced partnership schemes between local agencies and service charities. Although local authorities can set policy priorities regarding the type of services or the populations to be served, they are in effect without adequate means to implement such schemes. Local strategies also can vary as to whether private donors and market solutions will be pursued or not.

It is quite enlightening that the very same law advancing the reorganisation of the health care system introduced social services for the poor, on the advice of the technocratic echelons of the lenders. In the same context, the Greek administration produced an operational definition of homelessness so that homeless people could be recognized as a 'vulnerable group' and that EU funds could be drawn on accord-

ingly for their relief. Law 4052 laid the foundation for subsequent measures for poor and homeless people but a disagreement within the administration has left an important imprint. An *Action Plan for a Network of Immediate Social Interventions to Address the Psychosocial Needs of the Poor and the Homeless* was drafted and implemented by the Ministry of Labour. The plan gave priority to emergency and employability provisions by applying a clear 'workfarist' approach, and ignored the alternatives suggested by the Ministry of Health and a wide array of providers, which emphasized the need for targeted prevention, user participation in service delivery and the introduction of supported housing schemes.

As a response to public concern and pressures from NGOs, but also obviously for political capitalisation on humanitarian sentiments in approaching the date for European Parliament elections, the Greek Prime Minister announced a new initiative for homeless people on 14 April 2014. The initiative was announced as part of the allocation of a 'social dividend', of which €20m was earmarked for homeless services. Of this, half went into funding a housing programme designed to assist 800 individuals for up to one year (of which approximately 55 percent were in the region of Attica). The programme declares a planning preference for housing apartments over emergency and transitory structures, and sets out a concrete target that 30 percent of the eligible population should reach complete autonomy and independent living. The target groups of the programme include families and individuals accommodated in transitory hostels, those in night shelters, day centre service users, families and individuals who have been registered as homeless by municipal social departments, female victims of violence, and individuals to be discharged from child protection structures. The programme includes housing benefits, and partial cover of utility bills or other living expenses.

On paper, the programme seems a corrective step to the severe imbalances that have resulted from emergency type measures, and it introduces housing benefits as a component of social inclusion policies. However, significant drawbacks are noticeable. First, there were no formal and substantive procedures for public deliberation. Second, the duration of the programme, and the funds secured, is extremely short for the planning targets, and this can ultimately be harmful to those it claims to help, because one year of implementation is inadequate time for the recovery and reintegration of vulnerable persons. Third, the programme lacks a coherent philosophy, structure and priorities. There is a lack of distinction between prevention and rehousing. Likewise, it is unclear whether it prioritises a Housing First or a 'staircase' approach. Last, but not least, the target of 800 beneficiaries is inadequate to address the needs of the real number of homeless individuals in need of assistance.

Nonetheless, unrecognised pathways of policy change can be identified in initiatives financed through European funds prior to the crisis and these have been embedded in the national policy framework, such as the assistance of the European Refugee Fund for asylum seekers¹ and the most innovative aspects of the reform of mental health services in Greece. Notably, both pathways involved the collaboration of international human rights organisations and European institutions, with NGOs, professional associations and pioneers within the Greek administration, particularly under the auspices of the Ministry of Health. In both cases, policy change has proceeded in complex and often conflicting ways. Yet, good housing practices in asylum provision and mental health remained unexploited in policies to tackle homelessness, often as a consequence of adopting a narrow definition of visible, chronic and 'voluntary' homelessness amongst Greek citizens. In this context, social innovation ends up experimenting with do-it-yourself types of welfare or outsourcing to private agencies. The attempts of NGOs and local authorities to use the new financial instruments of the EU and other international agencies remain fragmented and the capacity for developing integrated social inclusion policies is severely diminished.

'Project led' responses, welfare mix and targeting

NGOs have been at the epicentre of what has been described as the 'humanitarian crisis' in Greece since 2010. From the total number of seventy-seven projects in our survey, sixty-two were implemented by NGOs, nine by local agencies and only six by central public institutions. Since the beginning of the 1990s, NGOs came onto the scene due to humanitarian concern for the conditions of immigrants, the mentally ill, women and children in Greek cities, and over the next decades grew through financing by the EU and the Greek state. In responding to the emergence of new, urgent needs in the current crisis, most NGOs developed actions for a variety of populations beyond their initial target groups and expertise. Official policies are increasingly designed to give NGOs a prominent role in addressing poverty and social exclusion, while the central state role has been downgraded to accountancy and cost-containment. Despite their increased role and anti-poverty rhetoric, local authorities lack not only resources but also planning capacities and expertise. Increasingly, local authorities, mainly in the municipality of Athens, rely on the support of NGOs to access private and international sources of finance.

¹ Along the same lines, funding from the European Economic Area (EEA) Grants was directed to recent important initiatives like the 'SOAM Programme /Supporting Organisations that assist migrant asylum seeking population in Greece' and 'Solidarity and Social Inclusion in Greece' (involving the city of Athens).

We recorded many forms of collaboration between NGOs and local authority agencies, evidencing a new kind of mix in service delivery. Certainly, this was not the case 15 years ago, when collaboration between providers was extremely limited (Arapoglou, 2004). In fact, such collaborations have recently become obligatory; they are a precondition for securing EU funding and offer a solution to local authorities barred from hiring or who lack the finance to purchase supplies. Nonetheless, service delivery on an *ad hoc* basis seems to be contributing to fragmentation, partnership tensions and accountability disputes, as we learned through in-depth interviews.

Characteristically, in the context of individual interviews with the representatives of a local partnership, the municipal authority administrator was sceptical about the role of NGOs. In her words, 'often all the NGOs really want is an opportunity to issue a press release' – i.e., to advertise themselves for the services they offered to this or that group. On the opposite end, an NGO representative assessed the same municipal agency for the homeless as 'stagnant' and another NGO as 'arrogant' with a 'know it all' attitude. As these instances illustrate, collaboration is indeed a difficult task.

The NGOs in our survey alone serve close to 113,000 persons in the metropolitan region of Athens (see Table 1 below). The total number reveals a dramatic picture, especially when considering that no housing assistance of any type or form is available for this deprived population. The breakdown of individuals served, in Table 1, also indicates that, despite political rhetoric, local authorities play only a secondary role in actual service delivery; instead, it is the big NGOs that largely set the service agenda. Public agencies are minimally involved in providing services and accommodation. They are left to wither silently and for a variety of reasons, including public under-financing, moratoriums on hiring, lack of expertise, out-dated delivery of services and restrictions on admission.

Table 1. Number and Share of Individuals Served by Provider and Service Type

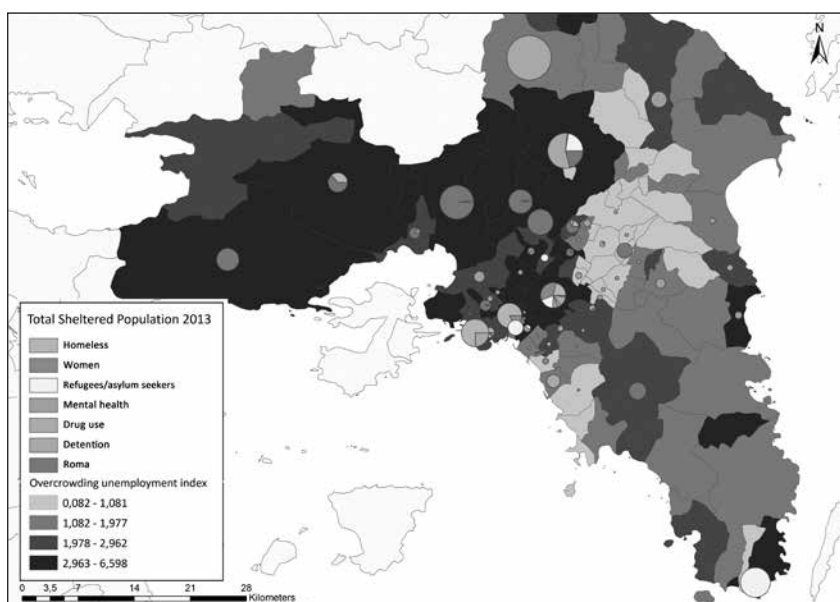
	Generic services		Targeted services		Total	
	Individuals served	% of total	Individuals served	% of total	Individuals served	% of total
Local	6572	5.5%	69	0.1%	664	5.5%
NGO	4811	4.0%	108131	90.2%	112942	94.2%
Public	51	0.0%	274	0.2%	325	0.3%
Total	11434	9.5%	108474	90.5%	119908	100%

Source: UoC Survey 2014 (housing and all other services included)

Significantly, the prevalence of NGOs is related to the introduction of targeted measures for specific categories of homeless people, partly as a result of EU guidelines to advance policies addressing specific 'vulnerable groups', and partly as a result of organisational and service expertise. This is vividly illustrated in Table 1, which reports the total number of individuals served and the percentage of the total population served. Prior to the debt crisis, the prevalence of targeting was not so striking and was mainly related to the advocacy interests of agencies working with some homeless groups. In contrast, generic services and shelters for homeless people, which were initiated in the 1990s, are still the primary form of provision for local and public agencies.

As vividly illustrated in Figure 1, different projects are often implemented within the same premises, creating a distinctive landscape of provision with diverse individuals in terms of gender, ethnicity or age. Figure 1 has been created with the help of variables combined from different sources. It aims to visualize the interplay between different forms of housing insecurity and visible homelessness, as well as between containment and care. The dark shading represents different levels of housing insecurity that we attempted to capture by devising an overcrowding-unemployment index for 116 municipalities in the Greater Athens Metropolitan Area. The index reports the share of unemployed persons living in rented dwellings with living space of less than 20sqm per capita to the total number of inhabitants in each municipality. The index was calculated with 2011 census data.

Figure 1. Landscapes of Homelessness in the Athens Metropolitan Area 2013



Source: 2014 survey data; elaborated 2011 census data; registries and reports

Within the city of Athens and in the port of Piraeus, emergency services and shelter are offered to a variety of groups in need within the same or neighbouring premises. Frequent sites of street working and congregations of homeless persons are close to the 'historical centre', squares and public parks. Inner suburban areas seem less affected by the crisis. Northern suburbs and residential areas for upper middle classes and professionals are 'homeless and poverty – free' zones. Lower middle class suburbs to the South host small, dispersed units of care for women and their children, refugees and the mentally ill. The deprived western part of the metropolis remains invisible to social policy-making, being reserved for keeping detention centres and refugee camps out of public sight. Recent civic initiatives, some in collaboration with local authorities, are more responsive to the needs of deprived local populations, as evidenced by supported housing schemes and visits of mobile health care units. Roma camps are located close to settlements of migrants, mainly from the Balkans and former Soviet republics, on industrial or working class city outskirts.

On the one hand, demographic and ethnic diversity is an asset for NGOs and is related to their role in advocating for the rights of clients often excluded from public provisions. On the other, as one of our informants self reflectively stated, the 'project culture' introduces the risk of turning NGOs into 'Supermarket-NGOs.'

A very significant change is that private sources are now the most vital resource of finance for NGOs and, increasingly, local authorities, whereas public and EU grants were the primary source of finance even for NGOs during the last decade. Private companies and charitable foundations now play a key role in policy-making and service delivery. However, as some service providers noted, reliance on donors and sponsors enhances uncertainty and undermines the sustainability of projects because the preferences of donors are highly volatile.

Our research documented a host of limitations and obstacles facing NGOs and service providers in general: inadequate funding across the board; excessively bureaucratic management and monitoring structures; employment insecurity of staff in public agencies, NGOs and charities; severe wage cuts in all agencies and several-month delays of staff payments. In addition, the shift to 'per capita funding' is said to have led to practices of 'client hunting' and small, locally-based organisations expressed concerns that charity funds and donors prefer 'big players' with greater visibility.

On the other hand, our study documented ample evidence of organisational resilience to adverse conditions, including increased willingness for voluntary work, intensification of cooperation between local and social agencies, and improvement of neighbourhood attitudes to NGOs. The list is indicative of an atmosphere of solidarity and a culture of giving that the researchers confirmed in many instances through their on-site visits.

Housing and links to services

The survey recorded 30 accommodation and housing assistance projects: nine emergency shelters, mostly introduced by the new plan of the Ministry of Labour; ten transitory shelters run by local authorities, the National Centre of Social Solidarity and NGOs; six supported housing schemes, financed by the Ministries of Health and private donors; and five schemes of housing benefits financed by private donors and the European Fund for Refugees.

The majority of survey respondents reported an increase of approximately 40 percent in shelter users since 2010. Only two public shelters and one local agency report a decrease in shelter users, and this possibly relates to the fact that new shelters that have more relaxed admission regulations have provided an alternative. The average increase in demands for housing assistance since 2010 has been reported at 58 percent. On average, 40 percent of applications remain unmet, however, and it should be taken into consideration that many individuals are deterred from applying by strict regulations and waiting periods for admission tests. Average capacity utilisation has been estimated to be 80 percent, but with great variation (25 percent-100 percent): some shelters are full, while some others do not operate throughout the year, and some constantly have empty beds.

Table 2. Populations of Day Centres and Housing Assistance in the Greater Athens Area in 2013

People Using Day Centres (declaring being roofless)	2,360
People in accommodation for homeless people	750
Homeless hostel/ Night shelters ('new emergency type' shelters)	580
Transitional Accommodation/ to mainly Greeks or Mixed ('old type shelters')	170
People in Women's Shelter/ transitional	80
People in accommodation for asylum seekers/ refugees	1,200
Transitional supported – reception/ refugee shelters	1,000
Transitional supported apartments for vulnerable asylum seekers/ refugees	200
People receiving short-term financial support due to severe housing need	4,546
Benefits for poor and unemployed Greek families	3,622
Benefits for vulnerable refugees	924

Source: UoC Survey 2014

The housing assistance categories in Table 2 clearly fall within the broader ETHOS definition of 'houseless'. Emergency shelters are a new form of accommodation in the Athenian context and mainly attract Greek homeless men who do not have access to transitory shelters. Although the number of people accommodated is not

large, it should be taken into consideration that most of the shelters were in the first year of their operation. Usually they are small units that do not attract the attention of passers-by and are located in densely populated areas.

Transitional shelters are the prevalent form of accommodation and include both shelters for the general homeless population (mainly older Greek men), as well as shelters for specific target groups of women, children and refugees. Such shelters are dominated by a 'staircase' culture that is widely and, often uncritically, accepted.

The legislative and regulatory framework does not clearly specify which homeless services are emergency or transitional and what constitutes proper or good quality support. There is also a lack of clarity regarding both broader policy objectives and the approaches of specific projects (housing-led/staircase, re-housing/prevention). In practice, there are often misinterpretations. For example, the municipality of Athens had launched a programme entitled 'Social Housing' but this is actually a six-month hospitality scheme for families in a block of flats.

Overall, our research indicates that a model of 'emergency' shelters and assistance-in-kind has been introduced by the policies of the Ministry of Labour and is gradually being consolidated. Night shelters, day centres, food banks, social pharmacies and social groceries have been established in this context. Night shelters provide a temporary solution to many applicants rejected from other transitory shelters, which often apply strict regulations for admission; mental disorders, substance use or lack of 'clearance' for medical conditions were cited as primary reasons for exclusion. Night shelters are also a relief for episodic homelessness, but do not prevent shifts in and out of different forms of homelessness. It is premature to assess their impact, but the American experience points to the ineffectiveness of emergency provisions. Our site visits and interviews informed us about a significant aspect of the operation of day centres, namely that day centres attract not only street homeless individuals but an array of invisible poor in their search for healthcare services; day centres that are linked to day clinics, in particular, open the door for health care and assistance. It has been a matter of great concern that a poor population with no health insurance or capacity to pay medical contributions revolves around day centres and clinics. From interviews and data released by the Church of Greece and the Athens Medical Association, we estimate this number to be around 200,000 people in the Greater Athens area.

This distinctively 'new' policy landscape does not mean that the inadequate services and old-fashioned structures established during the 1990s have been made obsolete – for example, large generic units intended to offer transitory accommodation to individuals with the aim of gradual social reintegration. Shelters of this kind are mainly run by local and public agencies, combining bureaucratic procedures with a philanthropic spirit. A significant number of beds are empty due

to strict admission regulations, while at the same time, the majority of residents remain longer than expected. The history of this type of accommodation and its deficiencies, as it has appeared in Greece and the US, have been discussed elsewhere by the authors of this report (Arapoglou 2004; Gounis 1992a). During some of our on-site visits we experienced a sense of *déjà vu*; different people, different places, but a familiar spirit and rhetoric – tokenism combined with blaming homeless people, lack of expertise and resistance to change.

Preventive measures were minimal; training and/or employment counselling, which we witnessed in some key settings, were offered as ritualistic complements to transitional interventions, while their efficiency was doubted by the very providers who recognised the lack of real employment opportunities. Moreover, social services for homeless families and individuals, such as childcare or proper psychological treatment, are on offer only by a few specialized agencies. On the positive side, a private donor has financed a new scheme of housing benefits for Greek families (This type of assistance was an innovation introduced for refugees and financed through the European Refugee Fund). 4,546 individuals were assisted through some form of housing benefit. However, financial assistance of this kind was either occasional (e.g., assistance to pay bills) or of short duration (3-6 months) and contingent on strict means testing and supervision of the beneficiaries.

Regarding direct, supported housing, such as Housing First, we should note that in our research we encountered providers willing to introduce such schemes for homeless people. Such housing schemes have been initiated in Greece in the context of mental health reforms and more recently in the context of support for asylum seekers. However, currently they face a lot of pressure stemming from severe cost containment measures, while additional pressure comes from the hurried closure of psychiatric facilities and the transfer of the patients to community housing. Thus, going in this direction is largely contingent on available funding sources.

Overall, when we attempted, in focus groups and interviews, to explore the extent to which agencies and their personnel were ready to consider community-housing types of interventions, such as Housing First, we came across a generalized resistance. Front-line staff, especially, were reluctant to entertain the possibility of a successful transition to stable, autonomous housing for their clients, citing, on the one hand, their opinion – a kind of service ‘philosophy’ really – that people had to become ‘housing ready’, which meant adhering to treatment regimes, becoming able to manage their own finances and the like. On the other hand, however, in a realistic vein, they would acknowledge that independent living was contingent on (non-existing) employment opportunities.

Conclusions

Some evidence for policy 'learning' has been reported in liberal and social democratic regimes, especially with regard to targets for reducing the use of temporary accommodation and providing long-term support and individualised services (Benjaminsen *et al.*, 2009). But this does not appear to be the case with Southern European regimes (Pezzana, 2012; Baptista, 2013) and charities are struggling to counterbalance the effects of severe austerity. The rise of NGOs has not been a uniquely Greek phenomenon; a similar trend combined with public expenditure cuts and contracting of services for homeless people has been reported for other countries of Southern Europe. Nonetheless, we wish to emphasize the contradiction that at the same time that as a resource-depleted Greek Government shifted responsibilities onto NGOs, it also depleted their capacities.

To capture the interplay between the 'supranationally' induced social policy residualisation and 'domestic' impediments to change, we suggest that shelterisation is a principal component of an 'emergency model' of managing the social consequences of the financial crisis. The most distinctive feature of the 'emergency model' is the prevalence of very short-term provisions-in-kind to meet the basic needs of the visible poor, such as emergency shelters, soup kitchens, free clinics and day centres. Such a constraining and time-limited horizon reinforces the tendencies towards the creation of a homelessness industry.

Furthermore, a crucial issue is whether targeted policies, such as the ones the European institutions press national governments to advance, are effective remedies for the erosion of universal provisions. Our findings, especially with regards to health and housing needs, indicate that specialised services alone are inadequate, for a variety of reasons. The multiplicity and deepening of exclusions renders targeting a meaningless exercise that results in strict regulations for providing assistance, administrative rejections and long waiting lists. Moreover, targeting is often used as an excuse for getting rid of clients in inadequately staffed agencies and it cannot counterbalance stigmatisation, discrimination and racism within local and public agencies. Such deficiencies are aggravated by the lack of preventive policies, a fact that ultimately means that targeting can, at best, only alleviate extreme forms of despair and cannot countervail the stigmatisation of the most vulnerable segments of the poor population.

The contradictions discussed above require that we pay attention at different levels of policy-making. A distinctive feature of the current condition is the lack of deep-seated consensus on policy reforms and a continuous series of experimentation, which involves successive tactics of manoeuvring and adaptation. However, how a certain 'zone of experimentation' (Peck, 2011) is shaped, both in discursive as well as financial terms, needs to be explained. Austerity is the very material

condition delineating the kind of policy experiments and governance manoeuvres. We wish to highlight four explanations as to why shelterisation prevailed despite EU rhetoric on the promotion of integrated strategies. We also draw attention to alternatives aiming to remove impediments for the successful design and implementation of long-term supported housing schemes.

First, anti-poverty measures most often rely on 'soft', 'bottom-up' mechanisms of policy learning, in contrast to 'hard', 'top-down' mechanisms of monetary and fiscal consolidation surveillance, as has been witnessed in both transitional and southern European economies. As a typical example, homelessness emerged on the EU policy agenda through the Open Method of Co-ordination but without any common policy objectives or any instruments for policy evaluation (Gosme, 2014). Within such restrictive environments, less powerful actors can only consent or adapt by cherry-picking socially innovative examples.

Second, a series of unintended consequences and misunderstandings occur when attempting to transfer policy models without considering whether the underlying normative assumptions, created in their place of origin, are suited to the context in which they are being implemented. For example, in the Greek welfare context, the concept of 'housing rights' do not sit easily with the familial values associated with homeownership, xenophobia, and the secrecy and stigma of poverty and mental illness. Not surprisingly, in combination with the lack of resources that could have been directed towards long-term public spending, the idea of long-term support remained off the policy agenda, shelters were misleadingly presented as 'social housing,' and 'rapid re-housing' was disconnected from treatment but linked to employment rehabilitation plans (yet another precondition for EU structural funds), because it was impossible to consider that the poor, the mentally ill, drug users or asylum seekers were entitled to support. An organised effort at transnational policy learning, intensive staff training and standardised criteria for quality implementation could be remedies to the above-mentioned pitfalls.

Third, typical constraints for up-scaling social innovations within Southern European regimes, like the gradual erosion of public deliberation, clientelism and political tokenism (Oosterlynck *et al.*, 2013), were evident in the Greek case of drafting emergency plans for EU finance.

Fourth, specific institutional and financial arrangements are necessary to embed special assistance within broader social and urban development objectives. Supported housing schemes can operate effectively by eliminating barriers to health and social services, and this actually requires combining universal health coverage with specialized or supported housing structures for the most vulnerable, especially the mentally ill and refugees.

Key questions also arise regarding the financial architecture for supported housing and the means for achieving housing affordability and security of tenure. Several of the Greek examples were initiated by private donations, but upscaling requires considering sources of public finance as well. Given ample supply of inexpensive housing in the private market during these times of economic downturn, there are good opportunities for the introduction of low cost schemes. Yet, some sort of benefit or income assistance is necessary to partially finance their operation, especially if minimal requirements for 'normal' housing are adopted. Thus, the lack of adequate income assistance schemes becomes the major constraint for the development of supported housing in Greece. Two further possibilities can be considered: a) combining housing with supportive employment and the operation of social co-operatives according to the experience of rehabilitation units in psychiatric reforms, and b) the use of available housing stock by public agencies and local authorities, especially in the context of revitalizing deprived neighbourhoods.

Last but not least, reversing the processes of shelterisation requires addressing the invisible aspects of homelessness, and preventive policies are the most efficient way of doing so. As a term, shelterisation was first used during the years of the Great Depression (Hopper, 2003) and was rediscovered and reapplied during the 1980s in the US as a diagnosis that explained, at least partly, the perpetuation of this entrapment. As pointed out earlier, there, shelterisation implied different things – conditions, causes, remedies – to different people who became involved with homelessness in whatever capacity – researchers, advocates, policy-makers. However, these diverse views all shared, to some extent, the recognition that 'shelterised' individuals were largely exceptional, passive and unmotivated users of the elementary services provided in the types of shelters mentioned above. In light of the developments outlined in this paper, challenging the stereotypes of visible homelessness and recognizing the invisible social effects of the second Great Depression could open up alternative pathways to policy change in the countries of the European South.

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