

# Sustainable ways of preventing homelessness (Denmark, 22 November 2013)

## Discussion paper<sup>1</sup>

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### 1. Introduction

The 'Peer Review in Social Protection and Social Inclusion' Programme is carried out in the context of PROGRESS – the EU's Programme for Employment and Social Solidarity. PROGRESS has as its overall aim to financially support the implementation of the objectives of the European Union (EU) in employment, social affairs and equal opportunities, as set out in the Social Agenda. Section two of the PROGRESS programme supports the implementation of the EU Open Method of Coordination in the field of social protection and social inclusion (Social OMC) by – among other things – organising exchanges on policies and good practice and promoting mutual learning in the context of the social protection and inclusion strategy. It has as one of its objectives capacity building amongst key social actors and the promotion of innovative approaches.

Homelessness continues to be a critical issue in most EU Member States (European Commission, 2013). Despite governmental, EU and NGO efforts, the number of people living without a home remains at an unacceptably high level, both for those directly affected and for society as a whole. The causes of homelessness across Europe are related to a number of structural and institutional issues (such as poverty, unemployment, job losses, affordable housing shortages, insufficient social protection and social services access, and institutional discharge procedures) and individual and interpersonal vulnerability factors (such as weak social support networks, relationship breakdown, domestic violence, mental and physical health problems, substance misuse problems, citizenship status, etc.) (Stephens *et al*, 2010). The crisis and associated austerity measures have increased the risk of marginalisation in many EU countries, thereby exposing a larger section of the European population to the possibility of homelessness. Young people face especially high risks of homelessness, as they are disproportionately affected by rising unemployment, tightening housing markets and, in some countries, radical welfare cuts.

It is in this context that Denmark is hosting a Peer Review on Homelessness, and more specifically on '*Results from the Housing First based Danish Homelessness Strategy and the Challenges of Youth Homelessness*'. The theme of the Peer Review is inspired by European-level events in 2012 and 2013. First, the Social Investment Package (SIP) stresses the need to tackle homelessness via 'comprehensive strategies based on prevention, housing-led approaches and reviewing regulations and practices on eviction'. At the same time, the related staff working document on

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'Confronting Homelessness in the European Union' underlines the need to take 'urgent concerted action' to identify the best possible measures, both for the sake of the individuals involved and for the sake of European societies. There is a particular focus on the prevention of homelessness and integrated approaches in service delivery. Second, in May 2012 the 11th 'European Meeting of People Experiencing Poverty', hosted by the Danish Presidency of the Council of the EU, focused on homelessness and housing rights in the context of the crisis, bringing together over 150 people with personal experience of poverty and homelessness from 30 European countries. Third, the Irish Round table on Homelessness on 1 March 2013 set up a framework which included five core principles of responses to homelessness, all of which the Member States agreed to support. These core principles were: (1) Housing Led; (2) Prevention; (3) Supply; (4) Services; (5) Choice.

This Peer Review hosted by Denmark aims to explore these principles on a Member State level and to identify which interventions are most effective. One solution to homelessness which has generated positive results in a number of countries both in Europe and elsewhere in the developed world is the 'Housing First' approach, upon which the National Danish Homelessness Strategy is based. The goal of Housing First is to provide a permanent housing solution for homeless people as quickly as possible, combined with flexible 'floating' social support tailored to their needs. This 'Housing First' model – first developed in 1992 by the Pathways to Housing organisation in New York for chronically homeless people with severe mental health problems (Tsemberis *et al*, 2004)– has swept across Europe at an astonishing rate (Busch-Geertsema, 2013), and the key principles have been endorsed at European level (European Commission and the Council, 2010; European Commission, 2013<sup>2</sup>). While what precisely is meant by Housing First varies, there is a recognisable underlying philosophy in a move away from an emphasis on 'transitional' or 'staircase' models of provision for homeless people, towards a 'normalising' approach focused on rapid access to mainstream rented housing or other 'permanent' solutions. Fundamentally, this approach stands in contrast to traditional 'linear' approaches which require 'treatment first' and/or moving homeless people through a series of 'stages' before they are 'housing ready'. These treatment first models have been increasingly criticised for their extremely high attrition rate and for having unintentional negative effects (by institutionalising homeless people) (Johnsen & Teixeira, 2010).

The National Danish Homelessness Strategy and its Housing First-based approach is especially interesting in this context as it is characterised by a close partnership between local and national levels of Government, with extra resources provided for targeted initiatives on condition that a range of specific housing support methods will be systematically tested and their outcomes continuously monitored (i.e. an evidence-based approach). The results of this evaluation have now been published and presented in June of this year (Rambøll & SFI, 2013).

The purpose of this paper is to provide an independent assessment of the National Danish Homelessness Strategy, with a particular focus on the challenges of youth homelessness, in order to inform the Peer Review debate. The paper also seeks to situate this policy development in the context of other relevant policy debates and developments at European level, and to identify potential areas of transferability to other Member States.

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<sup>2</sup> While I appreciate why the European Commission (2013) prefers the broader term 'Housing-led' in its policy pronouncements, in the context of this specific Peer Review 'Housing First' is more appropriate as it is this more restrictive meaning which is intended.



The remainder of the paper is structured as follows. The next section summarises recent EU-level initiatives which pertain to this topic, and identifies other relevant Peer Reviews. We then move on to describe the main features of the Danish National Homelessness Strategy, before an initial assessment is offered of the strengths and potential points of transferability in this policy. The final section suggests a series of questions to be considered as part of the Peer Review debate.

## **2. The Policy Debate at European Level**

Homelessness is now firmly established on the EU agenda. In 2008 in a Written Declaration the European Parliament asked the EU to address street homelessness as an urgent priority and to assist Member States with the development of winter plans for the homeless. In 2010, in another Written Declaration, MEPs called upon the EU to support Member States in their efforts to reduce and solve the problems of homelessness. In September 2011, the European Parliament adopted a Resolution urging Member States to make progress towards the goal of ending street homelessness by 2015 and calling for a development of an ambitious, integrated EU strategy, underpinned by national and regional strategies with the long-term aim of ending homelessness within the broader social inclusion framework. The Parliament adopted a Resolution on social housing in the EU in 2013, which also aims to improve housing outcomes for homeless people.

In the Social Protection Committee (SPC) Member States, together with the European Commission, work on homelessness-related issues through the Open Method of Coordination (OMC). The SPC chose homelessness as a priority issue in its work plan for 2009 ('homelessness light year'), and all SPC members produced national reports in which they outlined how homelessness was addressed in their country. Also in 2009, the Joint Report of the European Commission and Council on Social Protection and Social Inclusion stated that "sustained work is required to tackle homelessness as an extremely serious form of exclusion." The Network of Independent Experts on Social Inclusion were charged with analysing the "social and economic inclusion of homeless people" and "access to adequate housing" across Member States, and the resulting synthesis report put forward 15 suggestions for addressing the key barriers to making progress at both national and EU levels in the fight against homelessness and housing exclusion. In a particularly significant move, the 2010 Joint Report on Social Protection and Social Inclusion called on Member States to develop integrated policies on homelessness, and provided detailed guidance on how to do this, placing a strong emphasis on prevention, effective governance, monitoring and evaluation, and the setting of specific targets (European Commission and the Council, 2010).

In 2010 also, the Committee of the Regions of the EU adopted an Opinion on Combating Homelessness, and in 2011 the European Economic and Social Committee followed suit by adopting an Opinion on Homelessness. The June 2012 Employment, Social Policy, Health and Consumer Affairs Council called on Member States and the Commission to develop and promote adequate social schemes for homeless people in accordance with their respective competences, and taking into account the specific situation in each Member State.

Most recently, as noted above, in 2013 the SIP stresses the need to tackle homelessness, and devoted one of eight related staff working documents to 'Confronting Homelessness in the European Union', which explores current trends in homelessness in the EU, good practices by Member States and core elements of integrated homelessness strategies, highlighting the potential support role of the EU (European Commission, 2013). The Irish Presidency Roundtable Discussion on



Homelessness in March 2013 has led further urgency to the need for concerted action across Europe on this theme<sup>3</sup>.

EU Funds – such as the European Social Fund, the European Regional Development Fund or the European Agricultural Fund for Rural Development- are available to finance actions for better social integration of homeless people, including improved access to quality services and social housing. The Commission has proposed, under the next multiannual financial framework, to further increase funds to promote social inclusion and combat poverty.

There are a number of other EU-level initiatives relevant to homelessness, including a series of research reports and events, and earlier Peer Reviews. These are outlined briefly below.

## **Other relevant EU-level Initiatives**

### **1. ETHOS**

The ETHOS typology of Homelessness and Housing Exclusion has become the basis for the discussion of the definition of homelessness for policy and data collection purposes in a number of countries across Europe (Edgar & Meert, 2005; European Commission, 2013; see Appendix 1 for a summary version)<sup>4</sup>.

### **2. Study on the Measurement of Homelessness at European Union Level (2006-2007)**

This report, commissioned by DG Employment, Social Affairs and Equal Opportunities, reviewed the methods of data collection on homelessness in Europe (Edgar *et al*, 2007). The report sets out a methodology for developing a homeless monitoring information system and makes a number of recommendations to the European Commission and national governments<sup>5</sup>.

### **3. MPHASIS Project (2007–2009)**

This project, funded under PROGRESS, was entitled Mutual Progress on Homelessness through Advancing and Strengthening Information Systems. The main objective was to improve the capacity for monitoring information on homelessness and housing exclusion in 20 European countries on the basis of the recommendations of the previous EU study on the Measurement of Homelessness (see above). This was undertaken through transnational exchange and was supported by action-oriented research which directly fed into the European and national discussions on monitoring homelessness within MPHASIS<sup>6</sup>.

### **4. Study on Housing Exclusion: Welfare Policies, Housing Provision and Labour Markets (2009-2010)**

This project, also funded under PROGRESS, analysed the interaction between welfare regimes and housing systems, particularly with respect to the generation and amelioration of housing exclusion (Stephens *et al*, 2010)<sup>7</sup>. One key objective of this research was to investigate the impact of welfare regimes and housing systems

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<sup>3</sup> <http://eu2013.ie/media/eupresidency/content/documents/EU-Ministers-Homelessness-Roundtable---Information-note.pdf>

<sup>4</sup> <http://www.feantsa.org/files/freshstart/Toolkits/Ethos/Leaflet/EN.pdf>

<sup>5</sup> [http://ec.europa.eu/employment\\_social/spsi/homelessness\\_en.htm](http://ec.europa.eu/employment_social/spsi/homelessness_en.htm)

<sup>6</sup> <http://www.trp.dundee.ac.uk/research/mphasis/>

<sup>7</sup> The final report can be downloaded at <http://www.york.ac.uk/inst/chp/publications/PDF/EUExclusion/HOUSING%20EXCLUSION%2026%20May%202010.pdf>



on the scale, causes and nature of homelessness, and to review policy responses to particular groups at high risk of homelessness, including young people.

### **5. European Consensus Conference on Homelessness (2010)**

A 'European Consensus Conference on Homelessness' was organised under the Belgian Presidency in 2010. The Consensus Conference Jury called for a "...a shift from using shelters and transitional accommodation as the predominant solution to homelessness towards increasing access to permanent housing and increasing the capacity for both prevention and the provision of adequate floating support to people in housing on the basis of need. The evidence presented to the consensus conference suggests that this provides better outcomes for homeless people and people at risk of homelessness, and is more in line with their preferences." (European Consensus Conference, 2010, p. 14)<sup>8</sup>.

### **6. Housing First Europe (HFE) project (2011-2013)**

HFE was a social experimentation project, also funded under PROGRESS, from August 2011 to July 2013. HFE's aims included the evaluation of, and mutual learning between, local projects in ten European cities which provide homeless people with complex needs with immediate access to long-term, self-contained housing and intensive support. HFE involved five test sites where the approach was evaluated (Amsterdam, Budapest, Copenhagen, Glasgow and Lisbon), and facilitated the exchange of information and experiences with five additional peer sites (Dublin, Gent, Gothenburg, Helsinki and Vienna) where further Housing First projects were planned or elements of the approach were being implemented (see Busch-Geertsema, 2013)<sup>9</sup>.

### **7. Study on Mobility, Migration and Destitution (2012-2013)**

The purpose of this study, also funded under PROGRESS, was to identify and analyse the causes of destitution among migrant populations, taking into account the main characteristics of migrants and mobile EU citizens in a situation of destitution, as well as relevant aspects of socio-economic, policy and legal contexts and conditions. The focus of the study was on homelessness, which is considered to be an extreme form of poverty and destitution.

### **8. Hope in Stations (2010-2011) and Work in Stations (2012-2013) projects**

HOPE in Stations, funded under PROGRESS, aimed to strengthen the role of train companies, public authorities and NGOs in helping homeless people in European train stations. It was initiated by ANSA (the French "Agence Nouvelle de Solidarité Actives"), and involved seven countries (Belgium, France, Germany, Italy, Luxemburg, Poland, and Spain), focusing in particular on the following railway stations: Paris Nord-Est-Magenta, Brussels Central, and Roma Termini. Work in Stations continues this initiative in three countries (Belgium, Italy and France), with a focus on developing innovative cooperation models with respect to inclusion through work in train stations' economic areas.

### **9. Social Innovation to Tackle Homelessness: Re-enforcing the role of the European Structural Funds (2011)**

This conference focused on how the structural funds can enhance social innovation in the area of homelessness in EU Member States.

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<sup>8</sup> <http://ec.europa.eu/social/BlobServlet?docId=6489&langId=en>

<sup>9</sup> <http://www.socialstyrelsen.dk/housingfirsteurope>



In addition, the Commission has recently launched a call for tender in the summer of 2013 to deliver a pilot project on the right to housing/homelessness prevention in the context of evictions.

The Commission also cooperates with the OECD and Eurofound, especially on the housing-related aspects of homelessness.

Homelessness is a recurrent topic of the Annual Convention for the Platform against Poverty and Social Inclusion. This November, a workshop will be organised on "integrated strategies for re-housing homeless people" in the framework of the Convention.

### **Previous Relevant Peer Reviews**

Six previous Social Protection Committee Peer Reviews have had homelessness as a focus:

- 2004: UK- The Rough Sleeping Strategy, England;
- 2005: Denmark - Preventing and Tackling Homelessness;
- 2006: Norway - National Strategy – Pathway to a Permanent Home;
- 2009: Austria – Counting the Homeless – Improving the Basis for Planning Assistance;
- 2010 – Finland – The Finnish National Programme to Reduce Long-term Homelessness;
- 2010 - Portugal - Building a Comprehensive and Participative Strategy on Homelessness.

Of these previous Peer Reviews, the most relevant to this current review are Denmark (2005), because it represents an earlier stage in the development of policies in Denmark, and Norway (2006) and Finland (2010), because they both concern attempts to provide permanent solutions to homelessness. Some brief detail is therefore added on each of these below.

#### **1. Denmark - Preventing and Tackling Homelessness<sup>10</sup>**

In 2002 the Danish government introduced a programme called "Our Common Responsibility" targeted at the most socially marginalised people in Denmark, including homeless people, people with alcohol or drug problems, prostitutes, and people with mental disabilities. The programme focused on homeless people who were difficult to reintegrate into normal living situations, and older homeless people who required some measure of residential care but who, because of their homeless experience and behavioural issues, could not be accommodated in mainstream residential care homes. The Danish Government established special nursing homes and also, under 'skæve huse' scheme, provided an alternative form of housing for homeless people in unconventional small dwellings, and help in maintaining them, for those who wished to live independently. In this alternative housing residents could behave differently from the norm without having to confront hostile reactions from other people. The programme also offered emergency provision, such as night shelter cafés. The project was implemented by municipalities, which receive earmarked funding from the central government to pay for it.

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<sup>10</sup> <http://www.peer-review-social-inclusion.eu/peer-reviews/2005/preventing-and-tackling-homelessness>





## **2. Norway - National Strategy – Pathway to a Permanent Home<sup>11</sup>**

Backed by the Norwegian Parliament, this national strategy to prevent and tackle homelessness aimed to: prevent people from becoming homeless; contribute to adequate quality in overnight shelters; and to help ensure that homeless people received offers of permanent housing without undue delay. There were five performance targets, including an aim to reduce evictions by 30%, and an undertaking that nobody should have to seek temporary accommodation after release from prison or other institutions. The strategy was coordinated by the Ministry of Local Government and Regional Development in cooperation with other ministries, the Norwegian State Housing Bank, the county and local authorities, and the police. Local authorities, together with the voluntary sector, have the main responsibility for meeting the Strategy's goals. It was suggested that this scheme was a good example of how central and local government can work together to meet relevant goals in addressing homelessness.

## **3. Finland – The Finnish National Programme to Reduce Long-term Homelessness<sup>12</sup>**

In February 2008, the Finnish Government adopted a programme aimed at halving long-term homelessness by 2011. This was said to be based on the "Housing First" principle, which asserts that appropriate accommodation is a prerequisite for solving other social and health problems, and the programme included a goal to convert all traditional short-term shelters into supported housing units that facilitate independent living. A total of 1,250 additional homes, supported housing units or places in care were expected to be made available. The programme also included projects aimed at providing supported housing for recently released prisoners, reducing youth homelessness and preventing evictions, e.g. by providing and expanding housing advisory services. The programme was based on a partnership between central government and the country's ten largest cities affected by homelessness (see Busch-Geertsema, 2010).

### **Added Value of the Denmark (2013) Peer Review**

This new Danish Peer Review will add a great deal of value to these previous developments, as it marks an important new chapter in Danish approaches to homelessness post the 2008 Strategy, and also comes in the wake of significant developments at EU level as noted above, whereby Housing First/Led approaches are attaining an ever higher profile and official endorsement.

The positive Danish experiences with Housing First approaches discussed below seem likely to be especially relevant to other EU Member States for a number of reasons. First, EU Member States face many similar challenges regarding homelessness, particularly amongst rough sleepers and others at the most 'acute' end of the spectrum (the situation with respect to family homelessness tends to differ more between European countries, see Fitzpatrick *et al*, 2012). Second, while there is a growing consensus across Europe that Housing First approaches are preferable to traditional 'staircase' models, there is a relative lack of robust data on outcomes in most European countries. In this context, Denmark stands out as having a strong 'evidence-based' approach. Third, there are some indications (stronger so far in the US than in Europe) that the Housing First/Led approach not only provides the best outcomes for homeless people, but may also be cost-effective, thus assisting with the establishment of sustainable budgets in this field.

<sup>11</sup> <http://www.peer-review-social-inclusion.eu/peer-reviews/2006/national-strategy-to-prevent-and-tackle-homelessness>

<sup>12</sup> <http://www.peer-review-social-inclusion.eu/peer-reviews/2010/the-finnish-national-programme-to-reduce-long-term-homelessness>



### 3. The National Danish Homelessness Strategy

#### Summary of Main Features of the Danish Strategy

The National Homelessness Strategy was adopted by the Danish Parliament in 2008, and build upon earlier programmes aimed at strengthening social services for socially-marginalised groups. The programme followed the first national count of homelessness in Demark which was conducted in February 2007. This mapping exercise identified 5,290 Danish citizens who were homeless in the relevant count week, including: approximately 500 people who were sleeping rough; 2,000 people staying in homeless shelters; over 1,000 people staying temporarily with family or friends; and smaller numbers in short-term transitional housing or awaiting institutional release from prison, hospital or other facilities, without a housing solution (Benjaminsen & Christensen, 2007). The count further demonstrated that the majority of homeless people were registered in larger cities and towns in Denmark.

Four overall goals were set in the Strategy programme:

- 1) To reduce rough sleeping;
- 2) To provide solutions other than homeless shelters for homeless young people;
- 3) To reduce the time spent in shelters; and
- 4) To reduce homelessness consequent on institutional release from prison and hospitals without a housing solution.

A total budget of 500 million DKK (65 million €) was allocated to the Strategy programme over a period of four years from 2009 to 2012. Eight Danish municipalities, representing 54% of the registered homeless population, were invited to participate in the first round of the programme, including the three biggest cities in Denmark – Copenhagen, Aarhus and Odense. The largest share of the funding was allocated to these eight municipalities. In a later round of funding, nine additional municipalities – mainly medium-sized towns - were selected to participate and had 30 million DKK allocated to them.

It was possible for the participating municipalities to focus on all or just some of the four overall goals of the Strategy, depending on the local situation. However, an overarching aim of the Strategy was to develop and test internationally evidence-based interventions in a Danish setting, and the decision was taken to make Housing First its overarching principle. Therefore a core criterion for the projects to receive funding from the programme was that they were based on the Housing First principle.

It was also decided that floating support interventions employed within this Housing First-based model should follow one of three methods:

- Assertive Community Treatment (ACT): a multi-disciplinary form of floating support intended for those with the most complex support needs, such as severe addiction and/or mental health problems, which make it difficult for them to access mainstream support services. ACT teams will typically include social workers, nurses, psychiatrists and addictions counsellors.
- Individual Case Management (ICM): this method involves a 'case manager' whose function it is to provide practical and social support to clients, and to coordinate their use of existing support and treatment services, for as long as they need this assistance. ICM support is aimed at individuals with less acute support needs than those targeted by the ACT method, but who may nonetheless require assistance for an extended period of time.





- Critical Time Intervention (CTI): as with ICM, the focus here is on the provision of support via a 'case manager', but in this instance the case manager offers support for a limited time period of 9 months, viewed as the 'critical transition period' for individuals moving from shelters to independent housing. This method is aimed at people assessed as requiring only shorter-term, transitional support before being integrated with mainstream services<sup>13</sup>.

The most widespread of these methods within the Danish Strategy was ICM, established in almost all of the participating municipalities, whereas ACT provision was made available only in the two largest cities (Copenhagen and Aarhus).

Other key aspects of the Danish programme included strengthening street outreach work and implementing a method for needs assessment in homeless shelters, and some of the Strategy funding was set aside to provide additional housing units for homeless people. In total, 457 new housing or accommodation places were provided, about a third of which were in independent scattered site housing, and the remainder split across a range of congregate, institutional, transitional or alternative ('skæve huse') forms of accommodation<sup>14</sup>. Resources were also distributed to a range of other local services and initiatives.

The startup and implementation process at local level took longer than anticipated and most Strategy-funded interventions commenced at the beginning of 2010. As a consequence the programme period was extended until September 2013.

In all, over 1,000 homeless people were assisted by the floating support schemes provided under the Danish Homelessness Strategy, making it one of the few European examples of a large-scale Housing First programme.

### Assessment of the Danish Strategy

The effectiveness of the interventions used in the Danish strategy is well evidenced by the extensive monitoring that took place with regard to both the support received and outcomes achieved (Rambøll & SFI, 2013). The persuasiveness of the Danish evaluation is considerably enhanced by the complementary focus on both quantitative and qualitative methodologies. This evidence base provides firm grounds for supporting the overall efficacy of the models tested in Denmark.

First, outcomes on housing retention were very positive across all three floating support methods tested in the Danish Strategy. Fewer than 10% of individuals rehoused lost this housing during the monitoring period, a finding which is highly consistent with the 90% retention rates reported in many other (mainly smaller-scale) Housing First projects elsewhere in Europe (Busch-Geertsema, 2013). However, there was a distinction between the different methods employed in the Danish Strategy in that a larger proportion (15%) of the ICM-supported individuals were not housed at all during the monitoring period. Qualitative investigations suggested that this was partly attributable to a lack of affordable housing in relevant localities, but in some cases there also appeared to be a 'culture change' barrier with respect to difficulties in detaching local housing providers from the

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<sup>13</sup> Some may question whether it is correct to include CTI as a 'Housing First' model, as one of the core principles of Housing First is that support is made available for as long as it is needed (Busch-Geertsema, 2013). CTI clearly departs from this principle.

<sup>14</sup> In this context it should be noted that independent scattered housing can also be provided in Denmark through the municipal priority access system to public housing. However, many groups besides homeless people 'compete' for housing through this mechanism, e.g. lone parents, disabled people and vulnerable older people. Particularly in larger cities, demand outstrips supply of vacant flats for municipal referral, and in most municipalities there are extended waiting times to get assigned to a flat through this priority access mechanism.



'housing readiness' model. These findings also pointed to a potential mismatch between the level of support offered by ICT and the needs of some clients, who may have instead benefited from the more intensive support offered by ACT methods.

Second, a critical finding to emerge from the Danish programme was that independent, scattered site housing works better for most homeless people than congregate models, and that with intensive floating support even individuals with the most complex support needs are capable of living on their own in such housing. At the same time, the Danish results add to a growing body of international evidence about the 'institutionalising' tendencies of congregate housing models which concentrate relatively large numbers of vulnerable people at close quarters, often having unintended negative consequences, such as generating conflict-ridden environments and making it more difficult for residents to overcome substance misuse problems (Busch-Geertsema and Sahlin, 2007; Busch-Geertsema, 2010; Hansen-Löfstrand 2010; Pleace, 2012; Parsell *et al*, 2013). Similar points were made in the Peer Review for Finland conducted in 2010 (Busch-Geertsema, 2010), and indeed more recent Finnish evidence supports the contention that individuals living in 'Communal Housing First' model still think of themselves as homeless and living in an institution (Kettunen, 2013). Such considerations have meant that the original Pathways Housing First model in New York was based on scattered housing with off-site support, and a key principle was not to rent more than 20% of the units in any one building to Housing First clients (Tsemberis, 2010; Johnsen & Teixeira, 2010; Johnson *et al.*, 2012).

Third, the non-housing outcomes for people assisted under the Danish Homelessness Strategy - with respect to matters such as substance misuse, physical health, mental health, financial well-being, social support networks and daily functioning - are more mixed. On the majority of these items the situation of most service users remained unchanged over the monitoring period, and where there had been change, those with a more positive assessment by the end of the period more or less equalled the number with a more negative assessment. These findings are very much in keeping with the results of evaluations of Housing First elsewhere in Europe (Busch-Geertsema, 2013). The qualitative research undertaken in the Danish evaluation indicated that, while service users continued to face severe challenges in their lives associated with many years of experience of homelessness and marginalisation, they expressed great relief at finally becoming housed and emphasised that if they did not receive the floating support they would lose their housing again.

Fourth, experiences from the ACT programme implemented in Copenhagen and Aarhus has shown that this method is a particularly strong way of providing support for homeless individuals with the most complex support needs, as the method enables the provision of holistic and highly focused support. This model was only available in these two largest Danish cities, and there is some suggestion that it would have been helpful to have had it available elsewhere for some of those for whom ICM did not appear to offer intensive enough support.

Fifth, the Danish Strategy provides novel evidence of the use of Housing First with young people, as a substantial proportion (approximately one quarter) of the individuals who received housing and support were aged between 18-24 years (these young people received either CTI or ICM support, with the ACT model used almost exclusively with overt 25s). An impressive two-thirds (66%) of these young people were rehoused and sustained this housing over the monitoring period, albeit that this percentage is lower than the 89% of clients aged over 25 who sustained rehousing. But a higher proportion of under 25s (23%) were never housed during the study period despite being attached to the programme (the corresponding



figure for over 25s is only 6%), and 11% lost their housing (only 5% of the over 25s lost their's). This somewhat higher (but still small) number of under 25s that lost their housing was thought by service providers interviewed to be a consequence not only of unmet support needs, but also of difficulties in paying rent out of a relatively lower income than that available to older adults.

These are all important, and largely positive and encouraging, lessons from the Danish National Strategy on Homelessness. In terms of possible weaknesses of the Danish Strategy, the evaluation seems to imply that, ideally, ACT support should have been available in all of the participating municipalities. However, as the evidence-based approach adopted in Denmark was to test the efficacy of different models of support within the parameters of the overall Housing First paradigm, this could not have been known at the outset of the programme. Likewise, it became apparent during the course of the programme that scatter site housing worked better than congregate models, and a switch in the accommodation focus was accordingly made. It may be the case that more effort could have been made in the Danish Housing First to supplement the core model with other interventions, such as access to meaningful social activities to facilitate contact to other people and help counteract loneliness, though it is only fair to point out that the same could be said for any other Housing First programme on which evidence has been collated at European level (Busch-Geertsema, 2013).

It should always be borne in mind that the Danish programme has mainly been a large-scale social experimentation project aimed at developing evidence-based and effective methods for providing support to homeless people with complex support needs. In this sense the programme has been very successful and the results are very valuable. A paradox lies at the heart of the assessment of the Danish National Strategy on Homelessness, however. On the one hand the interventions implemented appear to be highly successful at the individual service user-level, but on the other hand the overall goal of reducing homelessness in Denmark was not met. In fact, there was a 16% increase in registered homelessness over the period 2009-2013, and a particularly strong (80%) increase in homelessness amongst 18-24 year olds, discussed further below. While there were local variations, and positive results in some areas, none of the four strategic aims of the national programme (reducing rough sleeping, reducing the need for young people to stay in a shelter, reducing the general length of shelter stays and reducing homelessness due to institutional release) were met overall. How can this be?

The evaluation suggests that a range of barriers on both micro and macro level developments explain this paradox. One key issue seems to have been a tightening in the supply of affordable housing in Denmark's two largest cities, Copenhagen and Aarhus, as a result of population growth. In Odense, in contrast, which has experienced little recent population growth, and where the municipality reports a reasonable supply of affordable housing, and well developed methods for allocating dwellings to marginalised groups, it has been possible to halve the level of homelessness over the Strategy period. Another contributory factor, given the typically complex support needs of homeless people in Denmark, may be problems with coordination between the psychiatric and addiction service systems. There were also said to be organisational and cultural challenges in implementing Housing First Challenges in some municipalities, with the 'treatment first' philosophy still widespread in addiction services, housing allocation procedures, and shelter systems in some areas. Moreover, while the Danish Homelessness Strategy was a large-scale programme, the floating support services established did not cover all of the homeless population in Denmark, with considerable scope for scaling up the ACT-programme in particular, especially in Copenhagen and in other larger municipalities.



We must also be mindful in considering this evidence that the 'counter-factual' is unknown, i.e. might the rise in homelessness in Denmark have been considerably higher without the efforts associated with the National Strategy? Certainly, the fact that the increase in homelessness since the baseline year of 2009 has been considerably lower in the municipalities that have been part of the Strategy, suggests that this may well have been the case.

As noted above, there has been a particularly sharp increase in youth homelessness in Denmark over the period of the National Strategy, hence the focus on this theme in the Peer Review. In 2009, 633 young people in Denmark aged between of 18 and 24 years old were recorded as homeless in the count week, increasing to 1,138 in 2013 (the number of homeless under 18s remains low). This increase happened both in Strategy and non-strategy municipalities and therefore represents a general trend rather than being the result of an increased focus on young homeless people in the Strategy municipalities.

Three-quarters of these young homeless people in Denmark are male, and in the larger cities a substantial proportion are first or second generation immigrants. Half of all the registered homeless youth in Denmark in 2013 were staying temporarily with family or friends, another quarter were staying in homeless shelters, and 6% were sleeping rough. The majority of these young homeless people had a substance misuse problem (58%), most commonly related to hashish consumption (50%), with 19% reporting hard drugs problems and 13% an alcohol problem. Strikingly, 51% of homeless youth in Denmark have some form of mental illness, a proportion that has increased from 35% in 2009. In all, one third (32%) of young homeless Danes are reported to have a 'dual diagnosis' (both a mental illness and substance misuse) and only 26% have neither. The Strategy evaluation points to a combination of young people with severe social problems, a shortage of affordable housing and relatively low income as key reasons why it has been a challenge to fully implement the Housing First approach for young homeless people (Rambøll & SFI, 2013).

Denmark is of course far from being alone in experiencing a rise in youth homelessness in recent years, with similar trends recorded in a range of other European countries<sup>15</sup>. As noted above, young people have been disproportionately affected by high rates of unemployment and shortages of affordable housing in many EU Member States, and in some cases are also the target of radical welfare benefits cuts. Networks of specialist services for young homeless people seem underdeveloped in a number of Member States, so that young people often end up inappropriately accommodated in adult shelters (Stephens *et al*, 2010; Fitzpatrick & Stephens, 2013). There also appear to be particular dangers of 'falling between stools' for young people in some countries as they reach 18 and move from childcare to adult support systems (Benjaminsen & Busch-Geertsema, 2009). In the UK, a sophisticated network of specialist provision for young people at risk of homelessness has been developed in most urban parts of the country, including innovative accommodation models such as foyers and supported lodgings schemes (Quilgars *et al*, 2008). Nonetheless household survey data indicates that the experience of homelessness is heavily skewed towards younger age cohorts across the UK (Fitzpatrick *et al*, forthcoming). While FEANTSA has recently expressed concern about a rise of youth homelessness in many EU Member States<sup>16</sup>, and recently organised a conference on this topic<sup>17</sup>, the last major investigation of this topic by the European Observatory on Homelessness was in 1998 (Avramov, 1998), and there is a dearth of recent evidence and data in many European countries

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<sup>15</sup> <http://www.feantsa.org/spip.php?article705&lang=en>

<sup>16</sup> <http://www.feantsa.org/spip.php?article705&lang=en>

<sup>17</sup> <http://www.feantsa.org/spip.php?article1596&lang=en>



(Quilgars, 2010), with only one significant comparative study available (Smith *et al*, 2009). This all reinforces the relevance of the special focus of this Peer Review on responses to youth homelessness in EU Member States and the sharing of good practice in this regard.

### **Transferability of the Danish Strategy and Relevance at EU Level**

The National Danish Homelessness Strategy undoubtedly provides an important example of European good practice in tackling homelessness. The relevance of the Danish Strategy to other Member States and at European level lies not only in the success of the specific interventions employed in what was a unusually large-scale Housing First programme, but also in the systematic monitoring and evaluation of outcomes which allows us to have confidence in the successes claimed.

That said, it is important to bear in mind that homelessness in Denmark is heavily concentrated amongst people with complex support needs, with the Rambøll & SFI (2013) evaluation indicating that four out of five homeless Danes have either a mental illness or a substance misuse problem, or both, and as noted above, the level of complex needs, including dual diagnosis, is also high amongst young homeless people. These findings are in line with an international comparative literature which suggests that, in countries such as Denmark with low levels of poverty and intensive welfare arrangements, there will tend to be a low overall prevalence of homelessness, but that a high proportion of these (relatively) small homeless populations will have complex personal problems, with the reverse holding true (high prevalence/lower proportion with support needs) in countries with a more difficult structural context (Stephens & Fitzpatrick, 2007; Shinn, 2007). While the available comparative research evidence is not sufficient to definitively prove or disprove this hypothesis, existing knowledge does tend to support it (Milburn *et al*, 2007; Toro, 2007; Toro *et al*, 2007).

The key transferable lessons and learning opportunities that arise from the Danish experience are therefore best considered as applicable to the most acute end of the support needs spectrum, rather than to the entire homeless population, which in some other countries may include many more people who 'only' have an economic affordability problem. With that caveat in mind, the key lessons for other European countries arising from the National Danish Homelessness Strategy appear to be as follows:

- Housing First with floating support interventions is a very effective approach to enable individuals with complex support needs to exit homelessness, with demonstrated housing retention rates of over 90%. This points to Housing First being the appropriate 'default intervention' for this group, meaning that independent, scattered site housing with intensive floating support should be tried as the first-line intervention for the rehousing of homeless people, including those with the most complex support needs.
- Other housing forms (i.e. congregate housing) should only be used for those individuals who (repeatedly) do not succeed living on their own even with intensive floating support. For this small minority of homeless individuals it is important to have other options such as high-quality supported accommodation, and in some cases radical alternative models such as the 'skæve huse' idea pioneered in Denmark may be useful.
- The holistic ACT model seemed particularly effective for those experiencing the most severe support needs in the Danish context, which suggests that its use should perhaps be considered even in other highly developed welfare systems with strong mainstream support services.





- A novel and very important lesson from the Danish programme is that Housing First-based models may be as appropriate for young people under 25 as they are for older age cohorts<sup>18</sup>, with the floating support methods of CTI and ICM appearing well-suited for giving support to the young homeless, though there may be a need for further methodological refinement to optimise their effectiveness with this younger age band.
- Achieving a culture change ('mind shift') away from treatment first/housing ready model can be a long and challenging process, requiring intensive work across a range of relevant housing, health and welfare sectors, with a continual focus on organisational development and implementation.
- It is always important to bear in mind that, while Housing First offers a combination of housing and support that facilitates very high levels of sustained exit from homelessness, many challenges still remain in the lives of people with long histories of homelessness and marginalisation, and broader interventions and support are most often needed to promote their social integration and quality of life.<sup>19</sup>

These lessons from Denmark's success in tackling homelessness amongst those with the most complex needs is highly relevant to Europe 2020's aim to lift at least 20 million people out of poverty, and in particular to the Social Investment Package (SIP) published by the European Commission in February 2013 to support Member States in achieving the national-level necessary reforms<sup>20</sup>. The SIP focuses quite heavily on homelessness, and as noted above, one of eight accompanying 'staff working documents' is dedicated to this issue (European Commission, 2013). This offers a very favourable context to take forward measures to prevent and address homelessness across Europe, particularly in those Member States where significant political weight is attached to European policy imperatives. These results from Denmark add to the growing weight of evidence that, within the Europe 2020 Strategy and homelessness-related actions taken in the context of the SIP, there should be a strong emphasis on Housing First and broader 'Housing-led' approaches, and a move away from more traditional 'staircase', congregate and 'treatment-first' approaches.

## Conclusions

The Housing First paradigm has spread rapidly from the US to a range of European countries, but most examples of Housing First in Europe are small-scale, locally-driven projects. In that context, the Danish Homelessness Strategy is a particularly valuable example of a large-scale programme (with more than 1,000 service users) which also serves to emphasise the importance of a strong political commitment to at both central and local government levels.

The Danish strategy showcases a number of successful interventions in addressing homelessness amongst those at the most acute end of the spectrum of support needs. In particular, it provides persuasive evidence of the applicability of the Housing First model in a highly developed welfare state context, and signals important practical lessons about the effectiveness of different floating support models. It also furnishes us with the first concrete evidence to inform the debate about the efficacy of the Housing First model in the youth homelessness field. At the same time, it foregrounds the growing problem of youth homelessness in many

<sup>18</sup> Though see some other discussion on this point from Canada, in a recent publication entitled *Housing First in Canada: Supporting Communities to End Homelessness* <http://www.homelesshub.ca/Library/View.aspx?id=56275>

<sup>19</sup> These conclusions are in line with the results from the Housing First Europe social experimentation project (see Busch-Geertsema, 2013).

<sup>20</sup> <http://ec.europa.eu/social/main.jsp?catId=1044&langId=en>





European countries and the need for innovative approaches in addressing this pressing issue.

#### 4. Questions to Structure the Discussion

- Can lessons from Denmark, one of the richest countries in Europe, be applied to southern and eastern European countries with much lower levels of GDP and public spending? Or to other north-western European countries with less generous and more conditional welfare systems? What are the obstacles and challenges to transferability in these cases, and how might they be overcome?
- With evidence mounting that scatter-site Housing First models are the most effective means to tackle homelessness amongst those with the acute support needs, how can the necessary affordable housing be obtained, particularly in pressurised housing market contexts?
- Given the evidence from Denmark that both ACT and 'case manager' focused floating support approaches have a role to play in achieving the best results, how do we ensure that the appropriate range of support models is available in local areas, particularly in those places with smaller homeless populations?
- Are there 'culture change' barriers to moving over to an evidence-based Housing First model at national and local levels in EU Member States? Is there experience available on constructive means of overcoming such obstacles that other Member States can benefit from?
- Is this data from Denmark enough to convince of the applicability of Housing First to young homeless people? Is there evidence on the extension of the model to this group from elsewhere? What adaptations, if any, to the Housing First model are required to make it suitable for younger age groups?
- In a context where youth homelessness appears to be growing across many European countries, what other innovative solutions/models have already been tested in other countries with respect to both the support and accommodation needs of young people aged 18-24? Is there evidence of their effectiveness? Are there successful measures in place in other countries which prevent young people leaving the childcare system becoming homeless, and ensure early intervention with all vulnerable young people to prevent homelessness<sup>21</sup>?
- How might other countries adopt Denmark's evidence-based approach in systematically testing out different approaches to tackling acute social problems like homelessness? How can we improve the European evidence base on cost-effectiveness?

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<sup>21</sup> See also the more detailed set of questions posed in Host Country Paper - Denmark (p.19/20).



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### Appendix 1: ETHOS – Summary of European Typology on Homelessness and Housing Exclusion

ROOFLESS	1	People living rough
	2	People staying in a night shelter
HOUSELESS	3	People in accommodation for the homeless
	4	People in women's shelter
	5	People in accommodation for immigrants
	6	People due to be released from institutions
	7	People receiving support (due to homelessness)
INSECURE	8	People living in insecure accommodation
	9	People living under threat of eviction
	10	People living under threat of violence
INADEQUATE	11	People living in temporary / non-standard structures
	12	People living in unfit housing
	13	People living in extreme overcrowding

Source: Edgar *et al*, 2007

