

Does rehousing lead to reintegration? Follow-up studies of re-housed homeless people

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Does rehousing lead to reintegration?

Follow-up studies of re-housed homeless people

Working Paper for EUROHOME-IMPACT Project

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1. Introduction

Are homeless people “with problems” able to cope in ordinary housing? Does the re-housing of extremely marginalized homeless people through targeted support projects really lead to a better quality of life and to an advanced reintegration into society? What are the main factors that contribute to, and hinder, successful settlement? What is the impact of the “housing factor” for the reintegration of homeless people? What are the welfare provision and support requirements for successful rehousing and re-integration?

These are some of the more general questions the follow-up studies on re-housed homeless people can help to answer. But in most cases, the primary concern of such studies is to examine the performance of a particular project or programme aiming at rehousing and/or reintegrating homeless people into society. Have they reached their aims? Were the clients able to sustain their tenancies and improve their living situation? What happened to them after moving into “normal” housing?

Within the framework of the EUROHOME-IMPACT project three case studies were conducted in Dublin (Ireland; see Lyons 2002), Hanover (Germany; see Busch-Geertsema 2002a) and Milan (Italy; see Tosi 2002). Before commencement of the field-work a literature review of previous follow-up studies on rehoused people in the countries represented in the EUROHOME-IMPACT network (Austria, Belgium, Denmark, Germany, Ireland, Italy, and Switzerland), was conducted. In the following section, some of the main results of these earlier studies are presented (Chapter two). In Chapter three an outline of the framework of the follow-up studies undertaken for the EUROHOME-IMPACT project is presented, followed by a report on the experiences made with this methodological framework and a discussion of the limitations of our approach. Chapter four presents a description of the projects and services in the three European Cities (Dublin, Hanover and Milan) on which our studies concentrate. The main results of our follow-up studies and the requirements for welfare provision and support essential for the successful rehousing and re-integration of homeless people are then outlined in Chapter five. Finally, Chapter six provides a summary of the results and outlines the main conclusions of the research.

2. A short review of results from previous follow-up studies

Prior to our own research, studies on the situation of people who had previously been homeless and undergone some form of resettlement efforts, had been undertaken in only three of the countries included in the EUROHOME-IMPACT framework, namely Denmark, Germany and Ireland. Because of its relevance, literature evaluating the outcomes of the *Rough Sleepers Initiative* in the United Kingdom (in London and later in the rest of England¹) has also been included in our review. In this way we have been able to analyse studies from four EU-countries on the basis of three individual working-papers produced for the EUROHOME-IMPACT project (Koch-Nielsen 2001², Higgins 2001³, and Busch-Geertsema 2001a^{4,5}).

¹ In the recent past, similar initiatives have been introduced into other parts of the UK, including a wide range of activities particularly in Scotland.

² In Denmark, follow-up studies were conducted by Kjær Jensen in the early 1990s and by Thobias Børner Stax in the mid 1990s. Jensen’s research involved an examination of 40 individuals who were clients of nine homeless institutions located in three Danish regions; these clients, who had either been re-housed, were expected to move out or had a more uncertain future were questioned twice within a time span of approx. six months (see Jensen 1995). Using administrative data, later research by Børner Stax involved a longitudinal study of approx. 1,000

While follow-up studies are often recommended for assessing the outcome and getting a better understanding of the impact of services aimed at integrating homeless people, they have in fact relatively seldom been carried out. This may be put down to methodological and financial problems (often it is rather difficult to trace rehoused persons after a longer period and to motivate them to take part in an interview; qualitative follow-up studies are also quite expensive). But one has also to consider that in many countries a significant move towards more systematic approaches to measuring the performance and developing the quality of social services has only taken place quite recently.

Most of the follow-up studies conducted to date concentrate on specific innovative projects or schemes which were based on the firm belief that the reintegration of homeless persons into permanent housing is possible. This is by no means self-evident, as shown by numerous discussions in almost all European countries in which homeless people are still stigmatised as “people with an unsettled way of life” or “people who are incapable of living in ordinary housing” etc.⁶

In the light of such discussion, it is rather remarkable that the follow-up studies which focussed on rehousing programmes and projects have proved that the great majority of homeless people who received the necessary support were able to sustain their tenancies, and only a minority of those rehoused returned to homelessness. The most convincing result in this respect is probably the study of the Rough Sleepers Initiative (RSI) in London. Incidentally this government funded programme would appear to be one of the best documented and evaluated programmes concerning the reduction of (street) homelessness in Europe. Not only were a number of comprehensive scientific

people aged 35 and under who had used some institution for the homeless (and shelters for battered women) in Copenhagen in 1988/1999. Børner Stax tried to find out where (and how) they were living in 1996/1997, using as his source population registers, the central crime register, the register on causes of death and the register on drug abuse. The author also carried out qualitative interviews with 16 people from that target group (see Børner Stax 1999).

³ Mary Higgins reports on a follow-up on behalf of Dublin’s Homeless Initiative: 65 users of five settlement services in the Dublin region were interviewed using semi-structured questionnaires. Twenty-seven of the interviewees had settled successfully, 31 had unsuccessfully attempted settlement but not (yet) moved into permanent housing and seven had never previously attempted to settle (see Nexus 2000).

⁴ Busch-Geertsema presents the *ExWoSt* research field “*Permanent Housing for the Homeless*”, a three years governmental evaluation programme on construction projects for homeless people. For two of the seven construction projects (in Hanover and Bielefeld) a longitudinal analysis of the course of tenancies with formerly homeless people was possible and the author discusses methodology and the main results of both projects (see also Busch-Geertsema 2002a; the complete evaluation reports are available in German only. For Bielefeld see Kämper et al. 1997, for Hanover see Busch-Geertsema/Ruhstrat 1997 and for the whole research field see BBR 1998). He also reports about two evaluations of the outcomes of the Rough Sleepers Initiative in the UK, which made use of follow-up studies. In London, former rough sleepers rehoused under this programme were interviewed. One hundred such interviews were conducted for a structured survey of the second phase of the *Initiative* (see Randall/ Brown 1996), and for another study focussing on factors promoting or hindering successful rehousing under the Rough Sleepers Initiative (Dane 1998) another 70 qualitative interviews were carried out (50 with tenants who had succeeded in sustaining their tenancies and 20 with ex-tenants whose tenancies had failed, because they had abandoned them or had been evicted).

⁵ All three papers are documented in the appendix of Busch-Geertsema 2001b.

⁶ For examples see Busch-Geertsema 1987, Sahlin 1996 and Dyb 2002. For a recent “revival” of the discourse on “*incapable tenants*” in Belgium in the 1990s see de Decker/Pannecoucke 2002.

evaluations carried out at different points in time, but due to the centrally organised rehousing procedures there are central records containing long-term information on the number of rough sleepers rehoused under RSI and the number of those who have left their tenancy or were evicted. From 1990 until March 1999, 3,500 permanent housing association homes were provided in London through a specially funded programme for rough sleepers and over 5,500 people have been housed in RSI tenancies (Randall/Brown 1999: 14). Dane (1998: 6) reports on the results of tenancy outcomes up until September 1997 (when around 4,900 tenancies had been registered). At that time, 62 % of the RSI tenancies were still in existence, 13 % had ended with a positive outcome (transfer or move to better quality, non RSI housing) and 16 % of the tenancies had ended in abandonment or eviction (other outcomes accounted for the remaining 9 %).

The – much smaller – projects evaluated in Germany confirm that even those with a long career of homelessness and life in institutions, were – with very few exceptions – able to cope permanently in normal housing if they received the necessary support. The need for support, not by all, but by many, of the formerly homeless people after moving into their own dwelling, was evident.

The results of all the follow-up studies showed, that for a significant number of homeless people, not all the problems that had contributed to (and often also resulted from) their homelessness could be solved by providing them with permanent housing only. Many rehoused persons were shown to continue to be marginalized through poverty, exclusion from the labour market and social isolation.⁷ A number of them remained in need of substantial support by social workers. Many also continued to suffer from considerable health problems. A small minority of those rehoused had problems making their dwelling into a home.⁸

The results underline that homeless people are a particularly heterogeneous group, and several studies conclude that there remains a minority of homeless people in need of forms of accommodation other than ordinary permanent housing.⁹

The interviews with people who had unsuccessfully attempted settlement also showed that financial barriers (such as high rents and deposit costs in the private sector as well as previous debts to landlords) are relevant factors which exclude people aiming to be rehoused from access to main-stream long-term housing.

⁷ It should, however, also be noted that they share these forms of exclusion with a much larger part of the population and that for most rehoused people the fact of having increased privacy, autonomy and security (often symbolised by their own key) made a vast difference from being homeless.

⁸ Inger Koch-Nielsen (2001: 9) emphasised this aspect as being most important for assessing the success of the integration efforts in the Danish follow-up studies: “.. *not any kind of re-housing create(s) a ‘home’, and integration is not just furthered through moving out of an institution and into an apartment. True integration has something to do with having a network – and that can take many different forms such as work, friends, family – of course – but also social workers.*”

⁹ “*It must also be taken into account that not everybody wants to or seems fit for living on his own, but need the protection provided by the institution. This group would like more privacy and self-determination in the institutions*” (Koch-Nielsen 2001: 3). In her study on rehoused rough sleepers in London, Katherine Dane points to older people with a long history of hospitalisation and some homeless persons with very chaotic life-styles as groups who “*do not fit into the dominant model of preparation, resettlement and support leading ultimately to independence*”. Her recommendation in this context is for some “*schemes which recreate the lodging house style of accommodation (possibly with resident landlady/concierge-style posts, in addition to the availability of professional support)*” and “*other models which could meet the needs of this group, such as ‘core and cluster’ projects*” (Dane 1998: 96-97).

In terms of the factors that influence the success or failure of rehousing and integrating homeless people the following were particularly important:

- the geographical location, quality, and security of housing provided
- social network (including social support by professionals)
- experiences with the authorities.

The availability of sufficient financial resources and integration into employment or training were important factors for further integration. However, continued unemployment and receipt of social assistance by no means automatically led back to homelessness.

Most studies in this area reveal the need for an improvement in support services and the development of “settlement strategies”. Other recommendations include the provision of individually tailored support (case management; individual support plans etc.) and more flexibility in financing and providing support for rehoused persons.

3. The framework for follow-up studies undertaken for the EURO-HOME-IMPACT project, methodological experiences and limitations of approach

3.1 The framework

The follow-up studies reported here are based on projects in three EU countries, namely Germany, Ireland and Italy. In the context of inevitable cross-national differences, we decided to control for project type and target group in order to maximise the comparability of the case study data. Consequently, we decided to concentrate on rehousing projects for single homeless people who were marginalized and had problems in addition to their homelessness.

Our aim was to develop recommendations for the improvement of existing rehousing services and strategies (or for the development of new ones), and to contribute to the development of standards for such services at the local, national and European level. Special emphasis was to be placed on pinpointing factors of relevance to policy makers and service providers, particularly those that indicate possible options for improving conditions for rehousing and for supporting formerly homeless people in sustaining their tenancy. In this respect, factors both conducive to and detrimental to sustaining a tenancy and further integration were highlighted for examination.

As our research has a clear evaluation focus and is policy oriented, the units of analysis in this research comprised the particular project (or small, specific rehousing scheme), rather than individuals. But for an assessment of the performance of the projects, we concentrated on the users’ perspectives and on qualitative interviews with persons who either had been or were currently clients of the projects in question. The minimum criteria for such rehousing projects or programmes was that they should aim at moving homeless people out of homelessness into permanent or long-term housing and actively provide support as necessary (for moving into the accommodation, sustaining the tenancy and facilitating self-sufficiency and independence). All projects under examination aimed, not only at moving their clients into normal housing, but also at enabling them to achieve further reintegration/reinclusion into society (although there were clear differences in approaches and in the key fields of intervention of the different projects analysed. We shall return to this below).

The target group chosen for our follow-up studies were marginalized single persons who had been homeless in the past¹⁰, and who, with the support of the rehousing services in their reintegration process, had moved in this process to normal, permanent housing. In our research guidelines, we suggested interviewing “successful” tenants who had moved into a normal dwelling and were still there at the time of interview, as well as “ex-tenants”, who had failed to sustain their tenancy and had either abandoned their dwelling or had been evicted. The idea was to prevent a concentration on “success stories”, and also to learn from those cases in which the rehousing process had failed – at least in the first attempt to create a stable tenancy. In practice, however, only in one of the three follow-up studies could “ex-tenants” who fulfilled these criteria be traced and interviewed.

All the follow-up studies were based on qualitative in-depth interviews with rehoused persons. Additional information was sought through interviews with staff from the different projects and other relevant key experts, and by analysing documents and statistics provided by service providers and other agencies involved with the project.

Following Katherine Dane (1998: 3) we chose a qualitative approach, in that this approach is best suited:

- *for researching sensitive topics where the validity and quality of the information depend on being able to build rapport with, and gain confidence of the respondents;*
- *for exploring the factors that influence and affect behaviour, enabling a greater understanding to be gained of the full range of experiences, attitudes and perceptions of the individuals under study.*

In contrast to quantitative methods, numbers and percentages do not play a central role. The intention here is to tell people’s stories rather than to quantify their experience.”

For our qualitative approach it was not necessary (nor feasible under the given financial constraints) to interview a large number of rehoused persons. Moreover, the projects under study did not comprise a large number of clients who had succeeded in moving into permanent housing. As we shall see, it was difficult enough to trace and motivate between 11 and 14 persons per project to take part in an interview.

Another innovative approach for strengthening the users' involvement in the evaluation of rehousing services was the organisation of users' focus groups. In earlier follow-up studies, group discussions and focus groups had only been used as a method for collecting information from professionals involved in the rehousing process. Our aim here was to use them as a methodological tool for getting more information from the rehoused persons themselves (including interviewees who had not “succeeded”). We also wanted to invite people who had been interviewed individually to participate in a focus group after the interviews had been analysed, to comment – as real experts – on the preliminary findings and recommendations of the study. In so doing, service users were afforded the opportunity to respond to the preliminary findings, and to discuss problems and potential solutions. In turn this led to a revision of some of the findings and recommendations, and also resulted in new issues being raised.

Earlier follow-up studies and experts' experiences show that a time span of a few months is not sufficient to assess the success or failure of a tenancy. For this reason,

¹⁰ The reason for this choice was our endeavour to achieve a certain degree of comparability, as well as the fact that many rehousing projects concentrate on this group. For the same reason only those people were included in our interview sample who had been homeless for more than half a year before being rehoused.

almost all the rehoused tenants we included in our follow-up studies had been living in a normal dwelling for at least 12 months prior to the interview.

Apart from questions concerning their history of homelessness (how and why they became homeless, how long they had been homeless, where they lived while homeless, how they came to be included in the rehousing process etc.), our main focus was on the changes and continuities that they had experienced after rehousing. Important topics of conversation in this respect included their satisfaction with the current housing situation (quality, price, neighbourhood, changes that had taken place after being rehoused), their financial situation (and their ability to cope with financial resources), possible or manifest integration into employment or training, social ties, their health situation (including coping with health problems), their support needs etc. Interviewees were asked about their organisation of daily life, their capacity to solve personal problems and cope with the authorities and institutions, as well as their expectations and perspectives for the future. Particularly important questions concerned, of course, their experiences in crisis situations, whether they had at any time felt in danger of losing their dwellings, and how they and others had reacted.

In all the follow-up studies additional interviews were conducted with staff of the rehousing/reintegration projects and other important experts.

3.2 Experiences arising out of field-work and limitations of approach

Field-work for the EUROHOME-IMPACT follow-up studies, confirmed the experience of earlier studies of this type, that it is quite difficult to get in contact with rehoused homeless people. By far not all of them tend to stay in touch with the service agency after they have moved into permanent accommodation. This applies even more to those service users who have been evicted or abandoned their dwelling some time after rehousing. For reasons of confidentiality it was necessary to make initial contacts via the services, and potential interviewees were asked if they would be willing to take part in an interview. So even if a contact was possible, not all rehoused people were prepared to speak about their experience and to be reminded about their history of reintegration.¹¹ Again, it is likely that those who experienced the greatest problems and failures were less willing to speak about their experiences. The minimum number of five “ex-tenants” was not reached in any of the three projects. All in all, 36 rehoused people were included in the three follow-up studies, seven of which had unsuccessfully attempted settlement.¹²

The service agencies and projects we concentrated on were relatively small and had, at the time of research, re-housed a relatively small number of people so far. For this reason, the low number of interviews does not raise doubts about the validity of our results, in particular as our study took a qualitative approach and it was not intended to quantify the findings. Nevertheless, we are still aware that a certain bias in our research towards including more “successful” cases is probable.¹³ On the other hand, as

¹¹ Financial incentives for interview and focus group participation were used and proved necessary (25 to 40 € per interview).

¹² Four “ex-tenants” were interviewed in the study on a rehousing project in Hanover. For the study in Dublin, interviews were undertaken with three “*unsuccessful*” users of the resettlement service in a somewhat broadened definition, including “*users who had engaged for a prolonged period with the settlement service but who did not ever succeed in moving into a tenancy,*” because the author took the view “*that many of the factors preventing users from reaching this point were likely to account for tenancies being unsuccessful or short-lived later on*” (Lyons 2002: 27).

¹³ “*The selection we got is probably higher than planned, acceptance of the interview in this context probably means that the success cases are over-represented*” (Tosi 2002: 34).

will be seen, our “samples”¹⁴ did allow a differentiated picture of various types of reintegration experiences.

Another problem in evaluating the effects and outcomes of the rehousing services is the absence of any control group in similar conditions. It is very difficult to scientifically isolate and prove different causes and effects in the rehousing process. What was the impact of moving into ordinary housing? What would have happened without the sort of support provided by the rehousing service etc? On the other hand, the use of control groups in these respects (e.g. people in similar conditions but without support, or rehoused in special housing, e.g. shared accommodation with restricted rights etc.) would not only have been extremely difficult, but would have provoked a number of ethical questions.

It would have been preferable to interview the same rehoused people at different points in time before and after rehousing. This would have allowed an individualized “pre-post” analysis of the development of our interviewees over time (for an attempt to use quantitative measures in such an approach cf. Kämper et al. 1997. The methodology is summarised in Busch-Geertsema 2001a). But such an approach was not feasible in the context of the EUROHOME-IMPACT project due to the given limitations in time and resources.¹⁵

It should be kept in mind that we have looked at one specific route out of homelessness and at a specific approach which emphasizes the importance of ordinary, permanent, self-contained housing for the social reintegration of homeless people. There are, of course, other possible routes out of homelessness (without formal support before rehousing, with support but no “post-settlement support” etc.), there are reintegration efforts which do not lead to rehousing in self-contained dwellings (but to special schemes such as long-term supported, shared housing, hostels etc.), and there are other groups of homeless people with different needs (families, couples, homeless people without serious additional problems).¹⁶

While we managed to achieve some homogeneity among the groups of rehoused people under research (single people who had been homeless for a certain time and were users of rehousing services), it was clear from the beginning that there were a number of important fundamental differences across the three projects, their approaches and the people rehoused by them. First of all, users of more than one reintegration service were included in the Italian research¹⁷, and for all of these services the move of their clients into ordinary housing was only part of a much broader integration project for marginalized homeless people of no abode.¹⁸ The rehousing pro-

¹⁴ Tosi (2002: 32) rightly points out that “*in fact the exploratory approach of the research project implies a selection of case studies, rather than a real ‘sample’*”

¹⁵ In Hanover, the researcher had frequently been in contact with some of the interviewees (but not with all of them) in an earlier evaluation. This also facilitated the contact and a longitudinal-perspective, as more than half of the interviewees were rehoused almost seven years ago.

¹⁶ For a typology of the main “routes out of homelessness” in Scotland, which could at least in part apply to other European countries as well, see Rosengard et al. 2001 and Anderson/Tulloch 2000.

¹⁷ The Italian projects were linked to each other through involvement in a local co-operation programme and partly by networking action.

¹⁸ “*With reference to these persons it would be questionable to define homelessness as ‘the absence of a permanent flat of one’s own’. In any case, the persons responsible for the programmes for their reintegration would not define their programmes or services as of ‘re-housing’ - they would rather think of it as of re-inclusion into society/community or social reintegration. In these cases too, accommodation is definitely a central part of intervention in the*

jects in Dublin and Hanover focused more (but not exclusively) on supporting their users in gaining access to long term, ordinary housing and sustaining the tenancies achieved. There were also some significant differences among the target groups of the three follow-up studies which we will comment later on.

There were great differences in the types of housing the interviewees were living in. While none of them shared their accommodation with anyone other than their partners or family-members, the operational definition of “self-contained, normal permanent housing” had to be differentiated for the three countries. Tosi emphasized that the physical structure of accommodation can be “normal” (a flat, for instance) while the legal structure might be special (e.g. no permanent contract and plans for transition to another flat).¹⁹ Besides this, in a number of European countries there is no “permanent” housing, short-term tenancies are widespread and viewed as “normal”, and a time-limit is even set for all long-term tenancies (e.g. nine years in Belgium). The rehoused homeless people can live in ordinary flats in different locations (in Dublin) or they can live with 12 people in the same house, but in self-contained flats with ordinary, unlimited tenancy agreements (in Hanover). Access can be gained through the usual channels open to everybody (as was the case in Dublin and in some of the Italian cases) or the services might dispose of a stock of housing with preferential access for their clients (in Hanover and in some cases in Milan). Integration into rented housing is probably the usual target for most rehousing projects in EU-countries, but one of the interviewees in Italy had bought his own flat and lived there as owner-occupier. “Normal” housing might be, of course, highly variable in relation to location, quality and price. We shall return to these aspects below.

Apart from the differences mentioned the usual difficulties associated with cross national research remain: We analyse examples of a particular type of service in very different national and local environments, with significant differences as to the dominating “welfare regimes”, to historical and cultural backgrounds etc. These differences will not be discussed at length in this paper but they have to be kept in mind.

Our experiences with the focus group meetings, held after the individual interviews with the rehoused service users had been analysed,²⁰ were encouraging: The response to our invitation and the participation in the focus groups was surprisingly positive, new information was gathered and the pictures obtained from individual interviews were substantially modified. The interaction among the participants of the focus groups facilitated fruitful discussions about various aspects of personal experience and other important topics and gave rise to a number of important recommendations. The interviewees appreciated the opportunity to discuss the preliminary results and to offer their opinion about them.

4. Rehousing services in three European cities: the projects and their background

Our follow-up studies were conducted in three European cities, namely Dublin (Ireland), Hanover (Germany) and Milan (Italy).

path to autonomy, but it is generally felt that it must form part of a broader plan of support, that the best approach is to tackle all the various types of hardship that led a person to fall first into social exclusion, simultaneously, albeit gradually.” (Tosi 2002: 4).

¹⁹ This was the case for the accommodation of some of the interviewees in Milan.

²⁰ Focus groups with service users were conducted in Hanover and Milan.

4.1 Dublin: Dublin City Council Settlement Service

In Dublin, users of the Dublin City Council Settlement Service (DCCSS), a public re-settlement service for rough sleepers, were interviewed. The DCCSS was established in January 2000 as one element of a new settlement strategy. In 2002, there were six settlement officers and a manager working at the DCCSS. They focus on rehousing rough sleepers, and in particular those persons who have been trying to avoid sleeping in hostels and shelters. Between February 2000 and August 2001, a total of 48 homeless people, predominantly men (92 %), had actively engaged with the DCCSS.

The DCCSS staff support rough sleepers by encouraging them to move into permanent housing, find a suitable flat for them and accommodation for the interim period (six to seven months on average). The DCCSS is situated in the "Homeless Services Section" of Dublin City Council, but has no exclusive access to ring-fenced housing for their clients. Thus, settlement officers have to compete with other voluntary organisations for accommodation for their clients.

"Post-settlement support is provided after clients move into their permanent accommodation. In the immediate aftermath of move-in, such support is provided on a weekly basis in the client's own home. Later, such support is reduced to monthly visits and is only phased out when it is clear that the client no longer requires such interventions. As the DCCSS has grown, the provision of post-settlement support has become increasingly difficult for the settlement officers. In reality, such support is often limited to crisis intervention or is provided on an ad hoc basis following requests from clients who phone or call into the offices" (Lyons 2002:18).

An internal evaluation conducted in August 2001 showed that the DCCSS was quite successful in making contact with its target group, and had managed to help about 45 per cent of its clients to move into long-term accommodation. Just less than one third had experienced a clearly negative outcome following their involvement with DCCSS (disengagement, resumption of rough sleeping), while for the remainder the outcome was still unclear because they were staying in temporary accommodation and waiting to be rehoused.

4.2 Hanover: Soziale Wohnraumhilfe Hannover and Project H13

Soziale Wohnraumhilfe Hannover (SWH) is a social rental agency for single homeless people with special difficulties. Founded in 1991, *SWH* was originally part of an advice centre for single homeless people with special difficulties, run by the Christian welfare agency "*Diakonisches Werk Hannover*". Since 1998, *SWH* has been a limited liability non-profit company (*gGmbH*). The main function of *SWH* has been to provide normal self-contained dwellings with normal tenancy agreements for single homeless people by initiating the building or rebuilding of housing and organising social support where necessary. In some cases, *SWH* also rents existing dwellings of older stock and sub-lets them to homeless persons. As a rule, *SWH* participates in the planning and realisation process and afterwards rents the building or some of the dwellings with long-term contracts (in most cases for a duration of 25 years). *SWH* sub-lets these dwellings with normal, permanent rent agreements to formerly homeless people with special difficulties. Nearly all the tenants of *SWH* were single persons when they moved into their dwelling. Special staff – officially employed by the central advice agency but answerable to the *SWH* – provide social support for the tenants of *SWH*.

Project H13 is an example of the approach also adopted by *SWH* in other schemes. It is a house with 12 individual self-contained flats for single households, constructed by a medium-sized housing company in 1994 and leased for 25 years by *SWH*. H13 enabled *SWH* to rehouse 23 single homeless people between August 1994 and May

2001. In 2001, half of the first-time tenants were still living there, some had moved to other dwellings, three people (of all the 23 tenants in the house) had died, and in two cases (9 % of the 23 tenancies in H13) the tenancy was terminated with a clearly negative outcome (eviction, abandonment). Most interviews for the follow-up study were conducted with tenants or ex-tenants of this house, but three of the “unsuccessful” interviewees, who had abandoned their flat or been evicted, were tenants from other *SWH* projects. All in all, by May 2001 *SWH* had been involved in the realisation of 137 dwellings in 15 different projects. Of almost 200 tenancies facilitated and administered by *SWH*, around 19 per cent had ended with a clear negative outcome (notice to quit, eviction, abandonment) while the vast majority (72 per cent) had had a positive outcome at this stage (i.e., they were still in existence or tenants had moved to other mainstream dwellings). For the remaining nine per cent, the outcome was unclear or the tenants had died (see Busch-Geertsema 2002a: 29).

Half of the 14 service users involved in the Hanover research, had been rehoused more than five years before we spoke to them, another five had been (or were) tenants of *SWH* for at least one year.

4.3 Milan: Cena dell’Amicizia and Caritas (network)

As already mentioned, in Milan rehoused service users of three voluntary associations involved in the reintegration of homeless people were interviewed for the follow-up study. Some had been clients of *Cena dell’Amicizia* (‘Friendship Supper’, *CdA*), an organisation that has been working for more than 30 years in Milan with severely marginalized homeless men of “no abode”. This organisation has a night shelter (13 places) and a day centre (15 places), both of which are reserved for men involved in some form of individualized reintegration scheme. Twenty small municipal apartments serve as transitional accommodation for *Cena dell’Amicizia* clients on the basis of a special contract at below-market prices. The clients are expected to stay in these flats for six months, but longer periods of stay are possible and occur frequently.

“For accommodation in ordinary housing the association gives support to access to public housing, in a few cases to private housing. The association works in strict co-operation with other private and public sector agencies as regards the needs for job insertion and training, etc. (...) During the entire period of stay in transitional apartments, occupants remain in close contact with the voluntary associations and continue to be supported by social services. Occupants are not assisted to find their own permanent accommodation in public sector housing until they have completed their reintegration plan” (Tosi 2002:28).

A number of interviewees in Milan were rehoused by a network of Caritas organisations. This included a local Caritas office (*SAM*: an orientation/social support/referral agency) and *Farsi Prossimo*, an organisation which provides emergency and transitional facilities for immigrants, but also caters for other homeless groups. Some of these interviewees were involved in producing and selling the street-newspaper *Scarp de Tennis*, which is also administered by Caritas. The interviewees rehoused by the Caritas network were a more heterogeneous group than those rehoused by *Cena dell’Amicizia*, including homeless people who were less marginalized and deprived and did not always follow the strict requirements of “*individual reintegration plans*”.

At the time of interview, seven of the 11 interviewees in Milan had moved to ordinary housing and four were living in transitional accommodation (special lease in social housing) but were on the waiting list for ordinary public housing. All had previously been homeless for a minimum period of half a year, and all had been living in ordinary housing (in the physical sense) for at least ten months.

4.4 Similarities and differences between the services under research

The three European rehousing services examined here share a number of common features, but also reveal some important differences. All projects have integration into “normal”, long-term housing as objective. For all projects, however, integration into such housing is not the only objective, and exclusion from it is not the only problem of their clients. Personal support is provided before and after rehousing. All services cooperate with other specialised services (e.g. for addicts, for the mentally ill, for training and integration in employment etc.) and regular welfare services. But – as was said already above – there are remarkable differences in the flexibility (or the strictness) with which different kinds of support are combined, and in the multi-dimensionality of approach. One of the projects in Italy works with “integrated support packages” and “individual reintegration plans”, and in fact all of the projects in Milan emphasize the necessity of their clients to establish social ties, take up work, and (in the case of CdA) “restructure their personalities” equally as important than the move into ordinary housing or perhaps even a necessary preparatory step or a precondition for such a move. The projects in Hanover and in Dublin, in contrast, could be classified as more “sectoral” approaches. Their primary objective is seen as integrating their service-users into long-term housing and providing support in sustaining the tenancy, as well as providing or facilitating access to further support as and when necessary. While the latter are explicitly rehousing or resettlement services (with a particularly strong housing element) the services in Milan define themselves as “reintegration services” in a broader sense (but with ordinary housing as an important element of the reintegration process). Even between the different projects in Milan, however, there are variations in the degree of strictness as to the multidimensionality of their approach. Antonio Tosi analyses this as an adequate differentiation of services providing for different subgroups of single homeless people.

However, not only the projects are different from each other, but these differences are also partly reflected in different viewpoints of the researchers who have undertaken the follow-up studies. This might even be seen in their use of different key words for the aim of the services. While Busch-Geertsema predominantly uses the term “rehousing” and Lyons speaks of “settlement”, Tosi insists on “reintegration” as the central category, and a discussion of the role of housing in the overall reintegration process.

It should be noted that the services of the three cities organise access to housing in different ways. Paradoxically, despite being the only municipal service, the settlement service in Dublin does not have any privileged access to public housing (clients are registered on the usual waiting list, and sometimes individual contacts within the administration might be used to assist individual cases), while the non-governmental services in Milan and Hanover have a stock of dwellings in social housing at their disposal, reserved solely for their clients. In Milan this stock is used for transitional housing and people then have to register with the municipality to move on to “ordinary public housing”, while in Hanover the dwellings are used for permanent tenancies.

Another very important issue for consideration relates to the different welfare systems in the three countries. In this context, differences in the provision, and level of a minimum subsistence payment, differences in the legal bases for funding and providing support and differences in general housing policies are the most pertinent factors.

5. Main results of EUROHOME-IMPACT follow-up studies

Background information on the local situations and the results of the three follow-up studies can be found in the contributions by Busch-Geertsema, Lyons and Tosi. In the following section we concentrate on those results that are relevant for a synthesis of

the three studies, and which contribute to our understanding of some of the more general questions posed in the Introduction.

First, however, we will present a brief overview of the characteristics of the service users included in the three follow-up studies.

5.1 Characteristics of service users included in the follow-up studies

As foreseen in the guidelines, all 36 rehoused homeless people who were interviewed in the three follow-up studies were single when they moved into their dwellings. Some of them had later found a partner (see below). As already mentioned, not all of the rehoused persons had succeeded in sustaining their tenancy. In Hanover, four of the 14 interviewees had abandoned their *SWH*-dwelling or were given notice to quit.²¹ In Dublin, three of the eleven interviewees had not yet managed to obtain a long-term tenancy despite a prolonged period of preparation. In Milan, all eleven interviewees had succeeded in getting access to a self-contained flat, but for four of them it was still a transitional stay while they were registered and waiting for access to public housing.

Table 1:

Some main characteristics of interviewees questioned for the follow-up studies

	Hanover	Dublin	Milan
Number of interviewees	14 (incl. 4 ex-tenants)	11 (incl. 3 “not yet tenants”)	11
Gender	10 men, 4 women	All male	All male
Age	20 – 65	30 – 55	29 – 70
20 – 29	2	0	1
30 – 39	2	3	4
40 – 49	6	3	2
50 – 59	3	5	1
60 and over	1	0	3
Years homeless			
6 – 12 months	1	0	3
> 1 – 5 years	7	6	6
> 5 – 10 years	3	1	2
> 10 years	3	4	1
Experiences in sleeping rough	11	All	7

The projects in Milan were reserved exclusively for men, so that only male persons could be interviewed. DCCSS in Dublin and *SWH* in Hanover offer rehousing for single homeless men and women, but in Dublin no female rough sleepers had been rehoused yet at the time when interviews were conducted. Rehoused men significantly outnumber women in the *SWH* project (three of the 12 first-time tenants in the H13 project were female), so that the inclusion of four women in the “sample” is fairly

²¹ At the time of interview two of these ex-tenants of *SWH* had, after a period of homelessness, succeeded in being rehoused again, while the other two ex-tenants were still homeless.

representative of the gender ratio. There was no clear gender-specific difference in the “rehousing histories” of men and women in the H13 project.

If we look at the age pattern of our interviewees, it becomes clear that the majority of them were middle aged and only few young people under 30 were interviewed.

Few interviewees had been homeless for less than 12 months before being rehoused, while most had experienced several years without a home of their own, and more than a third (nearly half in Hanover and Dublin) had even been homeless for five years or more. For many interviewees, homelessness meant sleeping in public dormitories, hostels and other institutions, but the majority also had experiences of sleeping rough.²²

The target group of our follow-up studies was rehoused single homeless people “with problems”, i.e. with other problems in addition to having no roof over their heads (or to having no secure and individual home). Typical problems included addiction to alcohol as well as to drugs (the former being more frequent), mental ill-health, and prison experience. In some cases such problems were combined and led to a substantial need for social and medical support. As we will see below, physical health problems also led to the exclusion of a number of interviewees from the labour market. In Hanover two of the interviewees stated that they had no additional problems – despite being classified by the authorities as persons with special social difficulties. Neither of them had ever had a dwelling of their own before becoming a tenant of *SWH*. In the follow-up study carried out in Milan five interviewees reported no comparable additional problems in their history. Two of them were immigrants who had no problems such as mental ill health or addiction but had to cope with difficulties to obtain a legal status and with precarious working conditions. Financial poverty was a problem for almost all of our interviewees, at least in the first period following the move into dwellings of their own after a long period of homelessness.

Most of the rehoused tenants had been staying in long-term self-contained dwellings for one to two years at the time of interview. Only in the Hanover project had seven tenants been rehoused more than five years previously. It seems to confirm the results of other follow-up studies that most tenancies that failed, did so within in the first 12-16 months after rehousing.

To sum up, the follow-up studies deal with marginalized people, mainly middle-aged men, who had experienced long periods of homelessness and had to cope with additional problems before and after rehousing. Apart from a number of common characteristics, the individual histories, and also the rehousing careers, highlight the heterogeneity of the group we focussed on. In Milan, it was even possible to distinguish between different sub-groups, also owing to the fact that rehoused clients of three different services were interviewed and the sample not only included people with severe health and addiction problems, but also immigrants and other people with a poverty background but without particular additional problems.

²² Rough sleepers were the target group in Dublin, so all 11 interviewees there had such experiences. In Hanover 11 of the 14 (including two of the four women) had slept rough for some time. In Milan this was the case with seven interviewees.

5.2 Outcomes of rehousing and integration

5.2.1 Relative integration: Different reintegration experiences and different types of reintegration achieved

While all those who were still tenants at the time of the interview had improved their situation after having escaped homelessness, and had reached a certain degree of autonomy, only a (small) number of them had reached *full* autonomy and the majority still had problems. It is reasonable to argue, however, that many had achieved *relative* autonomy and *relative* integration. In the context of the particular target group and under the given structural conditions, it is also reasonable to acknowledge such relative integration as a success and to recognize the great difference it makes for formerly homeless people to live in their own dwellings without having succeeded in finding employment and escaping from poverty.

The authors of the follow-up studies use different typologies to distinguish between the different reintegration “careers” (or trajectories) of their interviewees. Busch-Geertsema and Lyons focus on the career of their interviewees after the move into long-term housing, and classify three to five different types of careers, differentiated according to the level of support needs, labour market participation or participation in education and training, social networks and stability of tenancy (and motivation to sustain it). Apart from those who did not succeed in sustaining a long-term tenancy, there are those who have reached an advanced level of integration with no or low support needs, those who still require low to medium support and are in most cases not in stable employment or training (often for health reasons), and those who still have relatively high support requirements and live in a more or less constant risk of becoming homeless again.

Tosi goes one step further and correlates the situation after rehousing strongly with the situation and the history of the homeless people before endeavors at reintegration began. One of the distinguishing indicators for Tosi is *“the severity (and the dynamics) of the history of emargination. Some histories constitute true and genuine drifting, corresponding to the conventional description of the homeless, or to those who in Italy are defined as ‘persons of no abode’, strongly marginalised homeless persons and/or at advanced stages in the process of social exclusion, characterised by multiple deprivation etc.”*, while others *“do not constitute true and genuine cases of emargination, or are not so extreme – as with situations tackled at a fairly early stage thereby preventing serious drifting and a chronic condition or with situations characterised by specific types of problem (housing and job/income) which have not involved desocialisation etc.”* (Tosi 2002: 38)

Tosi emphasizes that *“..the fundamental distinction is that between vectors with their roots in poverty – low income above all – and those originating from ‘personal’ disadvantages or pathologies. Both types of factor may be found together, but in most cases the dominance of one set of factors makes it relatively easy to identify the individual histories in this sense. In a certain number of cases the predominant problem is a background of poverty, poverty ‘inherited’ from the family of origin: these are people from poor or very poor families, in which it is not uncommon to find other problem factors. (...) These situations – which we will call ‘poverty syndromes’ – have different effects depending on whether other disadvantages are present or appear at a certain point in the case histories. In some cases these are people who are simply poor, while in others there are additional factors (often occurring later): mental problems, illnesses, deviancies of various types, etc. Another possible type is given by those cases in which the history of emargination and its development – and, at least to some extent, also the current situation – are heavily or predominantly determined by one or more*

'social problems', or specific pathologies: psychiatric problems or alcoholism more often than not" (Tosi 2002: 39):

Apart from these two main types, Tosi also identifies homeless persons *"who do not come from poor families, and who are generally equipped with reasonable or good resources, job skills and the ability to form relationships, being without any personal handicaps"*, but who hold insecure jobs and are in greater risk of becoming homeless because of their fragile economic situation, the lack of state regulation in this field of employment and the weakness of guarantees and protection by the welfare state. Immigrants form a case apart: *"In effect their problems are above all those typical of the insecurity characteristic of the initial phase of a migration case history, the difficulties with the first job and accommodation, often aggravated (as in our cases) by the lack of a stay permit. In this phase they are heavily dependent on services. Later, better work and legalisation of their position triggers (for most) a process of integration that makes them autonomous."* (ibid.)

This distinction leads Tosi to argue in favour of a differentiated support approach working with different "degrees" of *"integrated reintegration plans"* for those who need multidimensional support and more sectoral interventions for those who do not require such a plan.

On the one hand it may be an effect of the more heterogeneous sample in Milan that such fundamentally different "homelessness histories" were identified. On the other hand, however, it begs the question as to what extent support needs and post-rehousing careers can be predicted from knowing the individual histories of the homeless. In the case of the German project it was surprising that *"... social workers' initial prognoses on the development of individual resident's need of care have often turned out wrong. Some residents who had been expected by social workers to be at a high risk of losing their dwellings again after having lived in an institution for many years had in fact become quite stable: their need of support had decreased and in cases of crisis they contacted the social care service on their own accord. On the other hand, some residents who had initially been assessed very optimistically (little need of care, no special risks) several times got into crisis situations which also caused rent arrears."*(Busch-Geertsema 2002a: 52). Nevertheless, the results in Hanover and Dublin also showed that those who did not succeed in sustaining their tenancies were persons with a particularly long history of homelessness and often with extreme health and addiction problems, while those reaching an advanced stage of integration were "privileged" in terms of a better education and work experience.

We may therefore summarize that the rehousing careers of formerly homeless people reach different "degrees" of integration. Relative autonomy should be seen as a successful outcome for some in view of their situation prior to contact with the reintegration service and the degree of their ill-health. While life histories do not pre-determine the rehousing careers of homeless people, there are increased risks and a need for more intensive social support for people with a long history of homelessness and for those who cannot cope with mental health and addiction problems.²³ Chances of further reintegration are often greater for those with higher education and work experience than for those with physical and mental-health problems. While this primarily underlines a greater need for support for the latter, it does not support the discourse

²³ The problem here often lies in the unpredictability at the time of starting the rehousing process as to who will be able to keep such problems under control and who will not. This uncertainty calls for a flexible approach concerning the provision of personal support and crisis intervention. See below.

about the latter as being “*incapable tenants*” who should only be provided with special and temporary accommodation.

5.2.2 The housing dimension

In agreement with other follow-up studies, this research has shown that housing is an essential factor and a necessary basis for integration. It is not, however, the solution to all the problems faced by many people in our target group, and it does not render dispensable the provision of support in tackling these problems.

Self-contained, individual housing was appreciated by almost all of the interviewees, as a source of autonomy, security, privacy and “normality”. This might be termed the “*home-experience*” (Tosi).²⁴ It was of great importance, especially to those with a relatively low level of reintegration in other areas of their life, that they could be on their own, have their own key and lock the front door.

It might also be due to the different approaches of the projects included in this research that the role of housing was perceived slightly differently in the different projects. Integration into normal housing may be seen as a “*basic ingredient of the reintegration process*” (Tosi), or a precondition for possible further integration. But despite these gradual differences in the perception of “*the housing factor*” (as a special priority or as one – albeit important – factor among a number of requirements), all three follow-up studies showed that integration into normal housing has a very fundamental impact on the overall integration of homeless people into society.²⁵ Some readers may see this as self-evident, while many others – experts as well as the general public – still underestimate the importance of this factor for social inclusion.

All three follow-up studies show that the majority of interviewees prefer to live in mainstream, self-contained housing, and emphasize that they do not want to share with anyone else (except spouses or family members). A minority would accept other forms of housing (shared, hostel type) as a transitional solution (and mostly only for a brief period), but the majority are strictly against it. The fact that we were focussing on those rehoused in self-contained housing does not rule out the possibility that some homeless people might prefer or need the temporary or long-term provision of special regimes or types of housing. Many look back on experiences with communal and temporary accommodation as something they have left behind and do not want to return to. But we also know from other studies that the overwhelming majority of homeless people wishes to live in self-contained, individual housing on a long-term and secure basis.²⁶

As already stated, the housing situation of those rehoused was “normal” insofar as they lived in flats (nearly all in public or social housing), they did not share with anyone

²⁴ Tosi sees a difference in the significance of housing for persons with a “poverty syndrome” and for the seriously marginalized with “no abode”. While the latter emphasized the “home-experience”, the economic value (cheap housing) was more emphasized by those who were “just” poor.

²⁵ It remains a matter of debate as to whether a distinction between being a tenant in a self-contained dwelling and having a “home” is productive for the analysis. It is a frequently used, but subjective rather than objective concept. There may be very different ideas among researchers and among homeless people about what a “home” should be like. And it is extremely difficult to judge in which cases a formerly homeless person has or has not succeeded in making his or her dwelling a “home”.

²⁶ See below.

except partners or family members²⁷, and they were responsible for rent payments and other tenants' duties. It was "special" insofar as some tenants were still in need of personal support and some of the dwellings had a special kind of administration.

Many of the flats were rather small, some in poor or very poor condition and in disadvantaged areas. Surprisingly little criticism was made on these aspects which is possibly an indicator for lower expectations and a "low equilibrium" (Tosi) achieved. The H13 project in Hanover shows that expectations may rise after time. Experts at least in Hanover and Dublin emphasize the importance of good-quality housing for successful integration ("*Bad quality accommodation encourages poverty really. (...) People settle much happier and much faster if they are going into good quality accommodation..*" – settlement officer, quoted in Lyons 2002:20).

While problems in sustaining the tenancy, maintaining regular rent payments and coping with extra charges played an important role in Hanover, such problems were not reported for the other projects due to very low rents in Milan and arrangements for the payment of rent by direct debit in Dublin (plus meters for the direct payment of gas and/or electricity). The relatively high rents and extra charges in Hanover led to harsher consequences in case of rent arrears, thus increasing the risk of tenancy failures.

5.2.3 Employment and training

Employment or involvement in further education and training is an important indicator of integration and autonomy. Work is not only a source of income, but also an opportunity to build up social relationships and networks, and it can be a source for improving one's self-esteem and independence. Some interviewees had reached this level of integration, but a considerable number could not be integrated into employment (or only in precarious types of jobs), and had little chance of achieving economic independence through work.

Typical Individual reasons included ill health, advanced age and a particularly low level of education, training and job-experience. It should not be forgotten, however, that structural reasons are an important cause for the exclusion of many interviewees from the labour market. The most important structural reasons in this respect are high unemployment rates, especially among people with low qualifications, and a general reduction of "simple" jobs, but also poor conditions for some of the jobs offered. Another problem for those who were able to work, was the high discontinuity rate and insecurity of employment.²⁸

Those who managed to get – and keep – a job, were often "privileged" in terms of their educational qualifications and/or continuous job-experience. Some of the others expressed their wish for a (part time) job with lower demands.

In the current discourse about "*activation*" and "*workfare*" policies it is important to remember that enforcing strict cuts in cases of non-cooperation of unemployed people might be helpful for some, but might also implicate new risks for others (including an increased risk of renewed homelessness) and destabilize the level of integration achieved.

²⁷ With the exception of two interviewees in Milan who shared one apartment.

²⁸ While this was certainly true for Germany and for Italy, the situation in Ireland is described differently by Lyons. She sees one of the most important reasons for the lack of involvement and/or training of rehoused rough sleepers in Dublin in the low priority attached to this level of re-integration by the relevant service.

While employment facilitates the (re-)establishment of social ties, an important finding in at least two of the follow-up studies (in Milan and Hanover) is that a number of ex-homeless interviewees also managed to find new friends and partners without it.

5.2.4 Coping with restricted financial resources

Restricted financial resources were a problem for many interviewees after being rehoused. Rehousing put an end to homelessness, but many did not escape poverty. For some – because of their low chances of taking up gainful employment – their prospects were limited to a life in persistent financial poverty.

Many of the financial problems were similar to those which other persistently poor people are also faced with. There are different strategies for making ends meet, including small and irregular jobs, illicit work, using social relations (if existing) to economize etc.

One specific form of personal support is the administration of financial affairs and debt counselling, which was seen as an important measure (on a strictly voluntary basis) towards preventing repeated homelessness.

5.2.5 Health problems

A large proportion of the interviewees had serious health problems, including physical as well as mental ill-health and addiction problems. For many, rehousing in a flat helped them to cope better with health problems, to visit doctors, to get their teeth repaired, get glasses if required, to get used to regular medication etc. This was an important advantage of being “settled” also for those who did not manage to get a job (partly because of their health problems) and to escape poverty.

Addiction problems were widespread among interviewees. Failure to keep their consumption under control and relapses into excessive drinking was a decisive factor for those service users who did not succeed in maintaining a tenancy, and was a risk factor for the reintegration of some others. But for many successfully rehoused people it was easier to control their consumption of alcohol and other substances when living in their own flat. In the projects in Hanover and Ireland, only a minority were totally abstinent. In one of the Italian projects (CdA), abstinence was a requirement before support was given in getting access to ordinary housing.

5.2.6 Social ties and personal relations

As previous follow-up studies have shown, loneliness and social isolation pose a problem for many single homeless people following the transition into self-contained housing. It was seen by many of our interviewees as important to break ties with their “networks” from the past, i.e. with other homeless people, thereby enforcing their isolation. Formal personal support had an important relational function in this context, where the social worker was the only person some rehoused persons spoke to in the initial period after moving into their flat.

While there were differences across the three samples in relation to social ties (rehoused rough sleepers in Ireland obviously being the most isolated), it became clear from the follow-up studies in Milan and Hanover – but is also known from earlier studies – that the interplay between formal and informal support is often decisive for advanced reintegration. For many formerly homeless people, contact with new friends or friends and relatives from “old times” or even the beginning of a new intimate partnership was at least as important – and in some cases much more important – than any

formal support for a new start or just for bearable survival in a precarious material situation.

In this context, some obvious differences between the three samples²⁹ in relation to the development of social ties point to the importance of time (building up new social relations needs time).³⁰

5.3 Requirements for welfare provision and support

From the three follow-up studies and the interviews with formerly homeless people a number of requirements can be drawn for the provision of welfare and support. Many of these requirements are not exclusively relevant for our target group, but they form the basis for facilitating the successful integration of marginalized homeless people.

5.3.1 Role of housing

As has been said repeatedly, the importance of self-contained, “normal” housing for the reintegration of marginalized homeless people should not be underestimated. Being in need of housing or a “home” is often not their only problem, but settlement into a flat of their own is a very important step towards an improvement and (or) normalization of their living conditions.

In this context the general supply of low-cost housing is crucial. Most of our interviewees were provided with public or social housing. Contrary the current trend in all EU member states towards a predominantly market-led “(re-)commodification” of housing, and in contrast to the widespread withdrawal and reduction of state intervention in the housing market, the importance of the role of public/social housing in providing self-contained accommodation for disadvantaged groups must be stressed. State intervention in this sector remains essential.

Nevertheless, a general supply of affordable housing is not sufficient for those who have access problems of not only a financial nature. In all three follow-up studies the need for targeted measures is emphasized, including ring-fenced municipal accommodation, contractual agreements and allocation rights and the development and promotion of social rental agencies³¹ and similar initiatives in the voluntary sector.

Another conclusion of all three studies is that appropriate links are necessary between housing provision and the provision of social support (while still maintaining the necessary division of roles between social workers and landlords).

The quality and geographically location of the dwellings in which homeless people are rehoused have a certain influence on their integration chances. In most cases, there is a need to find an acceptable balance between low rent and acceptable quality, and to

²⁹ While most interviewees in Hanover managed to build up new social ties, and some entered into an intimate partnership (which had a major influence on further reintegration) this was not the case in Dublin. In Milan, “*informal*” support also played an important role, but for many of the interviewees social isolation still represented “*a major limitation to their reintegration*”.

³⁰ In Hanover, more than half of the “tenants” interviewed had been rehoused more than five years before the interview and those who now had a social network or intimate partnership had been alone for a long time in the first months or even years after moving into their dwelling. Another relevant point is that the majority of homeless rough sleepers in Dublin had experienced a marriage-breakdown.

³¹ For examples see de Decker 2002 for Belgium, Busch-Geertsema 2001d for Germany and Kärkäinen 1998 for Finland. On the whole topic of access to housing for disadvantaged groups in Europe see also Edgar et al. 2002.

find accommodation in areas that do not pose a high risk to integration due to extreme segregation and disadvantageous living conditions.³²

Examples from the German follow-up study, but also from earlier studies in other countries, show that it is beneficial if a change of dwelling and/or area is facilitated for those rehoused persons who experience an escalating conflict in their neighbourhood or who feel extremely isolated in an area unknown to them.

5.3.2 The need for flexibility and individually tailored support measures

All three studies underlined the heterogeneity of the target group and showed significant differences even though a “pre-selection” had taken place (focus on single homeless people with special difficulties). The need for flexibility and individually tailored support both before and after rehousing in a flat – already underlined by the results of earlier follow-up studies – was evident. This also supports the criticism against rigid staircase-systems with fixed and relatively long periods of stay in special regimes as well as against any other standardized model for reintegration. There is no “one size fits all” solution.

The need for more flexibility also implies the need for flexible forms of financing and providing social support for those in need after rehousing has taken place (to prevent renewed homelessness but also to promote further integration). Social workers must be enabled to make accurate and continual assessments to ascertain what is the most appropriate intervention for their clients and to react to changing needs. Generalised time limits for support are as inadequate as schemes in which support is provided with greater intensity and duration than really needed by the individual service user.

In addition, systems and schemes that facilitate access to, and cooperation with, other specialized services (in the fields of education, training and employment, addiction, mental and physical health etc.) are required.

Relative autonomy and relative reintegration should be seen as an appreciable objective for some of the marginalized homeless people. Some have a more or less continuous need for material as well as personal support. In many cases (not all), however, this does not imply that they need special forms of accommodation; protection and support may also be provided in “ordinary” housing.

5.3.3 Integrated approaches and “sectoral” interventions

People with multiple problems need multidimensional support. Multidimensional support could be provided in “*integrated packages*” and in the context of a rigid plan, or through more flexible and more “*sectoral*” interventions with priorities for special areas (e.g. housing) and additional help where needed for other dimensions of reintegration (health, employment, social relations). A strong sectoral approach restricting the support to one aspect only, e.g. the provision of bricks and mortar (without further support), integration into employment only, or curing addiction problems (without tackling the housing problem) seems inadequate for most of the people we interviewed. However in the Italian case there were some homeless people (immigrants, those classified as “*poverty syndrome*”) who really did not need much more than ordinary housing and a job for their reintegration into society. We have to remember here that our target

³² On the other hand the currently increasing demand for a “social mix” (which is seldom defined more closely) is sometimes unrealistic and often aggravates the exclusion of particularly disadvantaged groups from a substantial proportion of the affordable housing stock and from those housing areas where integration into the neighbourhood is much easier to achieve than elsewhere.

group was restricted to marginalized single homeless people “with (additional) problems”. It should not be forgotten that there are many other homeless people who do not need any specific personal support at all, or only “weak” forms of “attendance”. Owing to our research approach, however, most of our interviewees were in need of more or less intensive personal support.

It seems clear from our studies that strongly integrated packages (with personal supervision) should be restricted to those who need it (the severely marginalized), and individually tailored as far as possible. Even then, it remains a matter of debate, as to where, and for how long, stricter forms of control and supervision in communal accommodation are appropriate and legitimate – if at all.

One debate of particular importance concerns the question as to what extent it may be legitimate to refuse homeless people “with problems” support in gaining access to normal housing (and thus stigmatizing them as “*not being able to live in a flat*” or as “*incapable tenants*”) or to condition such access in terms of their participation in all of the different stages of “*reintegration*” and “*probation*” schemes in special accommodation. An element of such a “*staircase approach*” can be found in at least one of the Italian projects, but also in some of the German projects where people stayed in temporary accommodation before they applied for rehousing by SWH. In Italy, some interviewees who had completed such a process commented favourably about it, especially in the light of the severe problems they had had to fight with before. As Tosi (2000: 55) points out, “*in effect the two interviewees who were in this institution longest – and who essentially judged it positively – both had particularly difficult case histories with considerable need for resocialisation, care and the management of personal problems. It is interesting that the persons with extreme marginalisation histories are most ready to recognise the value of restrictions and of the severity of the rules in the first phase of the process*”. Tosi (2000: 62) underlines the positive effects of Individual Rehabilitation Plans (IRP) for “extreme cases”: “*In our sample there are a few cases in which IRP has enabled the achievement of levels of autonomy and quality of life – and of housing autonomy – which appear incredible if we consider the heaviness of the marginalisation histories behind them. In these cases we can hardly imagine success without strong reintegration plans such as IRP.*” But he also emphasizes that there was some severe criticism by interviewees of the degree of control exercised by services over persons participating in a reintegration plan, especially the heavily structured and regulated nature of the initial phase in a night shelter (including bag search, checks to prove alcohol misuse, strict time tables etc.). “*Nevertheless the need remains to rethink the point and the possibility that the idea of an individual reintegration plan (and of relatively long periods of stay in special regimes), be separated from that of a heavily regulated community institution.*” (Tosi 2002: 52)

In this context, it should be remembered that there were no interviews with those clients who had not received support in gaining access to ordinary housing because they were judged by their social workers not to have reached the final stage of their individual reintegration plan.³³ While many experts commend the potential of different kinds of staircase systems for the inclusion of extremely marginalized people, the exclusionary effects emphasized by critics of these approaches should not be ignored. All too often a concept of “*staircase of transition*” turns in practice into a “*staircase of exclusion*” (Sahlin 1997).

³³ Cena dell’Amicizia, the organisation working with individual rehabilitation plans “*estimates that approximately 10 per cent of service users re-acquire full autonomy, but that all the users (approximately 250 in seven years) have found also relief and dignity there, as well as an incentive for the future*” Tosi (2002:29)

While some very strict forms of integration plans and staircase systems are still controversial, it seems obvious that more flexible, individual reintegration plans make sense and are an important tool for promoting the reintegration of marginalized homeless people. They can also be used for attendant support for formerly homeless people in normal housing.

For more “*sectoral*” interventions it is especially important to secure access of the target group to support in other areas, be it of a general or specialised nature. Links have to be made, networks established, and awareness has to be raised about the specific problems of (ex-)homeless people.

A number of examples show that complete abstinence or integration in employment is not a necessary pre-condition for sustaining a tenancy (and should not be used as such a condition in practice). On the other hand excessive alcohol and drug consumption, extreme anti-social behaviour, severe mental health problems (without adequate treatment) and a refusal to cooperate with support services in crisis situations are important risk-factors for renewed homelessness.

Despite some controversial views on the necessity of “integration” of support measures our research reconfirms that normal housing can be provided in much more cases than it is presently practice in many locations in the EU and even in cases of heavy and long-term experiences of marginalisation.

5.3.4 Types of support needed

To reintegrate marginalized single homeless people, material support (access to housing, financial assistance) is essential, but not sufficient, in most cases. Personal support is particularly important, and even indispensable for those with severe marginalization experiences. Personal support should encourage motivation and a sense of responsibility and help in withstanding crisis situations. Emotional support is of particular importance in the light of the widespread social isolation and lack of social networks of rehoused single homeless people (relational aspect of personal support).

In a more practical sense, many single homeless people need support in dealing with the authorities, asserting their rights and coping with the demands of being a tenant of a self-contained dwelling.

Social workers should actively seek regular contact and visit their clients at home, at least in the initial stage after rehousing. They should also be able to react quickly and effectively in crisis situations. Flexible forms of financing and the organisation of support should facilitate crisis intervention and the long-term stabilization of those in need.

While in Germany it was a given condition that support in rehousing services is provided by trained and qualified professionals, this is not the practice in some other European countries, as for example in Ireland and Italy. On the other hand, in those countries where most of the services for homeless people are administered by qualified professionals, there are also questions about the potentials and limits of voluntary work in this field. One of the possible areas in which cooperation with volunteers might be encouraged is tackling social isolation. Interesting initiatives in Finland and the UK, for example, show that it is possible and useful to work with volunteers in this field, but that there are also a number of support activities that should be carried out by experienced staff with the relevant qualifications.³⁴ Adequate training should be offered to inexperienced professionals.

³⁴ For examples see Kärkkäinen et al 1998 and Busch-Geertsema 2001c.

Our results confirm the need for initiatives to tackle loneliness and social isolation after rehousing. Such initiatives are also important for opening up opportunities for the provision and use of informal support. There is still not enough empirical data on the positive and negative effects of different options such as befriending schemes, peer support, social activities provided by services for the homeless and social activities for wider groups, etc.

In the field of employment as well as in other fields (e.g. health) it is vital to open access for ex-homeless people to suitable schemes which are targeting for a wider range of disadvantaged groups and to open access to general services. Structural and individual lobbying activities in favour of ex-homeless people are relevant tasks in this respect.

In the process of rehousing and reintegration, failures and relapses are not unusual. Clients should always have the chance to try again. Positive outcomes of second and third rehousing effort show that it is useful for rehousing services to have a *“fluid settlement plan that allows clients to ‘fail and return’* (Lyons 2002: 57). However, certain limits will be necessary for those clients who repeatedly cause significant trouble and damage, before abandoning their dwelling.

Our examples show that it is possible to provide the different sorts of support mentioned in ordinary housing, and that this is often more successful than when it is provided in communal institutions.

5.3.5 Important contextual factors

For the effective (re-)integration of homeless people through rehousing with the necessary support, a number of contextual factors are particularly relevant.

Monetary assistance is essential as part of the public welfare system providing the necessary means for reintegration. Most important is a system of social assistance and other transfer payments sufficient to provide an adequate subsistence minimum (based on rights, not on discretion as is still the case in Italy and some other European countries) for those who cannot be integrated into full-time employment. Many of the problems rehoused people face are similar to those which other poor people are confronted with as well. Often higher benefits, sufficient to allow a life of dignity and participation in social activities, would not solve all problems but could make life much easier for all recipients – not only for rehoused homeless people.

Financial assistance is also necessary to assist rehoused people to organise furniture and all other household necessities. An acceptable level of comfort should be provided, and in a way that minimises stress at the time of moving into a flat.

Access to low-cost housing of acceptable quality was already mentioned as crucial. Some of the homeless (those less marginalized and many immigrants) don't need much more for reintegration, while for others better links between housing and welfare are particularly important.

In the field of training and employment there is a great need for jobs and training opportunities which are suitable for those (not only ex-homeless) people with serious restrictions in their ability to work full-time (part-time jobs in the regular market as well as job schemes). It is important that they also offer some financial incentive.

Reintegration programmes and rehousing projects for homeless people should be made part of a wider network including “low-threshold” provision and the provision of special types of housing for those who want or need it. There are a number of interesting experiences with special types of housing which are different from the usual shelters and hostels. Examples include long-term accommodation for homeless peo-

ple with severe mental illness or a long history of hospitalization, which provide a more communal and supervised structure, where residents can live permanently, take part in communal activities and transform their rooms into a “home”. Such projects are discussed as “*safe havens*” in the United States (Cullhane 1992) and Canada (Bridgman 2002), but are also promoted as innovative approaches in Europe (for an example in the UK see Aldridge 1997). Common features include a lack of excessive demands on the inhabitants, consistency, easy accessibility, continuity, flexibility, and individual attendance. Another potential alternative to ordinary housing are unregulated and unusual types of accommodation (caravans, houseboats, self-built accommodation, garden allotments etc.). The social potential of such forms of accommodation have been studied in Denmark, where even a governmental programme has been implemented to support “unusual housing for unusual characters” (*skæve huse til skæve eksistenser*).³⁵ In many other countries, similar forms of unusual housing are used as self-help strategies by potentially homeless people.³⁶

Nevertheless, the fact that a minority of homeless people prefer or need special types of housing must not lead to a construction of homeless people as a group of “*second-class people*” which should be provided with “*second-class housing*”. Ingrid Sahlin (1996 and 1998) has shown the problems and exclusionary effects connected with a “*secondary housing market*” and rigid staircase systems that are still seen as models of best practice not only in Sweden but in many other European countries as well. Recent case studies in different Swedish towns affirm Sahlin’s criticism with new empirical evidence (Runquist 2001, Lindberg et al. 2002 as mentioned in Sahlin 2002).

A number of surveys and data bases in several European countries show that only a small minority of homeless people do not want to live in normal housing. The great majority wants to move into permanent, self-contained housing (cf. Busch-Geertsema 2002b, see also Sahlin/Löfstrand 2001). In respect to the ability of homeless people to sustain a tenancy, the follow-up studies have shown positive results even for many long-term and severely marginalized homeless persons – provided that those who need social support are adequately provided with it. A number of studies (Busch-Geertsema / Ruhstrat 1997; Busch-Geertsema 1998; Cullhane et al. 2002) have also shown that such support in ordinary housing is considerably less expensive than providing services for people who remain homeless, although this remains a controversial topic.

Temporary accommodation – where it is at all necessary and cannot be avoided by the prevention of homelessness and adequate long-term provision – should be kept temporary. Those homeless people who want normal, self-contained housing and are fit for it – which is the great majority – should be provided with such within as short a time as possible in order to avoid the destabilizing and marginalizing effects of prolonged homelessness. If they are in need of personal support they should receive this support as far as possible as attendant support (“ambulant” support by visiting social workers) in normal housing.

6. Conclusion

The three follow-up studies of rehoused homeless people in Dublin, Hanover and Milan have confirmed many results from earlier follow-up studies and have introduced

³⁵ Cf. Kristensen 1999, p. 365, Busch-Geertsema 2001b, pp. 75 ff. and Noordgard/Koch-Nielsen 2001, pp. 52 ff.

³⁶ The ambivalence of such “surviving strategies” is discussed in Edgar et al. 2002, chapter 5.

new differentiations of various types of rehousing and reintegration careers. It is important to remember that our focus was on a particular group of homeless people, namely marginalized, single people with additional problems, and the results cannot be generalized to all people excluded from normal, permanent housing.³⁷ Furthermore we focused on one particular strategy for rehousing homeless people, that is, integration into “normal” housing with the provision of pre- and post settlement support. A number of other “routes out of homelessness” exist.

Of the 36 rehoused homeless people interviewed for the three follow-up studies (29 of whom were successfully rehoused), different “degrees” of reintegration and autonomy had been achieved. Those with full autonomy were a minority in our samples, but all who were still tenants at the time of interview had made substantial progress and improved their situation. Relative integration and relative autonomy must be seen as a realistic and worthy goal for those rehoused people who with great probability will remain excluded from “normal” employment and will have to continue struggling with restricted resources, not least because of health problems, addiction and advanced age, but also because of structural problems in the labour market. The “housing factor” and integration into normal, self-contained housing with a long-term perspective as regular tenants also had an important impact on these people in the sense that it helped them to acquire normality, stability, a private sphere and (relative) autonomy. Most important, however, there still remains a need for additional (and flexible) social support, for improved cooperation between several specialised and regular services, for initiatives to tackle loneliness and social isolation and for the provision of job opportunities for those unable to work in regular full-time employment.

Despite the heterogeneity of homeless people and the need for differentiated services for different subgroups, access to normal housing and the provision of adequate material and personal support for those in need of it remain the most important requirements for the successful (re-) integration of marginalized homeless people.

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³⁷ Cf. Quilgars/Pleace 1997.

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