

Family Homelessness in Europe



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Acknowledgements

This research was based on questionnaire responses from 14 European Union member states. Each questionnaire was completed by a researcher with expertise in homelessness, often with support from their colleagues and experts from within the homelessness sector in their country. Our sincere thanks are due to everyone who supported this piece of work. It is not possible in a report of this length to fully incorporate the often highly detailed answers that were provided by participants in this research. The authors have made every effort to accurately represent the responses to the questionnaire. The respondents to the questionnaire in each country are as follows (the lead respondent is shown first):

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Foreword

The 2017 issue of the European Observatory on Homelessness' Comparative Studies focuses on family homelessness.

For the past few years, FEANTSA members have started to report worrying increases in family homelessness. In some countries, up to a third of the current homeless population are children. Despite the urgency of the problem, surprisingly little research is available on the causes of family homelessness and the profiles of the people affected. That is why FEANTSA asked the Observatory to look into family homelessness in more depth and identify the most promising practices and policies. This research report is the result of an in-depth analysis of data from 14 EU Member States.

Family homelessness has also become an issue of concern at the European level. On 11 May 2017, the Council of the European Union decided to join the Istanbul Convention on preventing and combating violence against women and domestic violence. As violence is one of the causes of family homelessness, the Convention can become a valuable tool to guide policies of the European Union and the Member States.

The Convention obliges every signatory *to take the necessary legislative or other measures to provide for the setting-up of appropriate, easily accessible shelters in sufficient numbers to provide safe accommodation for and to reach out pro-actively to victims, especially women and their children.* Even if the research report highlights the importance of prevention and housing solutions to address family homelessness, it also points to the need to improve the quality of shelters to facilitate the transition to permanent solutions and can therefore be a resource for the European Commission when it promotes the implementation of the Convention.

Family homelessness cannot be dissociated from the flaws in migration policies of the European Union and the Member States. Migrant families are disproportionately affected by homelessness and solutions offered to them are often inadequate and ineffective. Our report devotes attention to this important issue. We hope that the findings will feed into EU policies developed under the EU Agenda for Migration.

The impact of homelessness on children is usually damaging and sometimes irreparable. That is why child homelessness should be avoided. The report includes several suggestions of effective prevention mechanisms. At European level, several policy instruments exist to support Member States to better address child poverty,

but they seldom reach children who are homeless. The Commission's Recommendation on child poverty is an exception and includes some strong references to homelessness and housing exclusion.

Article 2.2. calls upon Member States to *support families and children at risk of homelessness by avoiding evictions, unnecessary moves, separation from families as well as providing temporary shelter and long-term housing solutions*. Little progress has been made, however, since the launch of the Recommendation in 2013. Our research report might provide some ammunition for the Commission to incite Member States to improve the situation of homeless children.

FEANTSA would like to thank the national researchers and the team of the European Observatory on Homelessness for the work they have put into this report. This is the first European report on the issue of family homelessness, which will hopefully inform EU and national policies.

Ian Tilling
President of FEANTSA

1. Summary

1.1 About the Research

The aim of this research was to explore the nature of family homelessness in Europe and to provide an overview of the range of preventative measures and other services for families facing homelessness. The research looked specifically at whether the nature of family homelessness – and the responses to family homelessness – varies across Europe. The particular concern was to build up a picture of the existing data on families experiencing homelessness, on the services they use and to identify any significant gaps in information.

This comparative research drew on a questionnaire sent to experts in 14 member states of the European Union. Northern Europe was represented by Belgium, Denmark, France, Germany, Ireland, Sweden and the United Kingdom. Southern Europe was represented by Greece, Portugal and Spain and Central and Eastern Europe by Hungary, Romania, Slovakia and Slovenia. This is the seventh in a series of research reports from the European Observatory of Homelessness and as with the preceding reports, the methodology centres on asking experts on homelessness in each country to respond to a standardised questionnaire.

The report begins by describing the methods used for the research and outlining the key questions the research team were seeking to answer. Chapter 3 looks at definition and measurement of family homelessness, the available data on the extent of family homelessness and at trends. The reasons for family homelessness are also explored. Chapter 4 looks at preventative services, at service responses once family homelessness has occurred, and at the range and nature of temporary accommodation use by homeless families. Access to permanent housing for families who experience homelessness is also explored.

The questionnaire included a series of vignettes, a set of five hypothetical homeless families, which were used as the basis for a comparison across the 14 countries. In each case, the situation of a hypothetical homeless family was compared, using the response from each national expert to contrast how the same family would fare in, for example, Belgium, compared to Spain, Portugal or Slovenia. Chapter 5 brings together this comparison of what the same hypothetical homeless five families would be likely to experience in each of the 14 different countries.

The report concludes with the discussion in Chapter 6. This chapter revisits the questions outlined in the next chapter, identifies gaps in information and explores the potential for future research.

1.2 The Experience of Family Homelessness

For the purpose of this report, families were defined as families if they had dependent children physically living with them, i.e. parents who were (in effect) lone adults because they were not living with their children, were not defined as being a homeless family. Families in a state of rooflessness, i.e. living rough, in emergency shelters or homeless hostel/temporary supported housing were regarded as homeless across all 14 member states. With the partial exception of Romania, where there is evidence of street homelessness among children, families, who were European citizens, were very unlikely to sleep rough in the 14 countries. There was some evidence that homeless undocumented migrant families might experience rough sleeping (street homelessness), including some reports from Belgium, but this research did not suggest this was widespread in the countries that were analysed.

Women at risk of domestic violence, who have dependent children with them, and who use domestic violence services such as refuges may not be recorded as being homeless in some countries. This leads to potential undercounting of family homelessness, both within specific member states and across Europe as a whole.

Hidden homelessness, i.e. a family, without their own housing, staying with friends, relatives or acquaintances because they have no alternative, is defined and recorded as family homelessness in some countries. For example, Denmark, Sweden and Germany (in regional statistics) record this form of homelessness but it is not recorded, or even necessarily defined as 'homelessness', in others.

In several countries, family homelessness was regarded as far less frequent an occurrence than homelessness among lone adults. The UK has longstanding statutory systems focused on family homelessness, which have been collecting administrative data on homeless families for decades and Ireland has recently begun monitoring family homelessness. In broad terms, however, data on the characteristics and numbers of homeless families were quite limited. Trend data on family homelessness were not available for seven countries.

Greece, Slovakia and Slovenia reported having no data. In several other countries, data recorded whether someone was a parent, but did not record if they had a child with them (a reflection of an assumption that homelessness is experienced by lone

adults). Families were reported in low numbers in Denmark, Germany and Portugal. France and Hungary appeared to have higher levels than some other countries. Recent spikes in family homelessness were reported in Ireland, Sweden and the UK.

Based on existing evidence, domestic violence and relationship breakdown were widely reported as causes of family homelessness. Family homelessness was also often described as highly gendered, i.e. it was experienced by lone women parents and their children at very disproportionate rates. Unlike lone adults experiencing sustained or recurrent homelessness³, homeless families were not reported as often being characterised by high, complex support and treatment needs, i.e. homeless families were *unlikely* to be characterised by severe mental illness, addiction, or limiting illness or disability. A broad association between family homelessness and experience of poverty was reported, as were associations with inadequacies in affordable housing supply and increases in family homelessness.

1.3 Housing and Support for Homeless Families

Welfare systems that are designed to prevent child poverty and distress have sometimes been assumed to be preventing family homelessness in Europe. This is particularly the case in countries with highly developed and generous social protection, social housing, public health and social services. There was some evidence that countries with highly developed social protection systems had very low levels of family homelessness, although these countries also tended to have generally low levels of homelessness. While resource levels varied considerably, prevention of extreme poverty and distress for children was always a policy priority, meaning that formal social protection for children at risk of homelessness was in evidence in all 14 countries.

Welfare systems were described as not paying enough to secure adequate housing for homeless families in Belgium, Portugal and Spain. In Romania and Slovakia, there were issues with access to welfare benefits for some groups of homeless families. In Hungary and Spain, regional variations in welfare benefit levels could be marked, disadvantaging some families. Refugees and those given subsidiary forms of protection could access welfare benefit/social protection systems, but this was generally not the case for undocumented migrants, including homeless families.

³ Busch-Geertsema, V., Edgar, W., O'Sullivan, E. and Pleace, N. (2010) *Homelessness and Homeless Policies in Europe: Lessons from Research* (Brussels: Directorate-General for Employment, Social Affairs and Equal Opportunities).

Preventative systems designed to stop eviction were in place in the Northern European countries. In Central, Eastern and Southern Europe, preventative services were focused on families with mortgage arrears, reflecting the tenure pattern in these countries, where most people are home owners. In some countries, such as Greece, there were legal protections against families being removed from their primary residence. In the Greek case, the law had recently been strengthened so that homes with a value of up to €300 000 would be protected.

Rapid re-housing systems that are designed to intervene when family homelessness has actually occurred and to end that homelessness very rapidly were not very widespread. Belgium had accelerated access to social housing and Ireland a system of rapid re-housing; in the United Kingdom, rapid rehousing systems were a mainstream form of preventative service provision. Only France and the United Kingdom had statutory frameworks that were designed to prioritise access to housing for homeless families and other homeless people.

Use of temporary accommodation for homeless families varied. In some countries, there was some direct provision of temporary housing for homeless families, Germany, Hungary and the UK being examples. The majority of specifically designed temporary housing was in the form of services for homeless women at risk of domestic violence who had their children with them, i.e. refuges and shelters, although these would not always be defined as 'homelessness' services.

There was evidence of the use of hotels as emergency accommodation. France, Ireland and the United Kingdom all routinely employed hotels as emergency accommodation for homeless families. In Slovakia, shelters and emergency housing was used for homeless families.

There could be significant barriers to accessing settled, affordable and adequate housing for homeless families. In several countries, with relatively extensive social housing provision, there was very high pressure on the sector, reflecting a general shortage of affordable homes. Social housing was also not always necessarily focused on homelessness and there could be long and bureaucratic processes involved in applying for a social rented home. Immigrant homeless families, if they were without refugee status or subsidiary forms of protection giving them rights of residence, generally could not access social housing.

Child protection services were generally unlikely to take a child or children into care simply on the basis that a family was homeless. A child would have to be at risk for social services to intervene, which in every one of the 14 countries, would be assessed on a case-by-case basis.

Lone adult women, with experience of domestic violence, and one or more dependent children living with them, were often described as 'typical' of the families who experienced homelessness. Variation existed and one respondent suggested this might be related to the extent to which domestic violence and homelessness services were interlinked, i.e. in countries where these services were not interlinked, rates of domestic violence among homeless families may have seemed lower, if the administrative systems for these services were separate and 'homelessness' was not recorded by domestic violence services.

Couples with children were seen as less typical of family homeless, but any family that could not sustain existing housing, or had lost housing, because their incomes were low, were seen as typical of homeless families in a majority of the countries. Variations in the support that the same homeless family would potentially receive in different countries could be stark, support being most extensive in the Scandinavian countries and at the lowest levels in Eastern and Southern Europe. However, it is important to note that every country prioritised the support and protection of children experiencing extreme poverty, even if the levels of resources those countries had available varied considerably.

1.4 Family Homelessness in Europe

There is a case for more detailed exploration of family homelessness. While some research and information indicates that family homelessness represents only a small part of overall homelessness in some countries, in others there are data suggesting it is a much more significant problem, in terms of scale, than people sleeping rough. There are methodological challenges in exploring the extent and nature of family homelessness, because there is evidence suggesting that families may experience high rates of hidden homelessness.

The available evidence indicates that family homelessness is often quite different from homelessness among lone adults. Family homelessness appears to have a more direct relationship with poverty and homeless families are not characterised by high rates of complex support needs, such as addiction and severe mental illness, as is the case for lone adults experiencing recurrent and sustained homelessness.

Another key difference with other forms of homelessness is the extent to which family homelessness is experienced by women. Rough sleeping is characterised by disproportionate numbers of men, although women are still present, whereas family homelessness is predominantly experienced by women, whose homelessness is strongly associated with domestic/gender-based violence. New debates are occurring about the role of gender in homelessness and housing exclusion and the experience of homeless families should be a part of that broader discussion.

There are further dimensions in family homelessness, including the experience of homeless migrants and establishing a better picture of what the experience means for children and parents, which should also receive further investigation.

In a context in which data on the extent, nature and experience of family homelessness are not extensive, it is difficult to be precise about what sorts of service interventions are needed and the level of provision required. However, prevention, rapid re-housing and provision of adequate family housing should be a part of an effective, integrated homelessness strategy, alongside appropriate integration of domestic violence services that are supporting homeless families.

2. Introduction

2.1 Overview

The goal of this research was to explore the nature and extent of family homelessness in Europe and to examine the strategic and service level responses to homelessness experienced by children and their parents. The research looked at the following areas:

- Definition and measurement
- Causation
- The characteristics of families experiencing homelessness
- Trends in family homelessness
- Prevention
- Support and services for homelessness families
- Variations in responses to family homelessness in different member states

2.2 Methods

A questionnaire was distributed to a group of experts covering 14 EU member states. It was not possible to involve all 28 member states in this study, so there was a concern to ensure a diversity of countries, representing different regions of Europe, a range of welfare and social housing systems and economic situations. The countries included were as follows:

- Belgium
- Denmark
- France
- Germany
- Greece
- Hungary
- Ireland

- Portugal
- Romania
- Slovakia
- Slovenia
- Spain
- Sweden
- The United Kingdom

The use of a comparative questionnaire has a number of advantages. This approach can be rapidly deployed for a relatively low cost. The approach also helps overcome the difficulties that can arise with comparative research, which centre on inconsistencies in definition, data availability and data quality. By using a group of experienced researchers, who can work in combination with other experts, the questionnaire collects a set of broadly comparable data by using standardised questions.

A key technique within the use of comparative questionnaires is the use of vignettes, where researchers with expertise in different countries and systems are presented with the same set of theoretical cases, in this instance a set of homeless families with differing characteristics, and asked how the existing systems in their respective countries would react. This can effectively bypass the inherent difficulties in comparing variations between complex systems, for example the welfare benefit entitlements of a particular homeless family in different countries can just be recorded, without the need to try to understand the assessment and conditionality mechanisms in a dozen or more labyrinthine European welfare systems.

There are some limitations to this approach. Only a relatively small amount of data can realistically be collected using a questionnaire format, there is an absence of resources to conduct primary research (i.e. gaps in data are simply recorded by the questionnaire, the researcher does not have the time or space to conduct significant primary research) and, because the questionnaire focuses on reviewing existing data, responses across different countries will be inconsistent.

2.3 Key Questions

There is a well-established argument that homelessness should not be seen simply in terms of people living on the street or in emergency shelters. However, the evidence base in Europe and elsewhere in the economically developed world tends to focus on this visible extreme.⁴ The popular image of homelessness is that of a lone man with high and complex needs, it is not one of children, most frequently living with one parent, who will very often be their mother, whose lives have been characterised by the precariousness that accompanies sustained poverty.⁵

The reasons why family homelessness has received relatively little attention vary. In EU member states, the safety nets that are designed to protect children from poverty in general – and particularly the extremity of poverty represented by homelessness – are relatively extensive. Family homelessness, if it occurs at all, is expected to be the experience of a minority and to not be sustained, because there are simply too many protections for children.

Welfare systems differ very considerably in terms of their scope and resources, the Scandinavian welfare systems and some of those found in Eastern and Southern Europe are worlds apart, reflecting stark differences in GDP, alongside variations in culture and ideology. However, the protection of children is always a priority, the amount of money available and extent of services varies considerably, but every European country has at least some measures and policies for child protection and to reduce child poverty.

Family homelessness may also be less visible than homelessness among lone adult men with high and complex support needs. While the evidence base is not conclusive, potentially low visibility of family homelessness may be linked to the growing evidence that experience of homelessness is differentiated by gender.⁶

Women appear to be more likely to use informal arrangements in response to homelessness, adopting strategies that keep a roof over their head by relying on family, friends and acquaintances, rather than going straight to services. There is

⁴ Busch-Geertsema, V., Edgar, W., O'Sullivan, E. and Pleace, N. (2010) *Homelessness and Homeless Policies in Europe: Lessons from Research* (Brussels: Directorate-General for Employment, Social Affairs and Equal Opportunities).

⁵ Pleace, N., Fitzpatrick, S., Johnsen, S., Quilgars, D. and Sanderson, D. (2008) *Statutory Homelessness in England: The Experience of Families and 16-17 Year Olds* (London: Department for Communities and Local Government).

⁶ Bretherton, J. (2017) Reconsidering Gender in Homelessness, *European Journal of Homelessness* 11(1) pp.1-21.

some evidence, from Ireland,⁷ the UK⁸ and also from North America⁹ that this pattern is found in respect of family homelessness as well. This pattern would be expected in the sense that we know that family homelessness is disproportionately experienced by low income, lone female parents, whose homelessness is frequently linked to domestic violence.¹⁰

The UK is unique in having dedicated, statutorily specified systems,¹¹ designed to intervene when family homelessness occurs. There are administrative statistical data on homeless families seeking assistance under the homelessness laws. However, research focused on homeless families is unusual. There has been only limited research because the homelessness systems in England, Wales, Northern Ireland and Scotland are seen as effectively dealing with most family homelessness. There can be long waits in temporary accommodation in some parts of the UK, particularly London, but the statutory systems are broadly effective, at least in terms of helping those homeless families who approach local authorities and the Northern Ireland Housing Executive, for assistance.¹²

As elsewhere in Europe, there may be an element of complacency in the UK. Nothing is known about the scale or nature of homelessness among families who seek no assistance from these systems, but levels are not viewed as significant. The UK statutory systems – like the welfare systems designed to protect children

⁷ Smith, M., McGee, H. and Shannon, W. (2001) *One Hundred Homeless Women: Health Status and Health Service Use of Homeless Women and their Children in Dublin* (Dublin: Royal College of Surgeons); Mayock, P., Parker, S. and Sheridan, S. (2015) *Women, Homelessness and Service Provision* (Dublin: Simon Communities).

⁸ Pleace *et al.* (2008) *Op. cit.*

⁹ Shinn M., Weitzman, B., Stojanovic, D. *et al.* (1998) Predictors of Homelessness Among Families in New York City: from Shelter Request to Housing Stability, *American Journal of Public Health* 88(11) pp.1651–1657; Shinn, M., Greer, A.L., Bainbridge, J., Kwon, J. and Zuiderveen, S. (2013) Efficient Targeting of Homelessness Prevention Services for Families, *American Journal of Public Health* 103(S2) pp.S324–S330.

¹⁰ Quilgars, D. and Pleace, N. (2010) *Meeting the Needs of Households at Risk of Domestic Violence in England: The Role of Accommodation and Housing Related Support Services* (London: Communities and Local Government); Mayock, P., Bretherton, J. and Baptista, I. (2016) Women's Homelessness and Domestic Violence: (In)visible Interactions, in: Mayock, P. and Bretherton, J. (Eds.) *Women's Homelessness in Europe*, pp.125–152. (London: Palgrave MacMillan).

¹¹ The statutory arrangements are different in England, Wales, Northern Ireland and Scotland (homelessness law is a devolved power), the law creates justiciable rights for homeless people accepted as owed a statutory duty (i.e. a local authority can technically be prosecuted if it does not fulfil its obligations under the legislation).

¹² Fitzpatrick, S. and Pleace, N. (2012) The Statutory Homelessness System in England: A Fair and Effective Rights-Based Model?, *Housing Studies* 27(2), pp. 232-25. See Chapter 5 for a brief discussion of the shift towards prevention in the UK and how this may influence the operation of these statutory systems.

in every EU member state – are seen as broadly solving the issue of family homelessness. However, as this report explores, the presence of safety nets that should stop family homelessness, should not automatically lead to an assumption that those systems are necessarily effective, accessible or, indeed, necessarily always used by homeless families.¹³

Another potentially important factor here is the presence of domestic violence services that can provide support to women with children. As has been noted elsewhere,¹⁴ the visibility of women’s homelessness – including lone women parents with dependent children – is effectively reduced by the presence of domestic violence services, such as refuges, shelters and sanctuary schemes. This is important because the evidence base across the economically developed World clearly associates the experience of family homelessness with experience of domestic violence. Family homelessness exists in many forms, but the most common, by some margin, appears to be lone women and their children whose homelessness was triggered by male domestic violence.¹⁵

Women who become homeless with their children as a result of domestic violence are not consistently defined and enumerated as being homeless, instead being classified as women (and children) using domestic violence services. As an earlier study in this comparative series notes, this produces a general undercount of women’s homelessness across much of the European Union,¹⁶ which includes women and their children whose homelessness is triggered by domestic violence.

Family homelessness may have been relatively neglected for three main reasons:

- Family homelessness has been assumed not to exist on a large scale because existing welfare and homelessness systems are geared to stop children experiencing abuse and extreme poverty.
- Lone women with dependent children may be experiencing hidden forms of homelessness, making them less visible to researchers, policy makers and service providers, which may be linked to growing evidence that gender may significantly influence trajectories through homelessness.

¹³ See Chapters 4 and 5.

¹⁴ Baptista, I. (2010) Women and Homelessness, in: O’Sullivan, E., Busch-Geertsema, V., Quilgars, D. and Pleace, N. (Eds.) *Homelessness Research in Europe*, pp.163-186 (Brussels: FEANTSA).

¹⁵ Baptista, I. (2010) Op. cit., Bretherton, J. (2017) Op. cit.

¹⁶ Busch-Geertsema, V., Benjaminsen, L., Filipovič Hrast, M. and Pleace, N. (2014) *The Extent and Profile of Homelessness in European Member States: A Statistical Update* (Brussels: FEANTSA).

- Women and children whose homelessness is triggered by male domestic violence are often not recorded as 'homeless' when they are supported by domestic violence services, again making family homelessness less visible than lone adult men living rough and in emergency accommodation.

There is another potentially important point to consider. There is evidence that homeless families have lower treatment and support needs than lone homeless adults, with the data indicating that their needs may often be short-term and relatively minor.¹⁷ Parents in homeless families are generally not characterised by high rates of drug use, severe mental illness, alcohol addiction, or contact with the criminal justice system. The needs of homeless families may often be quite different from those of lone homeless people, particularly when the needs of homeless families are contrasted with those lone homeless people whose homelessness is recurrent or sustained. Homeless families may also have distinct support needs in several respects:

- Family homelessness is more likely to be directly associated with socioeconomic position, i.e. there is evidence family homelessness often has direct *economic* causation, such as loss of employment.
- Relationship breakdown is a major cause of family homeless, but within contexts in which families at risk of homelessness tend to be facing socioeconomic disadvantage, i.e. a lone parent may be faced with homelessness because they cannot access paid employment with a sufficient rate of pay.
- Domestic violence is a major trigger factor for family homelessness and is overwhelmingly experienced by women; support needs related to this experience may exist among many homeless families.
- Family homelessness is heavily gendered; it is far more likely to be experienced by lone women parents with dependent children than by households containing two parents or a lone male parent.

The available evidence indicates that family homeless is often distinct from lone adult homelessness in a number of respects. Preventative services and other homelessness services for homeless families will often be dealing with different needs than services targeted on lone homeless people. Recognising the presence, extent and distinctiveness of family homelessness may be the first step in developing better services and strategies.

¹⁷ Pleace, N *et al.* (2008) *Op. cit.*

This research looks at family homelessness to explore several key questions:

- What is the scale and nature of family homelessness in Europe?
- Are existing preventative services sufficient?
- Are existing homelessness services effective?
- How might differences in welfare systems influence outcomes for homeless families?
- Where social housing systems are present, what roles do these play in respect of family homelessness?
- Is current research, policy and service provision taking sufficient account of family homelessness?

2.4 The Report

The following chapter presents an overview of the nature of family homelessness in Europe, reviewing the available data on the scale of the problem, the characteristics of the families who experience it and reporting the trends that are apparent. The next chapter looks at the systems and services that are designed to prevent family homelessness and, when family homelessness occurs, to stop it from becoming protracted. The varied responses to the same group of homeless families across the 14 countries are then explored in a chapter that is based on the vignettes included in the questionnaire. The report concludes with a brief discussion.

3. The Experience of Family Homelessness

3.1 Introduction

This chapter of the report reviews the available evidence on the experience of family homelessness in the fourteen EU member states that were involved in the research. The chapter begins with a discussion of definition and measurement, explores current evidence on the nature and extent of family homelessness and then examines the available data on the causation of family homelessness.

3.2 Definition and Measurement

A previous comparative report analysed the definitions and measurement issues in Europe at length.¹⁸ We will not go into great detail about the methodological, logistical and definitional questions that arise when attempting to measure homelessness in this report. However, it is important to be aware of some substantial differences in the ways in which different European countries measure homelessness.

Homeless families in emergency shelters, temporary accommodation, hostels and other specific accommodation provision for homeless people are included in the definition of homelessness in all countries (as far as any “official” definitions of homelessness exist). Measurement approaches vary considerably, with significant differences in the range of data collected. Several countries have no specific homelessness accommodation for families.

Homeless families are extremely unlikely to sleep rough in some of the more affluent EU countries like Sweden, Denmark, Ireland, the UK and Germany. The questionnaire responses included no evidence from France, Spain, Portugal, Greece, Slovenia and Slovakia about families sleeping rough. Romania was an exception, where there was evidence of street homelessness among children.

As noted in Chapter 2, this research focuses on family homelessness among European citizens, but it is noteworthy that there is some evidence of families who are seeking asylum, or whose application for asylum has been turned down, living

¹⁸ Busch-Geertsema, V. *et al.* (2014) Op. cit.

rough. In the larger cities in Belgium, especially from Gent and Brussels, a recent increase of rough sleeping families, especially by migrant families with a precarious residence status was reported.

In a number of countries, a separate system of provision for victims of domestic violence (mostly women) exists and data collection on homelessness does not cover the women (and children) who make use of these facilities. The homelessness of women with children at risk of domestic violence who use domestic violence services may not be recorded, or not recorded consistently, in homelessness statistics, this being the case in Germany and Ireland. National homelessness surveys in Spain only partially cover women whose homelessness was triggered by domestic violence. There are also some countries where women and children escaping domestic violence are not defined as homeless. On the other hand, women in refuges for victims of domestic violence are explicitly included in homelessness data collections in the UK¹⁹ and Sweden. In Denmark, women using refuge services are recorded separately and not counted as part of the homeless population.

The situation is similar for “hidden homelessness”. Families temporarily sharing with friends and relatives due to lack of housing may not be defined as homeless. They are explicitly covered by homelessness statistics and surveys in Denmark, Sweden and the UK. In Germany, families experiencing hidden homelessness are covered in regional statistics, if they make use of advice centres for homeless people. In Belgium, families experiencing hidden homelessness are covered by a national definition, but not recorded in existing regional surveys. In all other EU countries covered by this study they are not included in relevant data collection and in some of them (Hungary, Greece, Portugal and Spain) this situation (“doubling-up”) is not defined as homelessness.

Most country experts report a lack of data about the specific situation of homeless families. In many of the countries covered by this study, single people without children are presumed to make up the bulk of persons who experience homelessness. However, in Ireland the number of homeless families has increased dramatically in recent years and in the UK, homeless families were the primary focus of homelessness legislation, first introduced in 1977.²⁰

Unreliability and incompleteness of data around homeless populations who are not in contact with formal services is a potential issue here. Some recent research is indicating that low rates of contact with homelessness services and a potentially greater tendency to use informal resources, i.e. friends, relatives and acquaint-

¹⁹ Recording systems in the UK may not always be fully integrated into the homelessness statistics.

²⁰ Lowe, S. (1997) Homelessness and the Law, in: Burrows, R., Pleace, N. and Quilgars, D. (Eds.) *Homelessness and Social Policy*, pp. 19-34. (London: Routledge),

ances, to keep a roof over their head has led to undercounting of women's homelessness.²¹ There may need to be a re-consideration of the assumptions that homelessness is largely experienced by lone men in many European countries, if this pattern of service avoidance and reliance on informal support is also present among homeless families. Some North American research has found that homeless lone women with children exhaust informal resources, staying with relatives and friends as long as they can, before approaching formal homelessness services.²² An analysis of the statutory homeless system in England in the mid-2000s showed a very similar pattern, with both lone women parents and couples with children, trying to solve their own homelessness before approaching local authorities for help, meaning that there were often periods of hidden homelessness, which could sometimes be sustained, before a family approached services for help.²³

3.3 Levels of Family Homelessness

Families were described as an emerging presence in the homeless populations in Slovenia, Slovakia and Greece. In several countries, no data exist on homeless families, in others, experts reported limited data on homeless persons who were "parents" (without sufficient information to determine if they were families, i.e. whether their children were living with them).

Families were reported as being only a minority of the homeless population in Germany, Denmark, and Portugal. In Portugal, a survey of homelessness service hubs conducted by the expert found very low numbers of homeless families. In Denmark, the latest bi-annual survey from 2017 shows that 248 homeless women and 48 men had daily care of children. Given that overall about 6600 homeless persons were covered by the survey in the week of the survey, these families constituted less than 5% of the total, although this was an increase from 3% in the survey in 2015.²⁴

Statistics from North Rhine-Westphalia (NRW) in Germany, and also from Flanders in Belgium, show varying levels of family homelessness reported by different types of homelessness services. In homeless services of the German Non-Governmental Organisation (NGO) sector the latest statistics in NRW (point in time survey of 30 June 2016) show only 5.5% of homeless people were families with children (2.3%

²¹ Busch-Geertsema, V. *et al.* (2014) *Op. cit.*; Pleace, N. (2016) *Exclusion by Definition: The Under-Representation of Women in European Homelessness Statistics*, in: Mayock, P. and Bretherton, J. (Eds.) *Women's Homelessness in Europe*, pp. 105-126. (London: Palgrave Macmillan).

²² Shinn, M. *et al.* (1998) *Op. cit.*; Shinn, M. *et al.* (2013) *Op. cit.*

²³ Pleace, N. *et al.* (2008) *Op. cit.*

²⁴ Benjaminsen, L. (2017) *Hjemløshed i Danmark 2017. National kortlægning*. [Homelessness in Denmark 2017. National Mapping]. (Copenhagen: VIVE).

couples and 3.2% single parents). However, in temporary accommodation provided by municipalities, the proportion was considerably higher as municipalities tended traditionally to focus on provision for homeless families. The numbers still indicate that homeless families are a minority, at 12.3% of all homeless households were families with children (7.2% couples and 5.1% single parents).²⁵

Data from Flanders show that while the proportion of families in winter shelters in January 2014 was 15%, at the same time about 25% of all homeless persons offered transitional housing by Centres for General Welfare (CAW) were homeless families. The figure for homeless people being offered transitional housing by Public Centres for Social Welfare (CPAS) was higher still, 40% of this group were families. Flemish data were reported as recording that one quarter of eviction cases involved children.

In Sweden, most homeless families are found in apartments in the secondary housing market. The last homelessness count in 2011 found 13 400 apartments with special contracts. 1 900 families with an estimated minimum of 3 600 children were living in such apartments. So, the percentage of families among homeless households living in the secondary housing market was around 14%.²⁶ It has to be noted that apartments in the secondary housing market are long-term housing solutions, and families living in these apartments would not be defined as homeless in many EU countries.

The latest data from France²⁷ show a rather high proportion of families among homeless people. A total of 81 000 homeless adults were accompanied by 31 000 children. Homeless families made up 29 per cent of all homeless people (12% single parents and 17% couples with children). However, the French data contained information on migrant populations who were homeless and who can access emergency accommodation, experience among French citizens may be lower.

Ireland has seen an unprecedented growth of family homelessness since 2014 and a growing incidence of children in emergency settings, particularly in the Dublin region. During March 2017, 815 of the 1 069 families in emergency accommodation

²⁵ MAIS (2017) *Integrierte Wohnungsnotfall-Berichterstattung 2016 in Nordrhein-Westfalen* [Integrated Reporting about Cases in Urgent Need of Housing 2016 in North Rhine-Westphalia], (Düsseldorf: MAIS). http://www.sozialberichte.nrw.de/sozialberichterstattung_nrw/kurzanalysen/Kurzanalyse-2-2017.pdf

²⁶ National Board of Health and Welfare (2011) *Hemlöshet och utestängning från bostadsmarknaden 2011 – omfattning och karaktär* [Homelessness and Exclusion from the Housing Market 2011 – Extent and Character] (Stockholm: Socialstyrelsen).

²⁷ A 2012 survey of urban areas with more than 20 000 residents. Yaouanq, F. and Duee, M. (2014) *Les sans-domicile en 2012: une grande diversité de situations* [The Homeless in 2012: a Broad Diversity of Situations], in: F. Yaouanq and M. Duée, *France, Portrait social*, Edition 2014, INSEE.

(76%) were residing in commercial hotels due to capacity limitations in homeless emergency accommodation.²⁸ Among the adult population in emergency accommodation in March 2017, 38% were adults with dependent children.²⁹

In Hungary, a considerable number of families and children living in temporary homes for families have been reported. In the Census of 2011, 2 258 children (400 of them living in temporary homes for children only) and 1 970 adults were living in these facilities. For 42% of those in the temporary homes for families and for almost 40% of those in temporary homes for children, the main reason for being there was that housing problems were being experienced by the parents.³⁰

Data from Romania can only give rough indications on the extent of the problem of children in the streets. According to data collected by Child Protection Authorities, 695 children (0-18 years old) were registered in 2014 as living on the street, 194 of them permanently living there with their families, 165 on their own and 336 working on the streets and returning to their families during the night. Experts stated that real numbers, especially of those living on the streets, would be much higher. The organisation Save the Children in Romania carried out a study in 2014 on homeless children and youth (0-35 years old) using the capture-recapture methodology and found 1 113 individuals in Bucharest (58% of them living permanently on the streets and 42% only temporarily). Although the age limit is rather wide here, Romania was the only EU country in this study reporting a quite substantial number of families sleeping rough, with lone children also reported to be sleeping rough.

The UK data on homelessness families show distinct features for different jurisdictions in the country: In England, throughout the years 2010-2016 an average of 71% of all homeless people found statutorily homeless are homeless families, reflecting the legislative focus on homeless families.³¹ An average of 47% of all homeless people in the statutory system are single mothers, showing a clear over-representation of this household type among homeless households. In Scotland, the proportion of family households seeking assistance has always been lower than in England. Government statistics from 2015/2016 show that 27% of all homeless households seeking assistance in Scotland contained one or more

²⁸ DRHE (2017a) *Infographs of Families who are Homeless in the Dublin Region* (Dublin: DRHE). Available at: <http://www.homelessdublin.ie/homeless-families>

²⁹ DRHE (2017b) *Performance Report 2017 Relating to the Protocol Governing Delegation of Section 10 Funding for Homeless Services to Dublin City Council* (Dublin: DRHE)

³⁰ KSH Statisztikai tükör 2014/11 – Gyermekek átmeneti gondozása

³¹ Source: Department for Communities and Local Government (DCLG)

children, lone parent families predominating among them.³² In Wales and Northern Ireland, the proportion of homeless families was somewhat higher (44% in Wales,³³ around 40% in Northern Ireland³⁴).

These UK data are not measures of overall levels of family homelessness, being a record of homeless families contacting with the four statutory homelessness systems. Recorded levels of family homelessness are lower than was once the case, reflecting an increasing emphasis on homelessness prevention, starting in England from 2003/4 onwards, then emerging in Scotland, with radical reforms to increase prevention being implemented in Wales in 2015.

3.4 Trends in Family Homelessness

For almost half of the countries included in this study (Hungary, Greece, Portugal, Slovakia, Slovenia, Spain, and Romania) reliable trend data are not available. Some of the experts assumed that there has been an increase of family homelessness due to the recent economic crisis and evictions, e.g. in Spain, Romania and Greece. For Greece, it is also assumed that a growing number of homeless families are among those people seeking asylum, but no data can be provided for these assumptions.

Data from Denmark and Germany show a sustained decrease in the number of homeless families until quite recently. However, in both countries a moderate increase in family homelessness is being reported in the latest available statistics.³⁵

All of the EU member states included in this study, which had trend data available, reported some recent increases in family homelessness, although the extent of increases varied widely:

- In the Swedish City of Malmö, the most recent homelessness count in 2016 showed that 34% of homeless adults had dependent children living with them, the majority of them coming from foreign countries. In previous counts, the proportion of adults with children had been much lower (2013: 16%; 2009: 10%).³⁶
- In England, levels of statutory homelessness among families have increased by 59 per cent between 2010 (25350) and 2016 (40530), many of them being placed in temporary accommodation, particularly in London and the South East of England.³⁷

³² Source: Scottish Government.

³³ Source: Welsh Government

³⁴ Source: Northern Ireland Housing Executive

³⁵ For North Rhine Westphalia in Germany.

³⁶ City of Malmo, Homelessness count October 2016.

³⁷ Source: DCLG <https://www.gov.uk/government/collections/homelessness-statistics>

- Ireland has seen an increase of homeless families of more than 265% in less than 3 years between July 2014 (344 homeless families) and March 2017 (1 256 homeless families).³⁸
- For the Paris region, the free telephone helpline for homeless people (115) reported an increase of homeless families being accommodated by more than 300 per cent between 1999 and 2010,³⁹ mainly due to a considerable growth of migrant families who are eligible for homelessness accommodation, irrespective of their administrative status in France, in contrast to most other EU countries.

Among the factors mentioned as influencing recent increases of family homelessness, housing market changes and the lack of sufficient affordable housing for families, were reported as playing an important role, particularly in Ireland, Sweden and the UK. The lack of affordable housing, which is a longstanding problem in Denmark, Germany, Belgium, France, Sweden and Greece, has been exacerbated by increased immigration and inflows of refugees with a high proportion of families fleeing from war and economic misery and being in need of housing.

3.5 Differences with Other Forms of Homelessness

In most EU countries, families with children were reported as being at a substantially lower risk of becoming homeless than single people or couples without children. There are better social ties in some of the southern EU countries and more comprehensive welfare systems in countries like France, Denmark, Slovenia, Sweden and Germany. However, there are dangers in generalising, because informal support from friends and relatives may be very important in any context, and every European country has welfare services designed to prevent the extremes of child poverty.

Child protection/social services also play an important role in preventing homelessness in most of the countries covered by this study. The structure of the housing markets and existing priority regulations for social housing favour access to permanent housing for families with children in various countries, they are explicitly mentioned by the experts for Germany, Denmark and the UK.

³⁸ Source: Dublin Regional Housing Executive <http://www.homelessdublin.ie/homeless-statistics>

³⁹ Vandentorren, S., Le Mener, E., Oppenchain, N., Guyavarch, E. *et al.* (2016) Characteristics and Health of Homeless Families: the ENFAMS Survey in the Paris Region, France 2013, *European Journal of Public Health* 26(1) pp.71-76.

Obviously – as existing data show – lone mothers are at much higher risk of homelessness than couples with children and are therefore disproportionately represented in the numbers of families becoming homeless. Economic hardship, relationship breakdown and domestic violence seem to be the most important causes of this form of homelessness.

3.6 Hidden Homelessness among Lone Female Parents

Only a few countries (Denmark, UK and Ireland) have data about the phenomenon of “hidden homelessness” among single mothers. In Denmark, most homeless people with children covered by the homelessness count were staying with family or friends and relatively few stayed in institutional accommodation (in the majority of Danish shelters, children under 18 are not allowed, and only relatively few family institutions offer accommodation for these families).

In England, one study found that 41% of adults in homeless families reported that they had stayed with friends or relatives because they had no home of their own and 85% had undertaken one or more actions (including seeking to stay with friends, relatives and acquaintances as well as seeking more formal assistance) to try to stop their homelessness, prior to applying to a local authority for assistance.⁴⁰ In Ireland, evidence was available from smaller scale studies that a majority of homeless families stayed with friends/family members, often for a number of months (or even years in a minority of cases) before presenting to a local authority.⁴¹

Data from a national homelessness survey in France confirm that a significant proportion (22%) of all homeless people covered by the survey had been living with parents or friends one year before the survey.⁴² Persons with a single dependent child were among those staying with someone else for the longest period, but this was also the case for single people without children, for the young people and for those who had arrived in France recently. More divorced people were put up by third parties than other lone homeless people.

⁴⁰ Pleace *et al.* (2008) *Op. cit.*

⁴¹ Brousse, C. (2005) Définir et compter les sans-abri en Europe: enjeux et controversées [Defining and Counting the Homeless in Europe: Issues and Controversies] *Genèse* 58, pp. 48-71.

⁴² Brousse, C. (2006) Devenir sans-domicile, le rester: rupture des liens sociaux ou difficultés d'accès au logement? [Becoming and Remaining Homeless: a Breakdown of Social Ties or Difficulties Accessing Housing?] *Economie et Statistique* 391-392, pp. 43-78. <https://www.insee.fr/fr/statistiques/fichier/1380726/docf0906.pdf>

Almost all other experts from countries reporting a lack of data nevertheless agreed that a proportion of single mothers with children exhausted other options before seeking assistance from the “official” support system. Several reasons for this were mentioned:

- There is no adequate provision for homeless mothers with children; shelters are mainly reserved for single persons without children.
- The mothers fear that their children might be taken into custody.
- Staying with friends or family members is frequently seen as a “temporary solution to a housing crisis.

However, it should be emphasised that seeking informal solutions before presenting to an official support system is also a widespread strategy for many single men and women without children. Lone mothers may respond to homelessness in this way at a higher rate, because of the first two reasons mentioned above, i.e. the fact that sleeping rough is not an option and because extended family and friends might be more willing to support a homeless woman with a child.

3.7 The Impact of Family Homelessness on Children

In most of the countries included in this study, there was very limited research evidence on the impact of family homelessness on children. The few studies available indicate that lack of privacy, lack of space to play, nowhere to bring home friends and socialise, movement between schools (particularly if frequent) and a lack of quiet space to complete homework can all be detrimental to child development.⁴³ Stigmatisation may be an additional problem and children might tend to hide their housing status to others. Local and regional studies in Belgium (Flanders), Ireland, Spain, Sweden and in France show that children in homeless settings can experience stress, anxiety and behavioural problems as well as poor health and fatigue. Limited cooking facilities and food storage and very limited means may lead to bad nutritional health.

The situation of children on the street, reported in Romania, is particularly severe. According to evidence from the Romanian expert, only 28% of the school-aged population of children living permanently in the streets was enrolled in education (and only 50% of those temporarily in the street). More than half were victims of violence. Drug use was widespread and half of the drug users had hepatitis.

⁴³ See for example, Pleace, N. *et al.* (2008) *Op. cit.*

3.8 Reasons for Family Homelessness

In most countries we have surveyed, experts reported that family homelessness had different causes to homelessness among lone adults. Family homelessness was reported as being more likely to be caused by structural factors such as lack of affordable housing, poverty and the increasing gap between rent levels and welfare benefits. The stronger association with structural factors may also explain a considerable divergence in the extent of family homelessness across countries.

Differences in welfare and housing systems and wider differences in economic systems, such as the extent of poverty and unemployment, may shape the patterns of family homelessness and the risk that low income and vulnerable families will experience homelessness. There is a need for some caution here as the data available on family homelessness are limited in many instances and are often not comparable. Moreover, there is a clear causal link with domestic violence as well as economic factors, and it cannot be assumed that individual characteristics, needs and behaviour do not play some role in causation.

Family homelessness generally receives far less research and policy attention than is the case for homelessness among lone adults in general, and homeless men who are sleeping rough, or in emergency accommodation, in particular. There are only very few studies on the profiles and reasons for family homelessness. In the UK, a study examined families using the statutory homelessness system in England and found patterns which subsequent work has tended to confirm.⁴⁴ The key findings of the study were:

- A broad tendency for family homelessness to be experienced primarily by younger women, who are socially and economically marginalised lone parents with small dependent children.
- A strong association between male abuse/domestic violence and experience of family homelessness, reflected in the presence of a disproportionate number of women lone parents who had experienced violence or abuse.
- The majority of homeless families were characterised by economic exclusion, although a small number contained people in (poorly) paid work, families tended to be unemployed, because of childcare responsibilities and because they lacked both educational attainments and work experience.
- Homeless families were not a high need group. The high rates of drug/alcohol use, severe mental illness, criminality, poor physical health and poor access to emotional support found among lone homeless adults and young homeless people were largely absent from the adults in homeless families.

⁴⁴ Pleace, N. *et al.* (2008) *Op. cit.*

- The largely female-headed lone parent households who had sought assistance under the homelessness law had often tried to avoid using the statutory system. In line with the results of earlier American research (and subsequent Irish research), women and women lone parents experiencing homelessness had quite often tended to have exhausted informal options, i.e. staying with family, friends and acquaintances, prior to seeking assistance under the homelessness laws. Women and their children had often been homeless for some time before seeking formal help.
- Negative impacts of homelessness on adults and children, including poor quality temporary accommodation (no space for children to play, to invite friends around, to do homework), and having to move around, for example between different temporary accommodation addresses, which could disrupt social networks, contact with services and education.

An analysis in Flanders reported that one quarter of evictions cases involve children. Eviction *may* result in homelessness, or be a contributing factor, but homelessness is not consistently triggered by eviction. Many evicted families do not experience homelessness, instead they secure alternative housing.⁴⁵

In Germany, a study on the prevention of homelessness showed that the large majority of households in contact with preventative services are imminently threatened with homelessness because of rent arrears.⁴⁶ This nationwide study conducted in 2004, showed that 92.9% per cent of all couples with children and 83.4% per cent of all single women with children came in contact with homelessness prevention services due to rent arrears. Among single mothers, a significant proportion (18.9%) were threatened with homelessness because of a separation from a partner, which might also have been contributing to their rent arrears.

In the same German study, prevention services reported support needs because of addiction for 5.5% of all couples with children and because of mental health problems for 3.8%. For single mothers, the proportions were 3.7% (addiction) and 9.5% (mental health). Compared with single men without children (9.4% mental health problems, 17.6% addiction problems), addiction problems were less frequent for families with children. It has to be kept in mind that the target group of the German study were households threatened with homelessness. It is highly probable that prevention services were more successful in preventing homelessness for

⁴⁵ Kenna, P., Benjaminsen, L., Busch-Geertsema, V. and Nasarre-Aznar, S. (2016) *Pilot Project – Promoting Protection of the Right to Housing – Homelessness Prevention in the Context of Evictions* (Brussels: European Union).

⁴⁶ Busch-Geertsema, V., Evers, J. and Ruhstrat, E.-U. (2005) *Wirksamkeit persönlicher und wirtschaftlicher Hilfen bei der Prävention von Wohnungslosigkeit* [Effectiveness of Social and Economic Support for the Prevention of Homelessness]. (Bremen: GISS).

those households, where the problem was of a purely financial nature, than for those households with mental health and addiction problems at risk of homelessness. However, there was no comparable study about the frequency of mental health and addiction problems among homeless families.

Irish research also reports low support needs among homeless families in emergency accommodation.⁴⁷ In Sweden, again, the proportion of homeless parents with mental health problems or substance abuse was much lower than among lone homeless people. Swedish data also confirm that many homeless families were in a precarious financial situation, the most common reasons for being homeless were rent arrears, no previous references from the housing market and relationship breakdown.⁴⁸

Some of the evidence collected by this research tended to reflect the patterns suggested elsewhere. In Sweden, Ireland and the UK, family homelessness was associated with sustained socioeconomic disadvantage, being disproportionately experienced by lone women and being associated with domestic violence, but not being linked with high support and treatment needs. However, in France, Hungary and Romania, the experts took a different view of family homelessness, associating it with poor mental and physical health and sometimes complex needs.

One partial explanation for this was the basis on which data were collected. France had statistics on a population of homeless families which included a large number of asylum seekers and migrants, who were found to have high rates of mental and physical health problems.⁴⁹ By contrast, United Kingdom data, while including some refugee households (who can access statutory systems) are almost entirely about British families who are experiencing homelessness, and show generally low support needs.⁵⁰

This explanation of differences does not apply to Hungarian data, which are mainly focused on Hungarian families experiencing homelessness. In this case, a set of 'support needs' was strongly associated with homelessness. However, some of the apparent differences between these families and those experiencing homelessness in other countries may be down to the categorisation of what a support need is. In the Hungarian example, 'conflicts and aggression' and 'volatile emotions' within

⁴⁷ Walsh, K. and Harvey, B. (2015) *Family Experiences of Pathways into Homelessness: The Families Perspective* (Dublin: Housing Agency). Available at: <https://www.housingagency.ie/getattachment/Our-Publications/Latest-Publications/Family-Experiences-Report-PDF.pdf>

Focus Ireland (2016/2017) *Insights into Family Homelessness Series* (Dublin: Focus Ireland).

⁴⁸ National Board of Health and Welfare (2011) Op. cit.

⁴⁹ *Rapport d'enquête ENFAMS* [ENFAMS Survey Report] (2014). (Paris: Samusocial). Available at: <https://www.samusocial.paris/enfams-enfants-et-familles-sans-logement-en-ile-de-france>

⁵⁰ Pleace, N. et al. (2008) Op. cit.

the family were defined as support needs, whereas in other contexts, problematic or indeed violent relationship breakdown, would not be defined as a 'support need', in the same sense that an untreated mental or physical illness, or a need for practical assistance in running a home, but as a cause of homelessness. Differences in measurement and approach should not be exaggerated, as for example, preventative services will – where there is no risk – try to stop a family coming apart and becoming homeless in much of North Western Europe, but the variations in how issues are conceptualised and measured may explain many apparent differences between Hungarian and, for example, Irish or Swedish family homelessness.

In Romania, homeless families were also described as having complex needs. However, these needs existed in a context in which relative levels of welfare benefits, health and social service provision were lower than in some other European countries. The identified needs included nutrition, hygiene, health care, and education for the children, issues that would not arise in the same way in countries with more extensive welfare safety nets and comparatively well-funded health and social services. Alongside this, there was some evidence of more complex needs, such as severe mental illness and addiction, with issues in accessing services.⁵¹ Again, these apparent differences in levels of need may be explained, at least in part, by the types and range of need being reported. Equally, while reporting the evidence of generally low support needs in countries like Ireland, Sweden and the United Kingdom, it is important not to neglect the data showing that homeless families with high – sometimes very high – support needs are present in these countries, albeit as a minority of homeless families.⁵²

3.9 Poverty

Table 3.1 shows the at-risk-of poverty rate (below 60% of median income) for different household types in the general population across the countries included in our survey. It is clear that the poverty rate amongst single adults with dependent children is considerably higher than the national averages for all households, and also well above the poverty rates for households with two or more adults, with or without dependent children.

In most countries, the at-risk-of poverty rate is higher in households with children, both for households with single adults and in households with two or more adults. For example, in France, we find an at-risk-of poverty rate of 36.7% amongst single adults with dependent children compared to 17.2% amongst all single adults, and

⁵¹ See Chapters 4 and 5.

⁵² Jones, A., Pleace, N. and Quilgars, D. (2002) *Shelter's Homeless to Home: An Evaluation* (London: Shelter).

an at-risk-of poverty rate of 13.6% in households with two adults or more with dependent children, compared to 7% in households with two or more adults without dependent children. The same pattern is found in most other countries. Yet, there are exceptions. In Denmark, the at-risk-of poverty rate is 26.9% amongst all single adults, whereas it is lower, at 21.1% amongst single adults with dependent children, which is the lowest at risk-of-poverty rate amongst single parents that we find in our study. The relatively generous welfare benefits for both lone parents and couples with dependent children in Denmark (and a generally lower poverty rate than in most countries) widely explains this pattern and is an important factor in explaining why we see a low level of family homelessness in Denmark.

Table 3.1 At-risk-of poverty rates in 2015 for different household types

	Single adult	Single adult with dependent children	Two or more adults without dependent children	Two or more adults with dependent children	Total poverty rate, all households
Belgium	21.2	35.7	10.1	12.9	14.9
Denmark	26.9	21.1	6.7	6.5	12.2
France	17.2	36.7	7.0	13.6	13.5
Germany	33.1	33.7	11.6	10.1	16.7
Hungary	24.0	32.2	16.1	25.2	14.8
Greece	15.4	37.5	9.1	17.1	21.3
Ireland	35.0	38.4	9.8	14.2	16.3
Portugal	25.4	34.6	14.7	21.0	19.5
Romania	29.8	39.7	13.3	31.5	25.4
Slovakia	15.0	29.9	6.3	15.2	12.3
Slovenia	35.4	32.5	9.3	11.4	14.3
Spain	20.3	37.5	15.9	26.8	22.1
Sweden	34.5	31.3	7.1	8.2	14.5
UK	23.4	29.6	12.2	16.7	16.7

Source: Eurostat. At-risk-of-poverty rate by poverty threshold and household type – EU-SILC survey. Available at: http://appsso.eurostat.ec.europa.eu/nui/show.do?dataset=ilc_i03&lang=en

3.10 Lack of Affordable Housing

The lack of affordable housing was also described as a major explanatory factor of family homelessness. Whilst poverty can be a trigger to family homelessness in and of itself, it must be properly contextualised in relation to housing markets. Welfare benefit levels can be insufficient to afford private rented housing at the lower end of the market and in many countries the nature of much available employment – short-term, part-time, insecure and poorly paid – means that earning enough income to afford adequate housing on the open market is not always possible.

Thus, in combination with differences in poverty patterns, differences in housing systems are also an important factor in explaining differences in the extent of family homelessness across countries.

In Ireland, where family homelessness has increased rapidly in recent years, especially in the Dublin area, O'Donoghue-Hynes (2015)⁵³ conducted an analysis of initial assessment forms of newly homeless families who had presented to homeless services. Half of the families stated that the primary reason for their homelessness related to a loss or inability to secure private rented accommodation. A further 40% of families reported that they became homeless due to an overcrowded living situation "or that there was some element of relationship breakdown that triggered their rooflessness" (O'Donoghue-Hynes, 2015, p.3).⁵⁴

However, O'Donoghue-Hynes stated that more investigation was needed to determine whether these families had been living in the private rented sector prior to this overcrowded or inadequate living situation. Telephone surveys conducted by Focus Ireland shed further light in these accommodation trajectories prior to being accommodated in emergency settings.⁵⁵ Over the four waves of telephone surveys which were captured during 2016, 70% of all survey respondents reported that their last stable accommodation was in the private rented sector and 14% reported the family home, the latter group being more likely to be young families whose living situation became too crowded when they had a child. Thus, the distressed housing market, especially in the Dublin region, is a key driver of the recent rise of family homelessness in Ireland, and shows how changes in patterns of family homelessness in this case is intimately related to macro-level factors in the housing market and specifically – affordability and supply.⁵⁶

Likewise, in France, the shortage of affordable housing and a rising gap between rent levels and social benefits have been highlighted as a major reason for family homelessness. The annual report of the Fondation Abbé Pierre (2013)⁵⁷ rose what was seen as the crucial and recurrent problem with the inadequacy of individual housing welfare benefits:

⁵³ O'Donoghue-Hynes, B. (2015) *Analysis of 78 Homeless Families Accommodated by Dublin's Homeless Services in August 2015: A Briefing Paper* (Dublin: Dublin Region Homeless Executive).

⁵⁴ O'Donoghue-Hynes, B. (2015), Op. cit.

⁵⁵ Focus Ireland (2016) *Insights into Family Homelessness No 4: Telephone Survey of Families Presenting as Homeless During March 2016* (Dublin: Focus Ireland).

⁵⁶ O'Sullivan, E. (2016) Ending Homelessness in Ireland: Ambition, Adversity, Adaptation?, *European Journal of Homelessness* 10(2) pp.11-39.

⁵⁷ Fondation Abbé Pierre (2013) *18e Rapport annuel sur l'État du mal-logement* [18th Annual Report on Inadequate Housing].



Personal housing assistance is thus inadequate and out of step with current family realities. Their effectiveness is open to question, especially for large families, including blended⁵⁸ ones. In fact, the change in assistance scales has led to a decline in their efficiency, which translates into a high affordability ratio, especially for families renting in the private sector. The significantly slower change in rent ceilings and the flat rate on which personal financial assistance is calculated compared to real rents leads to a significant increase in the affordability ratio, the gap widening with the number of the households concerned.

In Sweden, changes on the housing market are one of the most important factors of the increasing number of homeless families in Sweden. The Swedish public housing sector has over recent decades been liberalised, including the abolition of traditional waiting lists and allocation systems in many cities and towns, giving stronger possibilities for housing associations to set their own allocation policies. Many apartments are too expensive for these low-income families to afford. Although these families are entitled to housing allowances, the rents are still too high. Another important exclusionary factor is that most housing companies do not accept welfare benefits as a steady income, which excludes lower income and poor Swedish families from the ordinary housing market. This puts the pressure on the social services to act as landlords, driving the expansion of the secondary housing market in Sweden. This market consists of ordinary apartments spread out in cities, but the tenant has signed the lease with the social services rather than with the housing companies. There are several complicating effects of this arrangement, since it is still the social services that stand as the main “tenant” on the contract.

The Swedish situation can be compared to neighbouring Denmark, both countries falling within the social-democratic cluster of welfare states. Similarly to Sweden, Denmark also has a large public housing sector (about 21% of the total housing stock). However, the Danish public housing sector has not undergone the same liberalisation, meaning that access is organised by prioritisation systems and waiting lists.

Danish municipalities also have a right to allocate 25% of vacancies in public housing to people in acute housing need, following locally set criteria, and homeless families with children are usually given high priority. Although there is generally a rising housing shortage, especially in Copenhagen and Aarhus, the availability of public housing on a large scale and targeted allocation mechanisms, in combination with the relatively generous welfare benefits for families with dependent children, may explain why family homelessness is very low in Denmark.

⁵⁸ i.e. families with a mixed cultural and ethnic composition.

However, Danish welfare reforms in 2016 have set a ceiling on social assistance benefits, effectively reducing benefits for families with dependent children. Concerns have been raised in public debates that this might increase the risk of homelessness amongst families. In the most recent homelessness count from 2017, the proportion of homeless women caring for children increased, from 11% in 2015 to 18% in 2017, alongside general increase in the number of homeless women.⁵⁹ Although the benefit ceiling was implemented only a few months before the latest homelessness count and may have had a limited impact by the point the 2017 survey was conducted, the increase in the number of homeless families may also reflect successive welfare reforms in recent years in combination with the growing shortage of affordable housing in many Danish cities and towns.

These examples from the countries included in this study show how the lack of affordable housing may play a major role in explaining family homelessness and how this social problem must be understood in relation to the interplay between housing availability, poverty and welfare systems. In particular, the examples show the dynamic interplay between these explanatory factors and how both housing market changes, population growth in urban centres and welfare reforms may all influence the risks of low income families becoming homeless, due to adverse structural trends.

3.11 Domestic Violence, Relationship Breakdown and Family Conflict

Family conflict and relationship breakdown are associated with family homelessness. There are two different aspects to this issue:

1. Relationship breakdown, either with a partner, or with parents, which leaves (usually) a lone woman parent without sufficient resources to secure and sustain housing.
2. Domestic and gender-based violence/abuse (i.e. an abusive/violent relationship breakdown with a partner or parents).

In France, the impact of family breakdowns on the development of homelessness was highlighted in a study from the Fondation Abbé Pierre (2013).⁶⁰ According to this study, people who are disconnected from family life are particularly present in all the sectors used by vulnerable groups, not only in the shelter system (26% of homeless people cite departure from the conjugal home, 21% the end of life with parents, as their reason for being in that system). In French social housing, single-

⁵⁹ Benjaminsen, L. (2017) Op. cit.

⁶⁰ Fondation Abbé Pierre (2013) Op. cit.

parent families are, on average, 19% of tenants, with the figure being up to 40% in some programmes. Lone parents are also over-represented among households who have not paid their rent or are defaulting on mortgage payments.

In Germany, there are indications of domestic violence causing homelessness among single homeless women, but according to a recent study, the proportion of single homeless women in NGO services for homeless people for whom this was the cause of homelessness was 'only' 8%.⁶¹ However, there are several caveats around this measure, as data came from NGO service providers for homeless people and they serve mainly single persons without children. Moreover, there are specific services (including refuges and shelters) for victims of domestic violence all over Germany, which do not contribute to these data, and the proportion of women made homeless by domestic violence is likely to be higher. This is the case in other countries too, where shelters for victims of domestic violence report in separate data systems, and are not included in homelessness figures (e.g. in Denmark), whereas in other countries (e.g. in Sweden), these persons are included in homeless figures.

3.12 Ethnic Minority and Migrant Families

In a number of the countries included in this study, family homelessness could be experienced at a higher rate by migrants and ethnic minorities, who were over-represented amongst homeless families.

In Ireland, telephone survey data compiled by Focus Ireland in 2016 showed that between 34% and 59% of all families entering homelessness in each wave of data collection were of migrant origin.⁶² Many of these families may have valid leave to remain in the State, and some have Irish citizenship, but their country of origin was captured to understand the ethnic and cultural distinctions emerging within family homelessness. Another Irish study, from 2010, found that many migrant families had experienced problems around affordability and discrimination in the private rented sector.⁶³

Likewise, in Sweden, immigrant and migrant families are strongly overrepresented amongst homeless families. In the latest homelessness survey in Malmo (Sweden's third-largest city) there were 593 homeless adults who had children, of which only

⁶¹ Bundesarbeitsgemeinschaft Wohnungslosenhilfe (2016) Statistikbericht 2015 [Statistical Report, 2015, p.7].

⁶² Focus Ireland (2016) Op. cit.

⁶³ Threshold (2010) *Migrants and Poverty in the Private Rented Sector in Dublin City: An Analysis of the Experiences of Migrants Seeking Assistance from Threshold*. Combat Poverty Agency, Working Paper Series 10/09 (Dublin: Combat Poverty Agency).

54 were born in Sweden. Together they represented 392 families (most are married/living together as partners). Of the 392 families, there were 221 families where the parents had been in Sweden for less than three years. Only a smaller number was born in Sweden and the rest were born in another country but lived in Sweden for more than three years). In total, 56% of the homeless families with children had been in Sweden for less than three years.⁶⁴ Thus, the risk of becoming homeless as a family in Sweden is strongly related to being born in another country and having lived in Sweden only for a short time. It is typical for these homeless families to have not established themselves on the Swedish housing market since their arrival in Sweden.

The issue of homelessness amongst Roma families was also raised by Eastern and Southern countries included in the survey. However, as experts point out, the main housing issue for this group is the problem of sub-standard and slum-like housing conditions for a large number of Roma families, that still prevail in some countries. In Slovakia, the *Atlas of Roma Communities* contains information on the infrastructural conditions of Roma settlements. It was first carried out in 2003, and repeated in 2013 with a more extensive number of settlements (1 070) and contains detailed information on housing conditions.⁶⁵ However, only individuals are recorded in the Atlas. In 2013, according to the expert, as many as 35 per cent of Roma (concretely: 76 000 persons) lived in illegal settlements, and there were three districts where this subgroup, without legal housing, comprised more than 10% of the district population. The households and dwellings in these settlements tend to be characterized by overcrowding, and the cohabitation of multiple generations in one dwelling.

⁶⁴ Source: <https://www.forsakringskassan.se>. The statistics are from the latest count in Stockholm on homeless families: <https://insynsverige.se/documentHandler.ashx?did=1885194>

⁶⁵ Roma Atlas (2013). Summary available at the website of the Ministry of Transport and Construction, http://www.minv.sk/?atlas_2013

4. The Provision of Housing and Support to Homeless Families

4.1 Introduction

This chapter examines the existing provision of housing and support services for homeless families and discusses the extent to which the presence of children may influence the extent and effectiveness of services. The chapter starts by presenting the major patterns in the provision of preventative services for homeless families in the 14 countries, distinguishing between primary, secondary and tertiary prevention systems and mechanisms. The following sections explore temporary accommodation provision, supported housing services and access to permanent housing. The chapter also considers access to support services, including support for migrant families facing homelessness.

4.2 Prevention

Preventing homelessness has been increasingly recognised as a cost-effective strategy⁶⁶ that reduces the potential harm to health, wellbeing and life chances associated with experiencing homelessness, particularly in respect of avoiding recurrent or sustained homelessness. There is less evidence around prevention for homeless families than for lone homeless adults, but some data suggest prevention can be cost effective and prevent family homelessness and all the human costs that can be associated with it.⁶⁷

Although there are different frameworks to conceptualise prevention strategies,⁶⁸ the present study adopts the following framework:

⁶⁶ Culhane, D.P. and Metraux, S. (2008) Rearranging the Deck Chairs or Reallocating the Lifeboats? Homelessness Assistance and its Alternatives, *Journal of the American Planning Association* 74(1) pp.111-121; Pleace, N. and Culhane, D.P. (2016) *Better than Cure? Testing the Case for Enhancing Prevention of Single Homelessness in England* (London: Crisis).

⁶⁷ Shinn, B. *et al.* (2013) *Op. cit.*

⁶⁸ e.g. Busch-Geertsema, V. and Fitzpatrick, S. (2008) Effective Homelessness Prevention? Explaining Reductions in Homelessness in Germany and England, *European Journal of Homelessness* 2 pp.69–95; Culhane, D.P., Metraux, S. and Byrne, T. (2011) A Prevention-centered Approach to Homelessness Assistance: A Paradigm Shift? *Housing Policy Debate* 21(2) pp.295-315.

- Primary prevention: systems to reduce the risk of families becoming homeless, such as welfare benefits to prevent family destitution and loss of housing.
- Secondary prevention: systems focused on families at high risk of homelessness, e.g. about to be evicted.
- Tertiary prevention: measures targeted at families who have already been affected by homelessness which are designed to minimise the duration of homelessness, such as systems for rapid re-housing.

4.3 Primary Prevention

The analysis of the situation in the 14 countries shows that the most common preventative mechanisms in place – within the primary prevention tier – are:

- The provision of social housing and/or housing benefits.
- A system of welfare benefits which in many countries take into account the number of children in the family.
- Debt counselling and support.

These systems can lessen the extent to which low-income families are placed at risk of becoming homeless. However, there is evidence across different countries included in this study that the effectiveness of such systems can be compromised by structural and political pressures.

In Belgium, Spain and Portugal, the level of income provided by welfare benefits was reported as being insufficient to ensure access to a decent living, including access to suitable housing. Families with children can have a higher risk of failing to afford their basic needs than lone adults in these countries. In Portugal, for example, a recent study argues that a couple with a 12-year-old child receiving the RSI (guaranteed minimum income) plus child benefits and other benefits in kind has a level of income which corresponds to only 33% of what this family would need in order to reach what the research calculated⁶⁹ as an “adequate income to live in dignity”.⁷⁰

In Slovakia, difficulties linked to the low take-up rate of the housing allowance were reported among the most socioeconomically disadvantaged groups (e.g. the Roma population). These issues were linked to a narrowly defined range of housing for

⁶⁹ For further details on the methodology please refer to the summarised presentation of the project available in English at: <http://capp.iscsp.ulisboa.pt/en/adequate-income-in-portugal>

⁷⁰ Pereirinha, J. *et al.* (2017) *Rendimento Adequado em Portugal [Adequate Income in Portugal]*, Research summary available at http://www.rendimentoadequado.org.pt/images/rap/pdfs/Brochura%20raP%20_%20FINAL.pdf

which welfare benefits could be claimed, excluding residents in flat-share arrangements, homeless hostels, and various forms of substandard housing. Romania also has a large group of people who, in spite of being eligible for housing welfare benefits, are living in very precarious housing conditions. This includes Roma households living in undocumented housing, people living in homeless hostels and short-term facilities and people renting a room in a shared house.

Geographical disparities and inequalities in access to benefits were mentioned by both by the Spanish and Hungarian experts. In Spain, alongside low levels of welfare benefit, there is wide variation among the different Autonomous Regions in relation to eligibility conditions and amount of benefits provided by the minimum income scheme (a regional based rather than a national based scheme). In Hungary, recent decentralization of the social and housing subsidies schemes has brought about disparities in the level of support available to families according to the municipality policy. The reorganisation and centralisation of debt counselling provision has also restricted the availability of this service to certain areas, in particular the bigger towns.

In the UK, where extensive benefit systems have been in place for decades, social protection for poor families is decreasing, as sustained cuts are made to the welfare state. A ceiling on benefit levels has significantly cut support for households with several children, who tend to be from cultural and ethnic minority backgrounds. A system of 'Tax-Credits' provided a relatively generous basic income for working families, but has also been significantly reduced. Approximately 30% of all children in the UK are now defined, by Government, as living in poverty.⁷¹

Other types of primary preventative measure are specific to individual countries. Some of these measures are open to households in general, whereas others aim to foster additional protection for families with dependent children.

In France, the Mutual Housing Fund (FSL), a public solidarity fund for low-income households managed at the *département* level, aims to facilitate access to and maintenance in, housing for any person or family facing insolvency. The FSL allocates direct financial aid to households and indirect aid to organisations supporting families. Paris set up the *Paris Logement Familles (PFL)*, a system of direct financial assistance aiming at supporting the most vulnerable (tenant or homeowner) families with at least two children, or a dependent child with a disability; the *Paris Logement Familles Monoparentales (PFLM)* focusses on single-parent tenant or homeowner families, with one or more dependent children.

⁷¹ https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/600091/households-below-average-income-1994-1995-2015-2016.pdf

In Hungary, socially vulnerable households (e.g. recipients of housing subsidy or foster parents) as well as disabled people may apply for a “protected status” from the electrical and gas providers. The “protected status” inhibits providers from cutting-off the service upon late or non-payment, and enables late payments and payment in parts or the instalment of pre-paid meters. According to the Hungarian experts, information on this system is not easily accessible.

In Ireland, tenancy protection measures have been approved in order to strengthen the protection of households that are dependent on social welfare and rent supplement. Rates for these welfare payments were increased in 2016, with a view to keep tenants from losing their home due to affordability problems.

In Slovakia, municipalities provide a ‘one-shot’ benefit payment to families who have no outstanding arrears/debts to the municipality. This benefit may be used to help pay the first month of rent and to buy household essentials.

Sweden has extensive welfare benefits designed to prevent families with children from becoming homelessness. Budget and debt counselling units are also provided at the municipal level, providing support to families in relation to financial planning and with debt restructuring.

4.4 Secondary Prevention

Secondary prevention services were present to varying degrees in most of the 14 countries. The exception was Romania, which had no such services.

Two main patterns may be observed across the countries where preventative services are available. These patterns are closely related to tenure patterns in two sets of countries.

The first group of countries is composed of Belgium, Denmark, France, Germany, Ireland, Sweden and the UK, where poor households are mainly tenants, either in private or social housing),⁷² in which there is provision of specialist tenancy protection/sustainment services.

In Belgium, outreach interventions have been developed that aim at preventing evictions from the social housing sector, although these are not specifically targeted at families with children. However, some 80% of evictions in Belgium occur in the private sector, limiting the reach of this service.

⁷² See Annex 1

In Germany, prevention services are active and resourceful. The support offered includes home visits, help with rent arrears, intensive support to find alternative housing and support to families with dependent children who are threatened with eviction. Municipalities are required to pay rent arrears, using a loan, if there is a probability that those arrears will lead to homelessness and if such intervention is justified; the presence of children in the household is often used as a justification for paying rent arrears.

Similarly, in Denmark, the presence of children in a household threatened by eviction triggers a proactive intervention from the municipalities that have a duty, immediately after the notification from the housing organisation, to assess the need for support to prevent evictions. Municipalities are also obliged to assess whether the eviction case is a sign of other social problems in the family and if there is a need to initiate interventions regarding support for children. Housing associations are obliged to inform municipalities of eviction notifications. In Sweden, municipalities also provide dedicated staff to work with families, landlords and housing companies in order to identify problems which may lead to evictions.

In France, coordination mechanisms have been set up – the CCAPEX (Coordination Commission for the Prevention of Evictions) – that are designed to ensure a coordinated and swift intervention from all relevant authorities, whenever there are households, in any tenure, in rent arrears. The local offices of the National Family Allowance Fund (CAF) are responsible for debt management, ahead of the legal proceedings. This includes both the detection of unpaid rent, through information provided by landlords, and the development and the implementation of a debt repayment plan. Several helplines providing information and legal assistance for households experiencing difficulties are also available e.g. *SOS impayés* and *Allo prévention expulsions*.

In Ireland, dedicated prevention services for tenants at risk of homelessness have been developed. In June 2014, a Tenancy Protection Service was initiated in Dublin. This service supports households requiring an increase to rent supplement, also providing advocacy and rehousing services, aimed at keeping tenants out of emergency homeless accommodation. A range of smaller dedicated prevention services, offering visiting tenancy support, advice and information, drop-in tenancy support clinics and specialised case management are available both in Dublin and in some other parts of Ireland. Moreover, families who can prove that they are at risk of homelessness – and not only those who have presented as homeless – are now eligible to apply for a dedicated Homeless Housing Assistance Payment.

In the UK, there is a wide range of preventative services – rather than targeted interventions on particular groups – providing mediating support whenever there are problems which might cause homelessness (e.g. family break-up, young person

leaving the parental home in an unplanned way) or prompt evictions (e.g. legal support, negotiation with landlords). Some services may offer rapid, short-term financial support to help a family over a difficult time and ensure the rent/rent arrears are paid.

A second group of countries composed by former socialist states and southern European countries – Hungary, Slovakia, Greece, Portugal and Spain – where poor households are mainly homeowners⁷³ – have secondary prevention services focused on the protection of households with mortgage arrears.

In Hungary, the National Asset Management Company (NET) was created to prevent the eviction of families with more than 180 days of arrears of payment of a foreign currency mortgage. The NET can buy the homes of families whose property does not exceed a certain value, if their income is under a certain threshold, and the former owners can rent it from the NET for a very low price.

In Slovakia, there are several legal regulations designed to protect low-income households from evictions, arising both from default mortgage loans and from other non-housing related loans. Currently, no private residential property may be put up for auction as a result of debts lower than 2000 EUR. Moreover, if the property (primary home) is sold at a price, which does not enable the full payment of the debt, the owner may challenge the decision.

In Greece, since 2010, the ‘Katseli Law’ has provided protection for indebted households from evictions related to foreclosure of their primary residence⁷⁴. However, the Greek expert refers to a recent tightening of the law (2015), which set income limits on the protection provided. The introduction of the Housing and Reintegration Programme in 2015 prioritised homeless families threatened with eviction by providing financial support, covering the costs of rented accommodation for a year.

In Portugal, similar legal regulations were introduced in 2012, aimed at the protection of families with overdue housing loans. This temporary regime – which ended in December 2016 and is currently under review – obliges a bank to propose a restructuring plan, or other alternative measures, for the settlement of the debt, thus impeding a law suit against the borrower. This system has been criticised due to the imbalance between the creditor and the debtor since, in the end, it is up to bank, as a lender, to accept the possibility of application of the measures, leaving little or no space for a true negotiation between the bank and the debtors. In 2016, another piece of legislation was approved protecting primary residences (up to a

⁷³ See Annex 1

⁷⁴ From January 2018, the protection of the first home from eviction in Greece becomes more stringent. Houses with a value of up to €300000 will now be protected.

certain property value) from being sold out by fiscal authorities. The house may be subject to a repossession order, but the family may not be evicted. Fiscal authorities need to resort to other assets to recover the debt.

In Spain, a Code of Good Practice includes similar renegotiation procedures of debts, which aim at protecting mortgage loan debtors without resources. An initial suspension of repossessions was extended from two to four years. Problems have been reported with the implementation of these measures, linked to the strict eligibility criteria and the willingness of banks to initiate such procedures.

In Slovenia, the capital city – Ljubljana – has developed a municipal housing fund to establish cooperation mechanisms with an NGO working with homeless people in order to prevent homelessness among ‘non-profit sector’ tenants. The service targets households that are not paying bills or misusing their housing before problems escalate into potential evictions

4.5 Tertiary Prevention

Tertiary prevention measures, which are designed to minimise the duration of homelessness, such as systems for rapid re-housing were less common across the 14 EU member states. Ten countries had some form of rapid rehousing mechanisms for homeless families and there was considerable variation in the types of tertiary prevention services being provided.

In Belgium, homeless people – though not homeless families – are prioritised under the fast allocation of social housing. Although there are no specific rules for families, in practice families with children are actually given priority in the search for a rapid solution. Social experiments, aimed at housing undocumented migrant families, through the legal occupation of vacant buildings, are also in progress.

France introduced the DALO law in 2007. DALO provides a legal framework for rehousing by establishing a universal state-guaranteed right to decent, independent housing for persons without sufficient resources of their own to pay for it. There is evidence that homeless people with children are over-represented among those who file applications for the DALO status. The DALO eligibility criteria objectively promote granting that status to families with a child under 18.

In Denmark, municipalities can refer up to 25% of vacancies in public housing for people in acute housing need, depending on social criteria set locally and on municipal discretion, bypassing ordinary waiting lists. In most municipalities, families with children – particularly those on social assistance benefits with some

form of social problems – will have high priority for getting this priority access. Local practices and circumstances (such as the availability of housing) may influence the extent to which homeless families will get this opportunity.

In Germany, where similar allocation mechanisms have been mostly abandoned in order to save administrative work, rapid rehousing became increasingly difficult in recent years within a context where municipalities have dropped the traditional instruments for the allocation of permanent housing. Pressures on social housing stock are acute in some areas.

In Ireland, rapid re-housing was introduced in 2015 using temporary structures which could be used to accommodate families for short periods of time. However, rapid re-housing in an Irish context (initially referred to as ‘modular housing’) has faced considerable obstacles including public resistance, difficulties in locating suitable sites, low levels of interest from construction companies and construction delays. This policy has yet to present a meaningful response to tackling the scale of family homelessness or to prevent families from entering the emergency system, which has had to increasingly resort to using hotels, particularly in Dublin.

In Portugal, the concept of rapid re-housing usually refers to providing temporary accommodation solutions, rather than ensuring access to permanent housing. Homeless families with children are in practice given priority although there is evidence of constraints in providing adequate accommodation solutions for the entire family in many locations.

In 2016, Slovenia launched a pilot project providing additional dwellings for urgent rehousing. In larger cities, emergency dwellings are used for people evicted from social dwellings in order to prevent homelessness. However, long waiting lists are common due to undersupply.

In 2012, Spain created the national level fund, the *Fondo Social de Vivienda*. This fund is aimed at facilitating access to social accommodation solutions for people who have lost their homes. Families have priority access but there have been some logistical challenges, which have limited the effectiveness of the fund. Various regional and local programmes and initiatives have also been developed with similar aims.

In many Swedish municipalities, families with children get rehoused immediately into a new apartment following an eviction. In the bigger cities, families may have to stay in temporary accommodation. Even though this is intended as a short period solution before families get rehoused, many families are stuck in this kind of arrangement.

The four statutory homelessness systems in the UK were all designed to function as a rapid rehousing response to homelessness, with a focus on family homelessness. These systems have changed considerably, from a mechanism that facilitated very rapid access to a large social housing stock, to a system that provided temporary accommodation and sought to arrange settled housing, as the social rented sector was privatised and ceased to receive significant government support. The evolving system in the UK, which will replace the former statutory homelessness model, is at its most developed in Wales. In this new system, an emphasis on prevention is combined with a system of providing 'relief' (an immediate or near immediate response once homelessness has occurred), while the former statutory system is reserved for more acute needs.

When a family presents as homeless, the response in Wales (and soon in England, Scotland and Northern Ireland), will be to attempt to prevent homelessness and, if this fails, to offer 'relief' (rapid rehousing). 'Relief' can, in theory, involve rapid rehousing in the social rented sector, but it is much more likely to involve support to move into the private rented sector. Mechanisms to facilitate this include the local lettings agency model, which offers a housing management service to private landlords, including rent guarantees, in return for control of allocation to their housing, and which can be run as a social enterprise. Sometimes simpler systems that connect homeless people to sympathetic private rented landlords, or which offer a bond, or cash, to pay a rent deposit (private landlords usually require a deposit to cover potential damage) are employed.

The effectiveness of preventative services in stopping family homelessness across the 14 countries is weakly documented. Very few countries are able to provide data (or robust data) on the effectiveness of the systems in place.

Belgium reports a high success rate among preventative services. However, as noted, 80% of evictions happen in the private rental market, whereas preventative services mainly address the social housing sector.

In Germany, a recent study on prevention of homelessness in North Rhine-Westphalia municipal prevention services recorded that they had been successful in more than two thirds (67.8%) of the households they got in contact with.⁷⁵ There are indications, but there is no exact data, showing whether this occurred more frequently among families with children than among single people without children.

⁷⁵ Busch-Geertsema, V., Evers, J. and Ruhstrat, E.-U. (2014) Prävention von Wohnungslosigkeit in Nordrhein-Westfalen [Prevention of Homelessness in North Rhine-Westphalia] (Düsseldorf: MAIS).

Preventative services in Denmark are generally quite effective. However, there is evidence of families becoming homeless through eviction.⁷⁶ Despite the obligation on housing associations to inform municipalities about eviction cases, and the duties on municipalities to assess support needs, municipalities have only limited duties for covering rent arrears (i.e. if certain criteria are met and only for short periods of time). If the arrears are not paid the eviction may be carried out, even when children are in the household. However, limitations on evictions may reduce the overall willingness of the public housing sector to house vulnerable families, a willingness that contributes to the low overall risk of family homelessness in Denmark.

In Hungary, the only available evidence refers to the operation of the NET organisation, designed to protect homeowners in arrears on foreign currency mortgages. NET had bought 27 800 homes by December 2016, and had funding for another 6 750 units of housing, but another 100 000 households still have mortgage arrears of more than 180 days. Families have the possibility of re-buying their property, but this had only happened in 170 cases as at the end of December 2016.

Ireland also has a lack of robust evidence on the effectiveness of different prevention strategies. Nevertheless, an independent review of homelessness services spending conducted in 2015 – cited by The Housing and Homelessness Committee – found that only 7% of resources were put into prevention services. Around 60% of money spent went towards emergency services and temporary accommodation. A recent report by Focus Ireland found that 75% of the individuals who contacted the Dublin prevention pilot, following the receipt of a letter offering prevention and advice service, had never got in touch with a prevention service in the past.⁷⁷ In a follow-up survey of the study, 10 of 92 individuals contacted three months later had transitioned to emergency accommodation. The remainder had remained in, or transitioned to, housing (predominantly private rented accommodation).

Evidence from England, Scotland and Wales suggests a clear link between the adoption of a preventative shift of homelessness policies and significant falls in the levels of family homelessness, thus suggesting that prevention is very effective in reducing family homelessness. Between 2003/4 when homelessness prevention was introduced and 2010, the levels of family homelessness (households with dependent children accepted as statutorily homeless) in England decreased from over 60 000 households to less than 24 000. Although the level of family homelessness has been on the rise – from 25 350 families in 2010 to 40 530 families in 2016 – these levels are still at a historic low. Questions about the possibility that preventative services are ‘gatekeeping’, diverting people away from the statutory system,

⁷⁶ Höst, A., Boje-Kovacs, B., Stigaard, D.L. and Fridberg, T. (2012) Når fogeden banker på. [When the Bailiff Knocks at the Door]. (Copenhagen: SFI).

⁷⁷ Focus Ireland (2016/17) *Insights into Family Homelessness Series* (Dublin: Focus Ireland).

when they should be given access to it, have been raised. The evidence is not conclusive, but suggests prevention is broadly effective, albeit that some gate-keeping is taking place.⁷⁸

4.6 Temporary Accommodation

Temporary accommodation for homeless families with children varies considerably across the 14 countries. Different forms of temporary accommodation – hotels, shelters, hostels, congregate supported housing, temporary homes for families, regular flats without rental contract, low-rent accommodation, and emergency housing facilities – are provided to homeless families by many of the countries analysed in this study. In most countries, the role of municipalities is central in the funding of temporary accommodation arrangements, although the actual running of such services may fall under the responsibility of NGOs.

In several countries, for example Ireland, Sweden, Spain and the UK, there is evidence that a housing shortage and increasing housing costs are pushing homeless families into temporary accommodation arrangements for longer periods of time, inducing high levels of public expenditure.

4.6.1 Belgium

In Belgium, the Public Centres for Social Welfare (PCSW) provide transitional housing to homeless families in acute need and they also pay for hotel stays for families, to avoid the use of shelters. There are some differences in the provision of temporary accommodation for homeless families across the Flanders, Brussels and Wallonia regions. In Flanders, homeless families have access to specific residential care centres run by Centres for General Welfare (CAW), delivered by NGOs, supported by the Minister of Welfare, Public Health and Family. In Wallonia, the provision of temporary accommodation for homeless families is also under the responsibility of NGOs.

4.6.2 Denmark

Family homelessness is not widespread in Denmark and in most cases homeless families with children will get access to some form of more permanent housing, mainly in the public housing sector through general waiting lists or through municipal referral. Yet, there is no right to or guarantee of housing and waiting times may vary, depending on local circumstances. Women with children fleeing domestic

⁷⁸ Pawson, H. (2007) Local Authority Homelessness Prevention in England: Empowering Consumers or Denying Rights? *Housing Studies* 22(6) pp.867-883.

abuse may also be temporarily accommodated in women's refuges specifically providing for women experiencing domestic violence. Due to the generally low levels of family homelessness, there are few institutional temporary accommodation facilities aimed at homeless families in Denmark. Homeless families thus often have to resort to staying temporarily with family or friends, where this is possible.

4.6.3 France

In France, the provision of temporary accommodation for homeless families is diversified, involving different forms of housing arrangements and a complex, multi-level structure.

Homeless families are placed in different types of temporary accommodation: hotel rooms; social re-integration and accommodation centres (CHRS) which include individualised accompaniment depending on the person's needs; social hostels which offer private areas for each family; social residences which are sheltered housing-type collective accommodation units, comprising individual rooms or flats with optional shared areas and services; maternal centres for pregnant women and single mothers, which are specific structures which can take the form of a collective hostel, or a network of flats.

Associations or local authorities are usually responsible for the management of structures like the social hostels, the CHRS or the social residences. However, the funding and overall responsibility for these structures varies considerably. For example, social hostels are financed by the Housing Ministry's emergency budget, social residences are primarily owned by low-rent social public organisations (HLMs) who depend on state funding and, finally, the CHRS are financed by the State and are under the responsibility of the Regional Prefect with the support of two different regional directorates. Maternal centres are managed either by the county, or by an association, and are under the responsibility of the county council and are overseen by the Social Affairs Ministry.

According to the 2014 ENFAMS survey, many families temporarily accommodated in different types of services are not provided with any additional support: "Depending on the type of accommodation provided and the organization providing the accommodation, services may vary significantly. In certain configurations, accommodation did not involve follow-up by social workers, either inside or outside the establishment; for example, for families sheltered by the 115 (Samu social de Paris) in cheap motels. Almost one-quarter (23.4%) of families in shelters do not have a regular social worker."⁷⁹

⁷⁹ *Rapport d'enquête ENFAMS* [ENFAMS Survey Report], Oct. 2014. Available at: <https://www.samusocial.paris/enfams-enfants-et-familles-sans-logement-en-ile-de-france>.

4.6.4 Germany

Municipalities usually provide temporary accommodation for homeless families in Germany. Homeless families will usually end up in municipal temporary accommodation. This temporary accommodation can take the form of regular flats without a rental contract. However, homeless families are often housed in temporary accommodation specifically provided for that purpose, often with low standards and located in unpopular areas.

4.6.5 Hungary

The temporary homes for families are available for homeless families in Hungary. These facilities provide different types of housing arrangements, but most commonly offer a bedroom with shared kitchen and bathroom, although some services have individual apartments.

These temporary homes are run by NGOs usually under a contract with a municipality. Although towns and districts with more than 30 000 inhabitants are required to have access to a temporary home for families, there are fewer places than are needed.

4.6.6 Ireland

In Ireland, there have been dramatic changes in the provision of temporary accommodation for families experiencing homelessness over the last ten years. Shortage of housing and rent increases have led to an increasing use of commercial hotels paid by local authorities, in the face of rapidly increasing numbers of families experiencing homelessness, particularly in Dublin.

Spending on emergency accommodation expenditure has spiked. During the final quarter of 2016, for example, 14 million EUR was spent on commercial hotels and B&Bs for homeless families, compared to 3 million EUR in the same quarter in 2013.⁸⁰

Family Transition Hubs have been developed to try to deal with the family homelessness crisis. These Hubs are to provide on-site, 24-hour support, usually through subcontracting voluntary agencies, laundry, cooking and dining facilities and areas for children. However, criticisms have been raised on the assumption lying behind the opening of such services, i.e. that the purpose of these facilities miss the existing evidence on the causes of homelessness among families.

⁸⁰ O'Sullivan, E. (2017) The Family Options Study: Observations from the Periphery of Europe, *Cityscape* 19(3) pp.207-213.

These services appear to be based on an assumption that families are homeless due to psycho-social dysfunction and therefore require therapeutic supports. However, the evidence which has emerged thus far would strongly indicate that family homelessness is due to housing market failure as opposed to problems within the family.⁸¹

4.6.7 Portugal

In Portugal, temporary accommodation for homeless families is mainly provided through the social emergency support provided by NGOs, municipalities, local social security services and by the local child protection teams. They are financed directly by the State.

Temporary accommodation may take the form of specific emergency accommodation centres for families, which only exist in very few territories, for example in Lisbon. The most common temporary solution for this type of emergency situation would be access to a room in a hostel.

4.6.8 Romania

In Romania, there are very few services that are specifically designed to address the needs of families experiencing homelessness. Therefore, night shelters for homeless people are basically the only available temporary accommodation for homeless families in acute need. These facilities are usually managed by local authorities or by NGOs.

The Casa Ioana service in Bucharest is a family focused service, providing a wider range of social support services – in contrast to the basic package offered by shelters – aiming at ensuring sustainable independent living for families.

4.6.9 Slovakia

In Slovakia, the most important types of facilities for families experiencing homelessness are homeless shelters⁸² and emergency housing facilities. These are mostly run by NGOs, although local authorities and regions also provide such temporary arrangements. Regions are legally responsible for financing the provision of temporary accommodation in Slovakia.

⁸¹ O'Sullivan, E. (2017) *ibid*.

⁸² Slovakia also has 'night-shelters' for lone homeless adults, which are not accessible to families.

Emergency housing facilities do not directly target homeless families, but some facilities may accommodate young homeless parents, or families experiencing homelessness due to an emergency situation, such as a natural disaster. The main target group of emergency housing facilities is women at risk of domestic violence, i.e. women or lone mothers with children.

In practice, much of the emergency accommodation only accommodates homeless adult individuals, due to the lack of adequate conditions for families with children. Very few shelters are focused on homeless families, and according to the expert, even in the existing ones, health insurance debts can act as a barrier to access, especially among Roma families.

There is a crisis centre⁸³ in Bratislava, which is unique in Slovakia, since it admits couples with children and lone parents. This is the only temporary accommodation of this type in the Bratislava region. It provides different types of services, namely legal counselling and psychological therapy.

4.6.10 Spain

In Spain, homeless families with immediate needs may be accommodated in hotels, low-rent accommodation, reception centres, supported housing and supervised apartments. Temporary accommodation may be time-limited, as is the case for accommodation centres for families or places in hostels, or offer more stable temporary housing arrangements, namely through collective housing units, with differentiated family units, as well as single-family homes with accompanying programmes for families. Most of the centres for temporary accommodation are privately managed, although they mostly depend on public funds.

4.6.11 Sweden

Like Ireland, housing market failures in Sweden have led to an increased use of temporary accommodation arrangements for homeless families in recent years. More municipalities are using temporary accommodation to accommodate families experiencing homelessness, due to housing shortage and increasing housing costs, particularly the bigger cities.

Although most of these temporary accommodation arrangements are provided by municipalities, there are other providers such as private companies, NGOs and social enterprises.

⁸³ In Slovakia, crisis centres provide temporary accommodation for children – with or without parents – who experienced domestic violence.

4.6.12 United Kingdom

The provision of temporary accommodation for homeless families in acute need in the UK differs significantly from that of single homeless people. As in Ireland and Sweden, acute shortages in affordable housing supply have caused high levels of temporary accommodation use, although in the UK, this process was underway by the 1980s.

Local authorities often place families in housing, sometimes from social landlords, often from the private rented sector (via leasing arrangements and via direct arrangements with individual landlords). In England, the use of *housing* (both social and private rented) accounts for 53% of the temporary accommodation provision for families being assisted under the statutory homelessness system. The use of nightly paid self-contained accommodation (apartment hotels) is also extensive at 27%. Bed and breakfast hotel accounts for only 3.5% of the temporary accommodation for families.

Expenditure on temporary accommodation has reached extraordinary levels. A recent study reported that 20 London boroughs⁸⁴ spent £463.7m (522m EUR) on temporary accommodation in 2014-15. Total spending in London has been estimated at some £663m (747m EUR) in 2014/15.⁸⁵ During 2015, there were some 37 000 homeless families in temporary accommodation, in London, at any one point.⁸⁶

Provision of purpose-built, staffed, temporary supported housing, for families experiencing homeless is not extensive in the UK. There is however, considerable service provision for women at risk of domestic violence and abuse. Within this sector, which mainly takes the form of congregate and communal housing, with on-site support staff and enhanced physical security, known as refuges, there is provision for women who are pregnant and women with dependent children.

4.7 Permanent Housing

Access to permanent housing for homeless families is often a long and difficult process in Europe. This is despite the widespread practice of making specific provision for families with dependent children who are at risk of homelessness.

⁸⁴ London has 33 elected municipalities called boroughs.

⁸⁵ Rugg, J. (2016) *Temporary Accommodation in London: Local Authorities under Pressure* (York: Centre for Housing Policy).

⁸⁶ Source: DCLG.

Long waiting lists for social housing, strict eligibility criteria and complex bureaucratic procedures create barriers. Much of the private rented and owner-occupied housing, in most countries, is out of the reach of lower income families, particularly when welfare systems do not pay enough to cover rent or mortgage payments. Much of Europe has a shortage of adequate, affordable housing, while absolute shortages of housing in some areas force up rents and mortgages.

The social housing list of 91 600 households illustrates the significant level of housing need across Ireland. Homeless families living in emergency accommodation no longer benefit from the social allocation scheme introduced in 2015.⁸⁷ Social rental schemes, for example, the Housing Assistant Payment, are the most typical route out of homelessness for families with children. Housing advice and help in securing housing is provided by case managers, keyworkers and other local service staff.

In the larger cities in Sweden, there is often a dedicated housing agency within the municipality that handles all the contracts signed with the housing companies. Some municipalities also bought apartments they sublet to their clients. Nevertheless, in these larger cities waiting periods can be as long as nine years. Housing advice and support is widely available.

In Denmark, municipalities can, as noted, refer up to 25% of vacancies in public housing for people in acute housing need, depending on locally set social criteria and discretion by the municipality. Families with children in acute housing need may be given high priority access – depending on a mix of local criteria and municipal discretion – which may be crucial given the existing general waiting lists for public housing. Moreover, families are required to cover the rent out of their general social benefits, which means that only housing with affordable rent levels (even public housing can sometimes be expensive) can be used to house these families.

In Germany, where housing policies have traditionally been family oriented, the allocation of permanent social housing is very much dependent on decisions by housing providers. There are criteria in relation to income limits for applicants; these are relatively generous, which enables relatively well-off households to live in social housing. As referred to previously, rapid rehousing became a problem within a context where municipalities exercised less control over allocations policy.

Income criteria, set at relatively high levels, are also an obstacle to homeless families in Slovakia. The criteria for (young) families to have access to public housing in Bratislava include, among others, that both parents earn at least the minimum wage, that they have the capacity to pay a three months deposit and that they have

⁸⁷ In 2015, Dublin local authorities had to designate at least 50% of their vacant housing to homelessness and “vulnerable” households ahead of the general applicants.

a housing savings plan (*stavebné sporenie*) for at least two years. Homeless families who, during their stay in a hostel, keep a good track record receive positive scores to support access to public housing.

In Portugal and Spain – apart from a structural shortage of social housing – the existence of bureaucratic procedures and the traditional split between housing and social services, hampers homeless families' access to social housing and can make moves from temporary arrangements to permanent housing difficult. Moreover, in Portugal local social services are, in general, ill-equipped to provide housing support and advice, being focused on providing support with claiming welfare benefits or other type of social services.

In Greece, bureaucratic application procedures for social housing also affect homeless families living in hostels. Informal communication among social workers is the common mechanism by which the transition between hostel accommodation and access to permanent housing is arranged, but there are again problems with housing supply.

In Hungary – where no mechanisms for providing access to permanent housing for homeless families exist – there are agreements between temporary homes for families and some municipalities to refer a small number of families to social housing.

Routes to permanent housing for homeless people are not available in Romania. Social housing programmes are not an alternative given the strict eligibility criteria, which exclude homeless people.

In France, 122 000 households defined as priority cases have obtained dwellings through the DALO law. However, housing supply limits the implementation of this right especially in regions like Ile-de-France⁸⁸. In this region, a specific programme was launched ten years ago aiming at providing an alternative to emergency hotel housing for families. Flats are rented to an NGO rather than an individual. The tenant pays the NGO a percentage of his/her income, excluding benefits. The rest of the cost is paid for by the government or by the city authorities.

In the UK, the main mechanism to provide access to permanent housing for homeless families is the statutory homelessness system existing in different forms in England, Wales, Scotland and Northern Ireland. A statutorily homeless family with children applying for permanent housing will receive priority both on social housing waiting lists and on choice-based lettings systems. However, in more affluent areas waits for social housing can be very long and the benefits system

⁸⁸ Lévy-Vroelant, C., (2015) The Right to Housing in France: Still a Long Way to Go from Intention to Implementation, *Journal of Law and Social Policy* 24 pp. 88-108. Available at: <http://digital-commons.osgoode.yorku.ca/cgi/viewcontent.cgi?article=1210&context=jlsp>

does not pay the full cost of private rented housing. At the time of writing, the statutory systems are in the process of being replaced by new systems focused on prevention and relief (rapid rehousing), which will make increased use of the private rented sector, these systems being at their most developed in Wales.

4.8 Specialised Services for Homeless Families

Belgium, France, Germany, Ireland and the UK provide various forms of specialist support services for homeless families. This can range from floating (mobile) support through to specialist congregate accommodation with on-site staffing.

In Belgium, the Flemish authority responsible for the health and wellbeing of children supports teams whom specifically work with homeless families with small children. In France, the maternal and child welfare centres (PMI) are used mostly by homeless families, particularly those families with very small children. These centres play both a preventative and a curative health role. In Germany congregate specialist services, with on-site support, are provided, mainly for single mothers with very small children.

In Ireland, apart from the homeless action teams operating across the country, there is also a Family Homeless Action team (in Dublin) that contacts homeless families from the moment they are accepted as homeless. This team carries out an initial needs assessment and provides some advice and information before the family is assigned a case manager. Once housing has been secured, the family may receive a SLI (Support to Live Independently) worker or an aftercare worker. This keyworker will support the family with the practicalities of setting up a new home, settling in and they will address any issues that may put the tenancy at risk, usually for around six months.

The UK has broadly similar services to Ireland, centred around the Housing Options Team model run by local authorities. There is generally less provision of more intensive support services than is the case for lone homeless adults, reflecting the generally low support needs recorded among homeless families.

In Sweden, additional social support is provided in many municipalities, some of which have introduced case management support and ACT⁸⁹ teams. Additionally, in several municipalities, people with mental health problems may use the assistance provided by the so-called personal ombudsman in their contacts with the authorities.

⁸⁹ Assertive community treatment, a support model for people with mental health problems, sometimes integrated into Housing First services.

Denmark reports the extensive presence of services and interventions aimed at children in families with social problems, within the child welfare system. Parents may also benefit from general interventions from the adult welfare system, both through the general floating support system and through specialised services in areas such as psychiatric support or substance abuse treatment.

Greece, Hungary, Portugal, Slovenia and Spain have social welfare services or child welfare services which provide support to families and children ranging from general health care, mental health, substance abuse, and education. Housing advice and support with claiming benefits are usually available in most of these countries. However, the effectiveness of such services in actually helping families is strongly hampered by the lack of affordable housing or of adequate benefits. No specialised services targeting homeless families are identified. Romania and Slovakia lacked specific services for homeless families.

4.9 Housing and Support for Homeless Migrant Families

Immigration status determines access to services, temporary accommodation and permanent housing across the 14 countries. For asylum seekers and undocumented migrants, some services are open, many are not, and rules may vary for EU citizens who are economic migrants and for refugees.

In general, in all the 14 countries migrant families who do not have a legal immigration status will have no rights to be provided with accommodation, to access social benefits or to access some types of services.

There are in most countries, however, charitable and faith-based services which may be used by undocumented people and families. These tend to be emergency services, often of very poor quality.

In Belgium, undocumented migrants can usually access night shelters (emergency accommodation), although some cities may have stricter regulations preventing access to people with no rights to social benefits, i.e. undocumented migrants or EU migrants with a temporary residence permit.

Similarly, in Greece, homeless migrant families in irregular situation are not entitled to social benefits and they are offered mostly non-residential services.

In Spain, only emergency services are available for immigrant homeless families in irregular situation. Access to emergency accommodation support and other basic services are also the only available services, to which migrant homeless families may resort, in Portugal. Access to a legal status and labour market integration are the main conditions for access to housing.

In France, whatever the status of an individual or family, they can seek emergency shelter in a homelessness service. Migrant homeless families are over-represented in emergency accommodation, which includes hotels.

In Ireland, families without a valid immigration status will even face difficulties when trying to access emergency accommodation. The same applies to social housing. Applicants to social housing will be assessed by local authorities on the basis of centrally defined criteria, which centre primarily on the legal immigration status. There have been cases where families have been refused accommodation, and emergency shelter provided on a nightly basis is the only alternative for these families.

In Slovenia, citizenship status and permanent residence in the municipality are the two conditions for having access to emergency and social housing, or to any type of housing support. Other social benefits are based on having permanent residence in the country.

In Germany, destitute EU and undocumented migrants who are not part of the labour force have no rights to social benefits. Denmark has similar restrictions, as does the UK, where undocumented migrants and asylum seekers cannot access the statutory homeless systems, many homelessness services, welfare benefits, or health care (except emergency treatment) whereas those with refugee status have full access. However, unlike the UK, Denmark has a lower level of social assistance benefit (the 'integration benefit') for recently arrived legal migrants than for Danish citizens.

Another particularly disadvantaged group of homeless population referred to by the UK, Ireland, Belgium and Sweden are EU migrants with only a temporary residence permit. In all these countries, this group of migrants will only get a much-diminished range of services or no services at all from the state; they also have no entitlement to social benefits. In the UK, only EU citizens already working and residing in the national territory for at least 90 days are entitled to claim welfare benefits.

There was evidence from Sweden – where most of these EU migrants are lone adult EU migrants or couples – of some immigrant homeless families who were accommodated on a camping ground in Gothenburg, since they are not entitled to any regular support.

4.10 Child Protection Systems and Homelessness

Children's rights are protected by legislation in all the countries analysed and the wellbeing of children is at the core of all European social policy. Poor economic conditions or the loss of housing were not legitimate reasons for children to be taken into care by the State in any of the 14 countries. Nevertheless, different perspectives on the protection of the rights of the child existed across the 14 countries and this could produce some variation.

In Ireland, the state considers that family homelessness is a housing issue that is the responsibility of the housing authorities and the presence of children does not transform it into a 'child welfare issue'. As a consequence, only in exceptional cases will the children be taken into State care. However, there have been reports of children being taken into care for the night in some cities such as Cork, where no family accommodation is available.

In France, Germany and Hungary legislation and services converge in ensuring the provision of the necessary support to parents aiming at the wellbeing of children. In Hungary, there are systems for coordination between child welfare services working with families before they become homeless, during homelessness and after re-settlement.

In some countries, for example, Belgium, Portugal, Romania and Slovakia there is evidence of children being removed from a homeless parent or parents whenever the family cannot provide for the basic needs of the child. Spain and Slovenia also reported some anecdotal evidence of this occurring.

Although homelessness is not a sufficient reason for withdrawing the child's custody from parents, the lack of enough support available for homeless families in coping with their needs, the presence of substance abuse and/or mental health problems of one of the parents or begging behaviour may be the basis for a removal decision. The principle of keeping families together is overrun by the principle of the superior interest of the child

Homelessness, in itself, was not likely to cause a child to be removed from a family in Germany, Sweden and the UK. In the UK – where children could be removed from parents due to homelessness as late as the 1960s – child removal only occurs as a direct result of parental action which results in child abuse and or neglect (which is an entirely separate issue from whether or not they are homeless). However, where homelessness is deemed to be 'intentional' by a local authority, i.e. the parent or parents are assessed as not qualifying for accommodation and support with housing, social services will review the situation of children and *may* take them into care, if those children are at risk.

4.11 Homeless Families and Domestic Violence

Despite the links between homelessness and domestic violence, service responses to homelessness and domestic violence are largely distinct across most of the countries included in the study.

Moreover, in several countries (e.g. Denmark, Germany, Ireland, Portugal, Slovenia and the UK), women accompanied by children temporarily accommodated in women's shelter or refuge accommodation are not considered or counted as homeless families. Services providing such support are also not usually defined as homelessness services.⁹⁰

The most common form of supported accommodation for women and children fleeing domestic violence identified by the national experts are specialised shelters or refuge accommodation. In the UK, there are also housing-led services and sanctuary schemes that can support women with children in their own homes.

Women and children escaping domestic violence face numerous economic and housing difficulties when they enter – and when they try to move on from – available homelessness or domestic violence services.

The divide between the two sectors visible in most of the countries, together with the lack of cooperation mechanisms and practices identified by many national experts, may prove particularly challenging for women and children who in addition to the effects of domestic violence become homeless.

There is evidence of regular cooperation between service responses to domestic violence and homelessness services in 3 out of the 14 countries analysed.

In the Ile-de-France region, there is close cooperation between departmental and municipal social services and organisations supporting women experiencing domestic violence. The main constraints identified in the operation of these services regard the lack of available specialised accommodation to meet the number of women and children in need of such specialised support in the region. According

⁹⁰ See above.

to a recent study,⁹¹ many women and children who could not be accommodated in specialised services were redirected towards hotel rooms paid for by the state or by the City of Paris.

In Hungary, all accommodation services for families are located within the homelessness sector. Additionally, specialised accommodation services for women and children fleeing domestic violence, although run by domestic violence or gender-based violence organisations, are registered and financed as temporary homes for families which are the services providing support to homeless families with children. There is regular cooperation between staff from both services (e.g. training for temporary homes professionals by domestic violence organisations).

In the UK, legal requirements foster coordination between statutory homelessness systems and domestic violence services, in the sense that the homelessness laws require that a local authority prioritises women at risk of domestic violence. Women and children threatened with violence or abuse may be accepted as homeless and referred to a refuge and they can apply from that refuge as homeless to a local authority. In short, working relationships between a local authority and domestic violence services will usually exist because of the requirements of the homelessness law and because, in many instances, domestic violence/refuge services will be supported by local authority funding.

Although in Ireland homelessness services and domestic violence services operate as separate entities, there is evidence of recent cooperation. A training programme involving front line staff in homelessness services on the nature, complexity and impact of domestic violence has been developed by the Child and Family Agency (TUSLA), which oversees the operation of domestic violence services and homelessness services.

In Portugal, by contrast, there is evidence of a growing number of abusive referrals by social security services of women and children experiencing domestic violence but who do not meet the criteria for access to refuge accommodation (only for women who need to be displaced for security reasons) but rather to housing-led services or sanctuary schemes with the necessary support. These referrals are being motivated by the lack of adequate response from the justice system, together with a lack of affordable housing solutions for women and children with economic difficulties.

⁹¹ Observatoire Régionale des Violences Faites aux Femmes (2015) *Violences à l'encontre des femmes en île-de-france: situations et parcours de femmes victimes de violences conjugales, – Données 2013* [Violence Against Women in Île-de-France: Situations and Trajectories of Women Victims of Domestic Violence – Data from 2013] (Centre Hubertine Auclert – FNSF – URSF-IDF). Available at https://www.centre-hubertine-auclert.fr/sites/default/files/fichiers/etude-etudeorvffnsf-web_0.pdf

5. Vignette Analysis of Service Responses to Family Homelessness

5.1 Introduction

This chapter explores the differences in the experiences of homeless families by looking at the ways in which homelessness, welfare and social housing systems would react to a standardised set of hypothetical homeless families. The experts in the 14 countries were presented with a group of five vignettes, fictitious homeless families, with differing characteristics and drawing on their knowledge, experience and the available data, and asked to model the likely service responses to their needs.

5.2 The Vignettes

Comparison of diverse systems of welfare, social housing and homelessness service provision can be difficult. One reason for this is that the rules and conventions governing these services are often complex. Comparison can also be difficult because the evidence base, in terms of homelessness research, is often disproportionately focused on a few countries and the shared collection of comparative statistical data, for example Eurostat data (EU-SILC), is confined to a relatively small number of variables. As the number of countries included in the comparison increases, the difficulty in securing sufficient suitable data tends to increase.

One way of working towards the goal of understanding diverse responses to homelessness with clear, comparative data, is to look at the experience of homeless people seeking assistance. Issues with the availability of comparative data limit the extent to which this can be done with real examples, but it is possible to use a vignette approach, in which experts are presented with a set of fictitious homeless people and asked how the systems in their countries would react to those people.

The five vignettes were:

- (A) A single mother, aged 35 with two dependent children, aged 6 and 9. She is long-term unemployed and on social assistance benefits. She has been divorced from the children's father following domestic violence. She stayed for a while in a women's shelter and has also been staying temporarily with family and friends.

- (B) A mother and father, 37 and 41 years old, with three dependent children, aged 5, 8 and 10 years old. The parents are unemployed and on social assistance benefits. The father has a drinking problem and the mother has moderate depression. They were recently evicted from a flat in the private rental sector.
- (C) A single mother who is 22 and who has one dependent child aged 4. There is no contact with the father of the child. The mother has a mental illness. She has stayed temporarily with friends but is now running out of options. She is reluctant to approach services because she is concerned that there is a risk of having her child removed.
- (D) A single mother, aged 24 with two young children. Following a relationship breakdown, her income has become too low to afford her existing housing for herself and her children. She has just lost her home and has no other place to stay. She has no support or treatment needs.
- (E) A mother and father, 32 and 36 years old, with two dependent children, aged 2 and 5 years old. The mother has not been working since maternity leave and the father just lost his job as a construction worker. They could no longer pay the rent and have just lost their housing. They have no support or treatment needs.

5.3 Patterns of Homelessness

Respondents were asked to report if the five vignette families were 'typical' of family homeless in their respective countries. Family A was the most frequently described as typical of family homelessness across the 14 countries, with 13 countries (92%) reporting they would be typical of the families who experienced homelessness. Vignette family B were reported as 'typical' of homeless families in seven countries (50%). Family C were reported as being 'typical' of homeless families in nine countries (64%). Families D and E were reported by the experts as typical of homeless families in the majority of countries (8 countries, 57%) (Table 5.1).

Those vignette families that were frequently described as 'typical' examples of family homelessness would not, in reality, necessarily become homeless. Many variables may influence the housing trajectory of any individual family. There is no evidence to suggest that a particular set of characteristics, needs, decisions or experiences will always cause homelessness in all circumstances, because variables as diverse as access to informal family support, through the nature of health, welfare and preventative services, may influence whether or not a family with characteristics like those of the vignette families, actually becomes homeless. Table 5.1 should be read as indicating broad patterns, not as a definitive guide to

the nature of all family homelessness across the 14 EU member states. Alongside this, the caveats noted throughout this report about variations in data quality also apply, some countries had much better data on family homelessness than others.

Table 5.1 Whether the Vignette Families were ‘Typical’ of Families Experiencing Homelessness (by number of countries)

Vignette	‘Typical’	Not ‘typical’
A Lone mother, 6&9-year-old children, domestic violence, staying in shelter/hidden homeless	13	1
B Mother & father, 5,8 &10-year-old children. Father alcohol, mother depression, evicted from private rented sector	7	7
C Lone mother, 22, 4-year-old child, mental health, worries about child protection services, hidden homeless	9	5
D Lone mother, 24, 2 small children, relationship breakdown, no support needs	8	6
E Mother & father, 2&5-year-old children, lost job, no support needs	8	6

Lone women parents with complex needs and experience of domestic violence, as a trigger for their homelessness, were reported as being the group who were most typical of family homelessness.⁹² The risk of largely economic causation, broadly represented by the D and E vignette families was also evident, with a majority of responses indicating that families with similar characteristics could also be found among those experiencing homelessness.

This part of the questionnaire helped explore the *groups* of families likely to be at risk of homelessness, which is obviously distinct from the *number* of families, i.e. a country might only see homelessness typically affecting a narrow *group* of families, but the *numbers* might still be high.

It has been argued that all forms of homelessness are lower in countries with more developed welfare systems. This is a simple argument and makes sense at an intuitive level; as those countries with the most developed and extensive welfare systems appear to report low levels of homelessness.⁹³ However, there are problems with actually demonstrating this idea, because data on homelessness from countries with lower levels of welfare spending and some countries with high levels of welfare spending can be quite limited.

⁹² See Chapter 2.

⁹³ Fitzpatrick, S. and Stephens, M. (2014) Welfare Regimes, Social Values and Homelessness: Comparing Responses to Marginalised Groups in Six European Countries, *Housing Studies* 29(2) pp.215-234; Benjaminsen, L. and Andrade, S.B., (2015) Testing a Typology of Homelessness Across Welfare Regimes: Shelter Use in Denmark and the USA, *Housing Studies* 30(6) pp.858-876.

All the vignette families were reported as typical of those experiencing homelessness in the 'Corporatist' Belgian welfare system, the Spanish 'Mediterranean' system and the Romanian 'Post-Socialist Conservative' welfare system (Table 5.2). This is not the pattern that would necessarily be expected, although a lower number of the vignette families were reported as typical of family homelessness in the 'Social Democratic' welfare systems of Denmark and Sweden.

Table 5.2 Which vignette families were typical of families experiencing homelessness (Country)

Country	Vignette families at risk
Belgium	A, B, C, D, E
Denmark	A
France	A
Germany	A, C
Greece	A, E
Hungary	A, B, C, D, E
Ireland	A, B, C, D, E
Portugal	A, B ⁹⁴
Romania	A, B, C, D, E
Slovakia	B, D, E
Slovenia	A, B, C, D, E
Spain	A, B, C, D, E
Sweden	A, C
United Kingdom	A, C

5.4 Prevention

Access to preventative services was reported as poor. The vignette families that were least likely to have access to prevention were vignettes A, B and C (10 countries reported no access to preventative services, 71%). Performance was slightly better in respect of the D and E families, but prevention was not available in a majority of cases (nine countries, 64% for family D, eight countries, 57% for E).

⁹⁴ Families C and D were described as at high risk of homelessness in Portugal, even if they were not necessarily typical of the families experiencing homelessness.

Table 5.3 Access to prevention by vignette family (number of countries)

Vignette	No	Yes
A Lone mother, 6&9-year-old children, domestic violence, staying in shelter/hidden homeless	10	4
B Mother & father, 5,8 &10-year-old children. Father alcohol, mother depression, evicted from private rented sector	10	4
C Lone mother, 22, 4-year-old child, mental health, worries about child protection services, hidden homeless	10	4
D Lone mother, 24, 2 small children, relationship breakdown, no support needs	9	5
E Mother & father, 2&5-year-old children, lost job, no support needs	8	6

Across the 14 countries the provision of prevention was highly variable. Germany, Denmark, Sweden and the United Kingdom reported access to preventative services for all five of the vignette families. Spain and Ireland had some preventative provision, but the remaining countries were not reported as offering homelessness prevention to these types of homeless household (Table 5.4).

It is important to set these findings in context. As noted above, preventative systems in the Eastern and Southern European countries reflect the predominance of owner occupation. Most of the families at risk of homelessness are owner-occupiers, because most of the population are owner-occupiers, making it logical for preventative systems to focus on owner occupation. In other countries, owner occupation is, broadly, associated with relative (and sometimes high) levels of affluence and families at risk of homelessness are concentrated in the private and (where present) social rented sectors. The 'absence' of homelessness prevention for the vignette families in Eastern and Southern European needs to be seen in light of this structural difference in housing markets. This was a limitation in the research design, which with hindsight should have included one or more vignette families who had lost owner occupied, rather than rented housing. However, while noting this caveat with regard to the research design, it was still the North-Western EU member states (including the UK), which had typically higher welfare spending and more developed homelessness services, that tended to have the widest array of preventative services (see Chapter 4).

There is some evidence that family homelessness can have a detrimental effect on health and wellbeing, child development and life chances⁹⁵. The broader evidence suggesting that homeless families may often have quite low support needs, i.e. if homelessness can be prevented and the proper support provided, their chances of social and economic integration and a sustained exit from homelessness are often high, shows the imperative in ensuring that prevention is in place and is effective. Work in the USA has indicated that effective family homelessness preven-

⁹⁵ See Chapter 2.

tion can generate economic as well as social benefits, with preventative services being potentially more cost effective than attempting to solve homelessness after it has occurred.⁹⁶

5.5 Emergency and Temporary Accommodation

Emergency accommodation was generally available to each of the five vignette families. Potential barriers to emergency accommodation for the B and C families were noted in Greece, centred on the mental health needs of the mothers in each family, but the presence of services was reported as universal in other countries. Temporary accommodation was also very widely available to families with the characteristics of the five vignettes.

Access to emergency and temporary accommodation was not always guaranteed. Resource issues and the concentration of services in more urban areas were reported in Slovakia, while variations in allocation systems and the availability of spaces were reported in Belgium. A lack of temporary accommodation was reported by the French experts. However, a broad entitlement and some service provision was almost universal, albeit that families could in some cases end up in cheap hotels, as in Ireland and the UK, because more suitable temporary accommodation could not be found.

5.6 Welfare Benefits

The presence of dependent children meant that welfare systems would have been broadly accessible to the five vignette families. The level and extent of welfare benefits and the conditionality governing access to welfare benefits varied very considerably.

Benefit systems sometimes set 'activation' criteria, a set of requirements to seek work in return for benefit that could include undertaking public works on behalf of the community. Both Denmark and the UK had benefit systems that would require working age adults to engage with job seeking, although the UK offered less extensive access to childcare to a parent or parents with small children. Spain also requires labour market 'activation' in return for access to the minimum income system.

Until recently, Greece lacked a minimum welfare system payment for families with dependent children, but began the process of rolling out a 'social solidarity income' scheme for families without an earned income. The levels of welfare benefit tend to

⁹⁶ Shinn, M., Greer, A.L., Bainbridge, J., Kwon, J. and Zuiderveen, S. (2013) Efficient Targeting of Homelessness Prevention Services for Families, *American Journal of Public Health* 103(S2) pp.S324-S330.

be considerably lower in Southern and Eastern Europe, compared to levels in the Scandinavian and Western European countries, even when allowing for lower living costs. The respondents for Greece, Romania and Slovakia reported that their welfare systems offered only limited payments to families. Sustaining exits from homelessness with a very limited income is potentially challenging.

Access to assistance with housing costs was widely available, with most of the countries being reported as providing welfare benefits for housing costs to all five of the vignette families. However, Belgium was described as not offering a separate benefit for housing costs, although the welfare system provided payments to families. Greece and Romania also lacked dedicated housing benefits, with, as noted, both countries being described as offering limited welfare payments to families.

The UK is undergoing a process of major reform to its welfare benefit system, major logistical problems have been reported, causing many low-income households to go into rent arrears.⁹⁷ The benefits system also pays too little to cover the lowest level of rent available in the private rented sector in some areas, requiring families to use other welfare benefits, designed to cover subsistence and household bills, to meet housing costs. These pressures threaten the capacity of homeless families to sustain an exit from homelessness.

5.7 Social Housing

Access to social housing varied. Three countries would not have offered social housing to the vignette families. Slovakia has municipal housing, but allocation systems would not have allowed the vignette families to access that housing. Among those countries with social housing, the UK has seen a sustained process of privatisation and disinvestment, but retains a significant level of social housing stock. In Germany, Portugal and Spain, access to social housing for people with support needs could be more problematic. Social landlords can be reluctant to house single homeless people with complex needs in many countries, because of anticipated housing management problems,⁹⁸ including France and the United Kingdom, but resistance to housing homeless families, based on this exercise, appears to be less common. In the Swedish case, the provision of subsidised housing is through the secondary housing market. Apartments are provided via the ordinary housing stock with the contract holder being social services. The

⁹⁷ <https://www.theguardian.com/society/2017/feb/07/universal-credit-flaws-pushing-claimants-towards-debt-and-eviction-warning>

⁹⁸ Pleece, N., Teller, N. and Quilgars, D. (2011) *Social Housing Allocation and Homelessness* (Brussels: FEANTSA).

regular policy is to rehouse families in ordinary flats, but often with the social services as the contract holder for a period of one year or more, before they can take over the lease.

Table 5.4 Access to Social Housing (Country)

Country	Access to social housing	Vignette families likely to have access
Germany	5	A, B, C, D, E
Belgium	5	A, B, C, D, E
Denmark	5	A, B, C, D, E
France	5	A, B, C, D, E
Hungary	5	A, B, C, D, E
Ireland	5	A, B, C, D, E
Slovenia	5	A, B, C, D, E
Sweden	5	A, B, C, D, E
United Kingdom	5	A, B, C, D, E
Portugal	3	B, D, E
Spain	4	A, C, D, E
Greece	0	None
Romania	0	None
Slovakia	0	None

Having entitlement to social housing and priority within social housing systems is not the same as being able to *rapidly* access social housing. Denmark, Germany, Ireland, Sweden and the United Kingdom all reported that the vignette families could face sustained waiting periods before being rehoused in social housing, particularly where housing markets were at their most pressured.

In 2016, there were nearly fourteen times as many homeless families in temporary accommodation as people living rough in England.⁹⁹ This situation is actually less acute than the mid 2000s, before an emphasis on homelessness prevention reduced the levels of family homelessness and in London, families faced waits of several years in temporary accommodation.¹⁰⁰

⁹⁹ Source: DCLG. England was estimated to have some 4 134 rough sleepers on one night, compared to over 57 000 homeless families containing dependent children, awaiting settled housing in temporary accommodation of whom around 60% were lone women parents.

¹⁰⁰ Pleace, N. *et al.* (2008) Op.cit.

Ireland is currently facing unprecedented pressures on social housing and affordable housing supply at the time of writing and, as the UK did before it, is having to resort to placing homeless families with entitlement to social housing in hotels, because sufficient social housing stock is not available.¹⁰¹

Supply can be one issue, but access to social housing can be restricted for other reasons, which include the strategic role of social housing programmes. Meeting the most acute forms of housing need may only be one of several policy priorities for social housing.¹⁰² Denmark, France, Hungary, Portugal, Romania and Spain all reported that priority access to social housing, and in some instances any access to social housing would not be guaranteed for all five of the vignette families. France, Hungary and Portugal reported that *none* of the five vignette families would necessarily get access to social housing, because they would not be prioritised within social housing allocation systems.

In Slovakia, there is social housing but access to it may take as long as five years. Many municipalities, such as Bratislava, operate housing programmes for young families, where this process is significantly reduced to about one to three months. However, none of the vignette families would necessarily fulfil the entry criteria in these programmes unless the applying parent was both young (below the age of 34) and in employment.

5.8 Health and Social Services

As with the welfare benefits systems, the presence of dependent children in the five vignette families meant that there would have been access to both health and social services. However, what this meant in different contexts could be radically different, services were extensive in some countries, such as Denmark and Sweden, but were less accessible elsewhere. In some countries, entitlement to services was not matched with sufficient resource levels, which meant services were not always, on a practical basis, actually accessible (reported in the United Kingdom) or varied by location (reported in France and Ireland).

¹⁰¹ Focus Ireland (2016) *Insights into Family Homelessness No.7: Insights into Families that became Homeless During September 2016* (Dublin: Focus Ireland). <https://www.focusireland.ie/wp-content/uploads/2016/04/Insights-into-Family-Homelessness-No-7-Survey-of-the-families-that-became-homeless-during-September-2016-FINAL.pdf>; Housing Agency (2016) *Summary of Social Housing Assessment Need* (Dublin: Housing Agency). Available at: <https://www.housingagency.ie/Housing/media/Media/Publications/Summary-of-Social-Housing-Assessment-Needs-2016.pdf>

¹⁰² Pleace, N. *et al.* (2011) *Op. cit.*

General issues with the quality, resourcing and consistent availability of health and social services were reported in Belgium, Greece, Portugal, Romania and Slovenia. The extent to which these reports were specific to the situation of homeless families was debatable, there were several countries where the general resourcing of health and social services meant they were unable to always meet needs from the general population, as well as the needs of homeless families.

5.9 Domestic Violence Services

Domestic violence services would have been accessible to the vignette family (A) that would require them, but there were also reports of access to services being inadequate, due to limited resources or services being more readily available in cities than in rural areas. In some countries, the interrelationships between domestic violence services and homelessness systems were not consistent, meaning that a woman and child seeking assistance from domestic violence services might not automatically get access to homelessness services, nor necessarily receive priority access to social housing (where it was present). Previous comparative reports in this series have noted the artificial administrative separation, separate classification and separate enumeration of homeless women whose homelessness is linked to domestic violence and who seek assistance from domestic violence services.¹⁰³ This broad point also applies to lone homeless women with dependent children seeking assistance from domestic violence services who may not be recognised as homeless.

5.10 Child Protection Services

Historically, some countries responded to family homelessness by taking the children into the care of social services and either accommodating the parents separately or not providing them with direct assistance. Prior to the introduction of the 1977 homelessness laws, the UK took children in homeless families into care, breaking up the family.

Almost without exception, the 14 EU member states were reported as not likely to remove children into social services care just because the family was homeless. Assessments might be triggered if a child was potentially at risk, but a decision to remove a child into care would not be taken simply on the basis that the family was homeless.

¹⁰³ Baptista, I., Benjaminsen, L., Pleace, N. and Busch-Geertsema, V. (2012) Counting Homeless People in the 2011 Housing and Population Census, *EOH Comparative Studies on Homelessness 2* (Brussels: FEANTSA).

6. Discussion

6.1 Introduction

This final section of the report considers some of the key questions for the research and reviews the state of knowledge on family homelessness in Europe. The need for further research and analysis is also explored.

6.2 The Case for Exploring Family Homelessness

Lone adult homelessness is often associated, at least in the popular imagination, with mental and physical illness, addiction and crime. The reality is more complex. Some groups of long-term and recurrently homeless people have high and complex needs, but it is clear that what have sometimes been assumed to be ‘triggers’ for homelessness, such as mental health or addiction issues, can arise after homelessness has occurred.¹⁰⁴ Some evidence suggests that there are lone adults experiencing homelessness because of a precarious position in the housing market that stems from sustained poverty, poverty that both predates and follows their homelessness, and that this group may, in some contexts at least, exceed lone homeless adults with high and complex needs.¹⁰⁵ Equally, however, there is evidence that lone adult homelessness may not be triggered, solely, by poverty, within those European countries with the most extensive social protection systems.¹⁰⁶

Family homelessness does not appear to follow the same patterns as lone adult homelessness. In the United Kingdom¹⁰⁷ and in Ireland,¹⁰⁸ where the problem is visible, homeless families are poor and, on current evidence, have usually been poor throughout their lives. Family homelessness is also highly gendered, with families in many instances headed by a lone woman parent. Homeless families are much less likely to present with severe mental illness, addiction and other high and complex

¹⁰⁴ Busch-Geertsema, V. *et al.* (2010) *Op. cit.*

¹⁰⁵ Jones, A. and Pleace, N (2010) *A Review of Single Homelessness in the UK 2000 – 2010* (London: Crisis). Culhane, D.P., Metraux, S., Byrne, T., Stino, M. and Bainbridge, J. (2013) The Age Structure of Contemporary Homelessness: Evidence and Implications for Public Policy, *Analyses of Social Issues and Public Policy* 13(1) pp.228-244.

¹⁰⁶ Benjaminsen, L. and Andrade, S.B. (2015) Testing a Typology of Homelessness Across Welfare Regimes: Shelter Use in Denmark and the USA, *Housing Studies* 30(6) pp.858-876.

¹⁰⁷ Pleace, N. *et al.* (2008).

¹⁰⁸ Focus Ireland (2016/2017) *Op. cit.*

support needs than long-term and recurrently homeless adults. However, the prevalence of domestic violence both as a trigger event and as an ongoing risk to safety, health and wellbeing of homeless women does create a range of support needs.

Tackling family homelessness is not simply a matter of securing suitable housing, as families will often need protection and support related to domestic/gender-based violence and may have other support needs. However, the available evidence indicates that the main needs of most homeless families are centred on adequate, affordable housing, rather than, as for long-term and recurrently homeless lone adults, on a package of treatment, support and housing.

Providing that housing is not necessarily a simple matter. Europe has often struggled to provide enough affordable and adequate housing to meet need, particularly in high pressure housing markets.¹⁰⁹ Shortages of affordable, adequate housing may act as a trigger for family homelessness and may also perpetuate it.

Of course, the experiences and the situations that have brought families to the point of homelessness may, as with homelessness in general, often be linked to deep-seated social and economic exclusion. The women, who disproportionately experience homelessness with their children in Europe, may need as much, or indeed more help, with joining mainstream economic and social life, as with finding an adequate home.¹¹⁰

The debate about what should and should not be regarded as homelessness has been a long one, which we have explored in these comparative reports before.¹¹¹ In some senses, family homelessness in Europe is not 'homelessness' in the way we have often come to think of it. The adults who experience family homelessness are not, in most cases, addicted, itinerant, criminal, mentally or physically ill, they have been, are and may continue to be poor and they have often experienced domestic violence or abuse. Family homelessness is clearly gendered, it is disproportionately experienced by women.

Part of the reason the issue does not receive much attention, relative to people living rough or experiencing sustained and recurrent homelessness, is because family homelessness is often not visible. This is in part because families use domestic violence services and may not be recognised, or recorded, as being homeless. However, while we are not yet at a point where the evidence is sufficient to be entirely confident of the assertion, it may also be because family homelessness is often hidden homelessness.

¹⁰⁹ FEANTSA & Fondation Abbé Pierre (2016) *An Overview of Housing Exclusion in Europe* <http://www.feantsa.org/en/report/2016/09/17/an-overview-of-housing-exclusion-in-europe>

¹¹⁰ Pleace, N. *et al.* (2008) *Op. cit.*

¹¹¹ Baptista, I. *et al.* (2012) *Op. cit.*; Busch-Geertsema, V. *et al.* (2014) *Op. cit.*

As was briefly discussed in Chapter 2, US and UK evidence does support the idea that lone women parents with children may often exhaust informal options before seeking services. This may be the case elsewhere, although data that would allow us to accurately assess the extent of hidden family homelessness in Europe, or indeed hidden homelessness in general, are yet to appear.

Improving data is a challenge, both in the sense that there is a widespread perception, outside contexts like the United Kingdom where there is dedicated data collection (albeit a record of service use, rather than enumeration), that family homelessness is an uncommon social problem. There are some indications that family homelessness may not always be less common than other forms of homelessness. English rough sleeper counts reported 4 134 adults sleeping rough, but an average of some 54 000 statutorily homeless families in temporary accommodation at any one point during 2016.¹¹²

This is not to suggest for a moment that UK experience will be repeated elsewhere. We cannot assume that France or Germany, for example, would have similar levels of family homelessness to the UK while, in the most developed welfare systems, such as Denmark, as this study indicates, levels of family homelessness may be very low. Still, the British data do indicate there are contexts in which family homelessness may be relatively greater than some other forms of homelessness and, as noted, these data are service use statistics, not a count, so the actual numbers may be somewhat higher.

The case for greater study of family homelessness rests on the extent to which hidden homelessness is regarded and accepted as constituting homelessness, by researchers, by politicians and by the public. In some countries, like Denmark or the United Kingdom, the definition of homelessness, for policy purposes, does encompass households living in someone else's home because they have no other housing option available. Yet in some other countries, families experiencing hidden homelessness, doubling up with friends, relatives and acquaintances, may be regarded as poorly housed, or overcrowded, but not as in a situation of homelessness.

However, the authors would contend that a family without their own private living space, without any legal right of tenure, whose accommodation can be taken away arbitrarily, are experiencing homelessness. There is a distinction between being

¹¹² Source: DCLG, rough sleeper count was conducted in Autumn 2016, the number of homeless families accepted as homeless and placed in temporary accommodation by local authorities is an average of four quarterly counts of homeless households in temporary accommodation, during the course of 2016.

badly or inadequately housed and living in a state of homelessness. This distinction rests on whether a family has accommodation that is clearly their own self-contained home, which is adequate for their needs and to which they have legal rights.¹¹³

6.3 Gender and Family Homelessness

The findings of this comparative study relate to the emerging debates about gender and homelessness.¹¹⁴ Again, the issue here is partially about definition and enumeration, but it is also about recognition. The point, often repeated throughout this report, that family homelessness is highly gendered, is an important one. The image of homelessness as an experience of lone men, with high and complex needs, has long been undermined by the longitudinal research that shows the presence of economically and socially marginalised people experiencing homelessness for shorter periods and by data showing that women, albeit in apparently lower numbers than men, are within the lone adult homeless population. What the available data in Europe tell us is that lone women, with their children, are the bulk of the population who experience family homelessness.

There are challenges in exploring gender and family homelessness. Our evidence that women – and women with their children – may experience hidden homelessness at what may be higher rates than men, is not complete. While some data from countries like the United Kingdom and USA indicate this pattern, we cannot, as already said, simply assume that this will be the case in all European countries. A response to homelessness that involves someone seeking help from informal sources, staying with friends, family or acquaintances is also, clearly, not unique to women or women with children, we know for example, of evidence of young homeless men doing the same thing.¹¹⁵ Enumerating hidden homelessness accurately is a problem, there being three main challenges:

- Hidden homeless populations are characterised by precarity, they move between one living arrangement and another in unpredictable ways and will in some cases not stay in any one place for a sustained period.

¹¹³ Office of the United Nations High Commissioner for Human Rights and UN Habitat (2009) *The Right to Adequate Housing* (Factsheet 21, revision 1) (Geneva and New York: United Nations) ISSN 1014-5567 http://www.ohchr.org/Documents/Publications/FS21_rev_1_Housing_en.pdf; Busch-Geertsema, V., Culhane, D. and Fitzpatrick, S. (2016) Developing a Global Framework for Conceptualising and Measuring Homelessness, *Habitat International* 55 pp.124-132. <http://www.sciencedirect.com/science/article/pii/S0197397515300023>

¹¹⁴ Bretherton, J. (2017) Op. cit.

¹¹⁵ Quilgars, D., Johnsen, S. and Pleace, N. (2008) *Review of Youth Homelessness in the UK* (York: Joseph Rowntree Foundation).

- Hidden homelessness is not visible to administrative systems, because they use informal responses to their homelessness, i.e. they do not use homelessness services and are thus not recorded by those services, equally they may not claim welfare benefits (where present), they may not seek social housing services (where present).
- The absence of a fixed, unique address can take an individual 'off the grid', population registers may not record their presence and they may be missed when surveys or survey-based censuses are attempted.

However, the methodological challenges in enumerating the nature and extent of family homelessness should not stop attempts to better understand family homelessness in Europe and, by extension, women's experiences of homelessness in Europe. There is a clear case for attempting to build a better picture of hidden homelessness and to ensure that women and children, made homeless by domestic violence, are recorded as being homeless. The challenge to better understand family homelessness in Europe is also a challenge to explore the interrelationships between gender and homelessness.

6.4 Other Dimensions of Family Homelessness

There are further dimensions of family homelessness in Europe that have not been explored in great depth by this study. Family homelessness can be experienced by migrants who are homeless, including refugees and asylum seekers, undocumented migrants and economic migrants. There are tensions between policies centred on border control and ensuring a humanitarian response to these forms of family homelessness, which were, for example, reported in Belgium, in this study. The last comparative report in this series looked at asylum seekers, refugees and homelessness services.¹¹⁶

There is limited evidence on the experience of family homelessness, i.e. what it is like to be a child in a homeless family or to be the parent of children who experience homelessness. Some ethnographic work has been completed, but it is often small in scale and out of date. There is a case for further analysis on the experience and consequences of family homelessness.

¹¹⁶ Baptista, I., Benjaminsen, L., Busch-Geertsema, V., Pleace, N. and Striano, M. (2016) *Asylum Seekers, Refugees and Homelessness. The Humanitarian Crisis and the Homelessness Sector in Europe* (EOH Comparative Studies on Homelessness 6) (Brussels: FEANTSA).

6.5 Service Responses

The extent to which service responses are adequate for homeless families is also a matter for further investigation. In part, this is because the data on the extent and nature of family homelessness are not at a level where we can be confident of the scale of family homelessness, nor the needs of the families who experience it in Europe. In some countries, and again we can use the example of Denmark, low levels of dedicated service provision appear to be logical, because family homelessness is unusual. In others, and here we can use the examples of France, the United Kingdom and in recent years, Ireland, existing systems for dealing with family homelessness are straining to cope and families are being placed in hotels as an emergency measure.

Better understanding of family homelessness is needed to fully understand the extent to which dedicated services and housing supply need to be built into a properly integrated homelessness strategy. Housing focused services, ranging from eviction prevention, through to rapid re-housing systems, would seem to be important, given the evidence about the needs profile of many homeless families. There is also a need for full integration of domestic violence services within strategic responses to homelessness, again both in respect of homelessness prevention and in responding rapidly when a family does become homeless. High and complex support needs, while they may not be prevalent in the way that is the case with recurrent and sustained homelessness among lone adults, will also still be present among a minority of homeless families and strategic responses to family homelessness will also need to account for this.

7. Annex 1

Distribution of Poor Households by Tenure Status, 2014 (EN%)

Countries	Homeowners			Tenants			TOTAL
	without outstanding mortgage	with outstanding mortgage	Total homeowners	Private tenants	Tenants in free or subsidised housing	Total tenants	
BE	21,8	16,1	37,9	39,7	22,4	62,1	100
DE	18,2	10,9	29,1	57,2	13,6	70,8	99,9
DK	19,7	12,9	32,6	67,4	0	67,4	100
ES	34,6	25,5	60,1	23,9	16,1	40	100,1
FR	20,8	14,1	34,9	38,1	27	65,1	100
GR	57,6	9,5	67,1	25,8	7,2	33	100,1
HU	65,5	14,2	79,7	3,2	17	20,2	99,9
IE	27,9	16,2	44,1	21,8	34,1	55,9	100
PT	38	20,6	58,6	17,8	23,7	41,5	100,1
RO	94,4	0,5	94,9	0,9	4,2	5,1	100
SI	51,7	4,6	56,3	14,7	28,9	43,6	99,9
SK	73,7	6,5	80,2	14,4	5,3	19,7	99,9
SW	8,5	25,7	34,2	64,1	1,7	65,8	100
UK	26,9	21,5	48,4	19,5	32,2	51,7	100,1

Source: Second Overview of Housing Exclusion in Europe, 2017

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Family Homelessness in Europe

This comparative report critically assesses the evidence on the nature and extent of family homelessness in Europe and also explores the provision of preventative, support and rehousing services. Family homelessness is disproportionately experienced by lone women parents whose homelessness is frequently triggered by domestic violence. Homeless families tend to be in situations of poverty or low income, but unlike lone homeless adults experiencing recurrent or sustained homelessness, families do not tend to have high or complex needs. This report is the seventh in a series produced by the European Observatory on Homelessness exploring pan-European issues through a questionnaire based approach, using a group of national experts.

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