# HOMELESSNESS, PANDEMIC AND PUBLIC POLICIES. Impact on quality of life, expectations for the future and... missed learnings?

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## METHODOLOGY

Secondary resources (papers; NGO or Public Administrations rapports)

Interviews to Public Administration representatives

• Ethnography (June 2021) on rough sleepers mobilities in Barcelona city

### COVID 19 AND FIRST PHASES OF THE PANDEMIC

- Before vaccination: top high risk:
  - To death (individual)
  - Public health safety (community)
- The reaction was:
  - How to neutralize the risk for everyone's health (individual)
  - To engage lock downs to virus dissemination (community)

### COVID 19 AND FIRST PHASES OF THE PANDEMIC

- Unanimous panic feelings
- Homeless people; professionals working with homeless people; all the society: fear to infection.
- Suddently, the "ecosystem" of every kind of social equipment, could be or "with" or "against" the risks
  - Collective equipment's
  - Shelters
  - Big facilities
  - Services managed by volunteers or with evident lack of staff
- Very stressful situations for the whole professional collective around Europe

• What was the meaning of the pandemic for homeless people on the first phases (personal level)?

- Death risk
- Fear
- Some supports lost (medical/health; feeding; social services support)
- Loneliness!!! (depression)

• What was the meaning of the pandemic for homeless people on the first phases (context level)?

Radical change of the environment.

• Radical change of her/his own context (facilities; places to go; places to stay)

- What was the meaning of the pandemic for homeless services?
  - Those who were unable to continue with the activity, ceased
  - Those who pre exists to the pandemic, and had to adjust capacity and use of the space inside
  - Those who were opened due to the pandemic

- For months, the people who stayed in the streets could do an intensive use of public space. Even with police controls somewhere, they could arrange wider spaces and improvised campments in locations before unexpected, forbidden.
- From 2021 spring and after, they should withdraw without possibility to negotiate the use of public space because of the restart of the activities in the places, streets, buildings, used by them
- No any offer to re establish himselves/herselves is reported. Simply, must go away.

- It was a radical change for lot of people:
- for a lot of rough sleepers: they went from streets to collective residential equipment's managed with public health criteria, where they were accompanied and monitored for months
  - Some of them were disposed to continue linked to social resources, but the emergency resources activated were basically cut in 2021 autumn
- Nevertheless, a lot of other rough sleepers + people who were in facilities that were closed due to the pandemic, remained in the streets in complete loneliness. Too, some where, with risk of security services persecution.
  - Lot of people lost the gains accomplished in his/her process of recovery before the pandemic
  - Lot of people suffers depression due to the pandemic
- Finally: In some countries, there was an important number of people who became in a homeless situations because of the pandemic (!!!), without homelessness support systems acting due to the emergency moment.
  - They were people who arrived so quickly to the street, but lost motivation to succeed and personal skills due to the months they spend in streets, without sufficient support

- Generally, in Europe, only basic alimentary, hygiene and urgent health needs were covered for homeless people during the pandemic: the social care and support they had before the pandemic, was temporarily suspended due to attend only the coverage of basic needs
- The are a big difference between the countries or cities involving if they are focused on housing policies, or on shelter policies: In pandemic, every one tried to increase their response by their own model.
  - Those who were focused on housing, or housing related solutions, could manage better the emergency
- A lot of creative solutions were implemented, trying to minimize the risks for public health
  - Big collectives facilities
  - Individual rooms in the so called "social hotels" (placed most of them in hotels closed due to the pandemic)
  - when was possible, increasing the apartments (housing) dotation
- Nevertheless, only few of the new resources created during the pandemic in 2020, stays operative on 2022

- Social Service systems were not formally considered in several countries as essential services, and didn't receive the logistic, material and human support needed
- Rough sleepers were specially unattended. Too, when pandemic seemed to be controlled, were expelled
- The homeless population increased with those who arrived to streets due to the pandemic, with a specific profile and with social services system not recovered yet
- Part of the resources to homelessness response activated due to the pandemic, were withdrawal when it seemed stabilized

- Supplementary efforts were done for effective vaccination attending some specificities of homeless populations (mono dose vaccine; flexibility on the access to health system; others)
- Some of the countries / cities focused on communal residential centers understood their risks and how much be avoided
- It was accepted the inclusion of all social groups as part of the society with the same collective duties from individual to society and reverse, under the public health learnings: risk for one, risk for all.

- Public Administrations has acquired some capacity to understand social equipment's as part of the environment
- Some Public Administrations assume the risk for new pandemics in the early future
- Too, now it's known the risks for social survival that must be managed in some crisis likes this
- In this context, was learned than the communal residential facilities have a lot of risks very difficult to manage, with a human and economic big risk (elderly people residences; people with disabilities residences; others)

- Public Administrations accepted homeless people as part of society at same level as the rest: in order to manage the public health crisis, they were always considered as part of the environment: so,
- It's considered the right to access to an affordable housing to due to this environmental context
- Unites Nations recognize it in: Resolution adopted by the General Assembly on 16
  December 2021A/RES/76/133, 16th December 2021, Inclusive policies and programs to
  address homelessness, including in the aftermath of the coronavirus disease (COVID-19):
  <a href="https://drive.google.com/file/d/1LwuMIo-p3SCQwKZNwNWjHOyWlUolqvb5/view">https://drive.google.com/file/d/1LwuMIo-p3SCQwKZNwNWjHOyWlUolqvb5/view</a>
  - 2030 Agenda, UN Sustainable Development Goals
- Declaració de Lisboa sobre la Plataforma Europea per combatre el Sensellarisme (21 juny de 2021): <a href="https://ec.europa.eu/social/BlobServlet?docld=24120&langId=en\_">https://ec.europa.eu/social/BlobServlet?docld=24120&langId=en\_</a>:
  - that the COVID19 pandemic has heightened the urgency of effective action to solve homelessness.
  - 12 the growing evidence about effective interventions to prevent and solve homelessness, such as housing-led approach.

- Probably, a new window for advocacy on right to housing focused on homelessness is opened
  - With public administrations social service responsibles, due the ineffectiveness of communal facilities
  - With public health systems responsibles, due to the risks for the whole population
  - With all the stake holders,
    - due to the comprehension of society as a common environ
    - Due to the general debate on communal facilities versus housing with support solutions

# Thanks!

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