The European Consensus Conference on Homelessness – Kudos, and Some Cautions, to Europe

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Introduction

The United States could learn a great deal from the Jury recommendations from the European Consensus Conference on Homelessness (2010) and the preparatory work by FEANTSA (the European Federation of Organizations Working with the Homeless). FEANTSA has served as an important forum for incubating and sharing ideas about combating homelessness, helping countries to learn from one another. Veteran researchers and practitioners can help those with less experience, and advocates everywhere can point to something that another country does better, so as to ratchet up responses to homelessness. The Consensus Conference’s status as an official event of the Council of the European Union, and the Jury’s ability to invoke earlier European conventions and charters lend weight to the conclusions. The Jury has laid out a mandate, if not a detailed roadmap, for ending homelessness in the European Union, and has encouraged the continuing accumulation of evidence about what works best. Our primary reaction is applause. However, a critique is probably more useful to the EU and its Member States as they struggle to fulfil the mandate. Thus, the remainder of this commentary discusses issues of definitions and counts, prevention, the utility of research, and immigration.
Definitions and Counts

The Jury adopts the European Typology of Homelessness and Housing Exclusion (ETHOS). It argues that all forms of homelessness should be combated, but gives priority to ending street homelessness and long-term homelessness, categories that encompass rooflessness and a portion of houselessness in the ETHOS typology. These are reasonable choices. However, the report sometimes overlooks one major advantage of ETHOS, namely its clarity about the groups under discussion. For example, the report cites research in the United States that identifies subgroups that are homeless briefly, that experience homelessness episodically, and that are chronically homeless, without remarking that homelessness here refers to the use of emergency shelters. Most people in the United States who use shelters do so only once for relatively brief periods and then move on (Kuhn and Culhane, 1998; Culhane et al., 2007). However, patterns might look quite different for other definitions of homelessness. People who live in insecure and, particularly, inadequate accommodation (as per ETHOS definitions) may be more likely to do so for extended periods, because people do not enter and exit poverty as rapidly as they move in and out of shelters. There is also evidence that at least some episodic shelter-users in the United States follow ‘institutional circuits’, moving between shelters, the streets, medical and penal institutions, and temporary accommodation with family and friends, but never exiting from homelessness as defined by ETHOS (Hopper et al., 1997).

The Jury’s recommendations to include questions on episodes of all types of homelessness in the household survey of the European Union Statistics on Income and Living Conditions, and to collect data on stock, flow and prevalence are excellent ideas. Household surveys find far larger numbers of people who have experienced homelessness than do other approaches (Link et al., 1994; Burows, 1997), but they may be less useful for monitoring progress in the short term because they miss people experiencing many types of homelessness currently.

The issue of distinguishing stock (or point prevalence) and flow, mentioned in passing by the Jury, should be highlighted. The measure affects not only the numbers of people counted but also their characteristics. As counts of people who are homeless at any given time are affected by flows both into and out of homelessness, people who find it difficult to extricate themselves from homelessness are overrepresented in stock compared to flow measures. Thus, cross-sectional surveys find larger portions of people with disabling conditions such as mental illness, than do studies of entrants to homelessness. Household surveys allow an estimate of period prevalence, or the proportion of people who have experienced homelessness over some period of time. Each of these measures is useful for different purposes. Stock measures index the quantity of shelter beds or other
short-term arrangements needed at a point in time. Flow measures tell more about the rate at which affordable housing must be created. Patterns of flow between forms of homelessness may indicate fertile points for the prevention of more serious forms thereof. Period prevalence indexes the broad impact of homelessness on society. Because at least some forms of homelessness are temporary, far more people are affected over the course of a year or a lifetime than the number of homeless on any given night.

Prevention

The Jury notes the importance of “broader social policies to reduce income inequality and other aspects of housing disadvantage” in ending homelessness, but argues that “targeted policies can effectively counter” adverse structural conditions to avert homelessness (European Consensus Conference on Homelessness, 2010, p. 12). Although policy-makers are turning increasing attention to targeted prevention on both sides of the Atlantic, evidence for success remains skimpy. It tends to be of two forms.

The first form of evidence comes from the analysis of trends in homelessness, and policy and prevention efforts that may account for it. A good example is Benjaminsen and Dyb’s (2008) analysis of homeless policies in Scandinavian countries. As social policies are similar across Denmark, Norway and Sweden, the authors suggest that differing homeless-specific policies account for differing levels of homelessness, both across nations and across cities within nations. The major policy contrast they point to is between a normalizing model and a staircase model for homeless services, largely for individuals with substance abuse problems, with the latter model associated with higher homeless rates. The analysis is plausible, but this comparison focuses on tertiary prevention, or rapid resettlement and prevention of repeat episodes of homelessness, rather than on preventing initial episodes of homelessness among people who have never experienced it before.

Busch-Geertsema and Fitzpatrick (2008) suggest that recent decreases in homelessness in England and Germany are likely to be the result of targeted policies. In the case of Germany, it is hard to decide whether to apportion credit to increases in targeted services – particularly for those with rent arrears – or to the slackening of the housing market due to reductions in the inward migration of repatriates of German origin, which peaked after the break-up of the former Soviet Union. In England, there was no such slackening in the housing market. However there was a major effort to eradicate child poverty, spearheaded by the Blair government. Policies did not succeed in the ambitious goal of halving child poverty by 2010, but they did lift half a million children out of poverty. Child poverty (defined as living in households with
income below 60% of median) in the United Kingdom fell as a whole from 26.0% in 1998-99 to 22.5% in 2007-2008, before housing costs are accounted for. After accounting for these, reductions were smaller – from 33.9% to 31.1% – but still in the right direction (Joyce et al., 2010). It is plausible that these policies played a substantial role in reducing homelessness among families in England. However, the bulk of the improvement occurred before the dramatic declines in homelessness between 2003 and 2007, documented by Busch-Geertsema and Fitzpatrick (2008). Thus, neither Germany nor England provides a clear test of the extent to which targeted policies can counter adverse structural conditions.

A second form of evidence for the success of prevention is the finding that people who receive services do not become homeless, as for example in an extensive evaluation of 3600 cases of homelessness prevention in 43 municipalities in Germany (Busch-Geertsema et al., 2005). According to prevention authorities, swift interventions to deal with rent arrears prevented homelessness in one-third of cases, while the remaining two-thirds needed additional support. However, as Busch-Geertsema and Fitzpatrick (2008) point out, such estimates lack convincing counterfactuals, or evidence of what would have happened in the absence of intervention. In the United States, the vast majority of households that are not merely delinquent in paying rent but that are actually evicted do not enter shelters, even in the absence of prevention services (Shinn et al., 2001). Overly broad targeting of services (giving them to people who would avoid homelessness without them) can thus masquerade as successful prevention. In this vein, one could raise the ‘success rate’ of prevention services to 100% by targeting them to millionaires. Hennepin County, Minnesota, whose targeting model for preventing family homelessness has been widely adopted in the United States, recently decided that it had made this sort of mistake after finding that the families targeted for prevention services differed greatly from those families that actually became homeless. For example, 40% of the first group – compared to 94% of the second – had incomes below $1000 per month; and 1% – compared to 33% – had a head of household under 22. In requiring service providers to serve families that more closely resemble those who enter shelter, the county recognizes that the apparent success rate for prevention is likely to fall (ten Broeke, 2011).

Convincing evidence that targeted prevention works requires evidence not only that people who received the services avoided homelessness, but also that similarly situated people who did not receive services became homeless; both effective targeting (evidenced in high rates of homelessness in the control group) and successful services (evidenced by differentially lower rates among recipients) are required. Systems-level analysis is also critical to ensure that prevention services (for example, priority access to social housing) do not simply reallocate homelessness to other households whose priority is thereby reduced.
Targeting prevention services is difficult for two reasons. First, people who become homeless, especially families, look a lot like other poor people. Second, whereas rates of homelessness are too high from a moral perspective, from a statistical perspective they are low, and it is difficult to predict relatively rare events without many false positives (people identified as likely to become homeless who would not in fact do so in the absence of intervention). Thus, targeting means giving services to multiple households for each case of homelessness averted.

Overly broad targeting does not matter if services are cheap as well as effective. Culhane et al. (2011) argue for a system of progressive engagement, where inexpensive services are offered to large numbers of people, and successively more extensive services are reserved for those for whom inexpensive services prove insufficient. One way to avoid the problem of targeting is to wait for households to request shelter; as such, much attention in the United States has shifted to shelter diversion (immediately before entry) or rapid re-housing (immediately after). Shelter applicants are typically already homeless by the full ETHOS definition, but the programmes are still consistent with the Jury’s recommendation to focus on the most severe forms of homelessness. More research is required to show how well such programmes work.

Research

The need for rigorous research to gather evidence about the success of prevention efforts applies to other conclusions of the Jury report as well. The primacy of housing-led approaches is supported by data not only about the effectiveness of Housing First programmes for individuals with serious mental illnesses (Gulcur et al., 2003; Tsemberis et al., 2004), but also about the effectiveness of housing subsidies, with or without social services, in preventing homelessness for families receiving public assistance in the United States (from a national randomized experiment by Wood et al., 2008); in ending returns to shelter (Culhane and Hadley, 1992; Wong et al., 1997); and in promoting secure and stable tenancies for families who had been homeless (Shinn et al., 1998).

Much less is known, however, about whether less expensive options work, and what patterns of services should accompany housing for what populations. The Mental Health Commission of Canada is conducting a five-city trial of Housing First, using the Pathways to Housing model for individuals with serious mental illness, an alternative Housing First approach with case management services for individuals with less serious psychiatric problems in comparison to usual care, and local approaches. The Department of Housing and Urban Development in the United States is funding a twelve-site study examining subsidized housing without services, shorter-term rapid re-housing approaches, and service-rich transitional
housing in comparison to usual care, in order to learn what works best for what sort of homeless families with respect to housing stability, self-sufficiency, family preservation, and adult and child well-being. Europeans could contribute to this experimental knowledge base with multi-site approaches examining the consistency of conclusions in different jurisdictions. Because most shelter use is temporary, many programmes will ‘work’ to reduce homelessness in the sense that participants will not return to shelter, even if the programmes do little more than provide temporary respite. Research can help to identify optimal approaches.

There is some resistance to such social experiments, and indeed these would be unethical if we already knew what worked and had the resources to offer this elixir to all. However, the field lacks both knowledge and resources. Housing First approaches challenged a ‘housing readiness’ orthodoxy when they were first tried, and an experiment showing that they worked better than staircase approaches has led to their widespread adoption. Listening to the preferences of individuals experiencing homelessness, as the Jury advocates, is also important, and indeed was the inspiration for the Pathways to Housing model (Tsemberis et al., 2003).

**Immigration**

The Jury deals thoughtfully with the intersection between immigration and homelessness, calling for more study, recognizing national differences, and reaffirming basic human rights for all. Political scientists have shown that racially- and linguistically homogeneous societies devote a larger proportion of Gross Domestic Product to social welfare spending than do more diverse societies (Alesina and Glaser, 2004). As immigration makes Europe increasingly diverse, it is perhaps no accident that some nations are rethinking the generosity of their social welfare programmes. In a sense, the European Union is a great experiment in expanding the definition of the group to whom societies owe the supports embodied in social welfare programmes; immigration challenges social solidarity, and homelessness may be one consequence. In the United States, ethnic minorities who are not immigrants, in particular African Americans and Native Americans, are at higher risk of homelessness than immigrants, and this is also true in Japan and Australia (Shinn, 2010). Europeans might do well to examine the relationship between homelessness and ethnic or religious forms of social exclusion that go beyond immigration.

This paper has suggested some concerns and extensions of the masterful jury report from the European Consensus Conference on Homelessness in the areas of definitions and counts, dilemmas of prevention efforts, the need for research, and the challenges posed by immigration. These comments do not, however, diminish our praise for the report and its ambitious mandate to end homelessness in Europe.
References


