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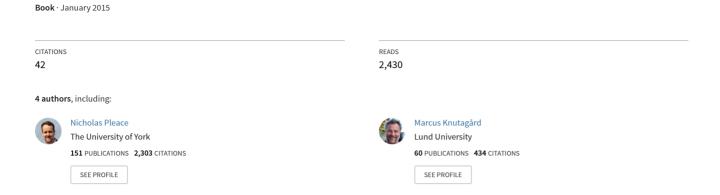
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The Finnish Homelesness Strategy: An International Review

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The Finnish Homelessness Strategy

An International Review

**Nicholas Pleace, Dennis Culhane, Riitta Granfelt
and Marcus Knutagård**

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Ympäristöministeriö
Miljöministeriet
Ministry of the Environment

FOREWORD

At the end of this year, PAAVO, the large investment and cooperation project for the eradication of long-term homelessness, which has lasted eight years and involved the state, key cities, financers (ARA, RAY) and the third sector, will come to an end.

According to the Finnish proverb, "Paavo has done his job, it is time for Paavo to go". This report seeks the answer to the question of how the PAAVO programme has succeeded; how has the work been done? As sometimes happens, it has not been possible to achieve the main goal, but largely due to the programme, both homelessness in general as well as long-term homelessness are decreasing throughout the country. At the same time, a structural and professional process of change arising from the Housing First principle has been started; it offers a completely new and fresh point of view on renewing our service system, too, into something more comprehensive and preventative.

During the programme (PAAVO I 2008–2011 and PAAVO II 2012–2015), approximately 2,500 new dwellings have been constructed and acquired for the homeless, and approximately 350 new professionals in housing social work have been hired to work on homelessness. Shelters have been replaced by modern housing units, the quality and safety of housing have improved, and the prerequisites for social rehabilitation related to housing have improved. By investing in prevention, and in housing guidance in particular, it has been possible to prevent approximately 200 inhabitants per year from becoming homeless. Most importantly, long-term homelessness has decreased by approximately 1,200 persons from 2008 to 2014, and homelessness continues to decrease.

What are the results achieved based on? There are undoubtedly several background factors at play, but key issues include the commitment of the parties with power and resources with regard to dealing with homelessness and a reasonable mutual understanding of the methods used to achieve results. This does not refer to any sort of general commitment; it refers to real people and organisations taking responsibility in the right place at the right time. Decisive moments of commitment and shared will for the Finnish programme include the long-term plan by Prime Minister Matti Vanhanen's Government that has lasted past the government term, and ensuring its annual investment and operating funding.

Based on this, it was possible to draw up effective letters of intent with the cities that were key with regard to homelessness, in which the construction projects, plots, investments and their funding and the necessary support personnel could be specified in detail. This was the first time that the state also participated in funding support personnel related to national projects among homeless persons.

Committed cooperation and the decrease in the numbers of the homeless created an atmosphere of positive change in many cities, which is a phenomenon that reinforces itself. People started to discuss homelessness in a new way, as a challenge and an issue that can be influenced, as well as actions that are not only humanely right, but also financially cost-effective for the city.

With the review of the programme as a whole, an international, impartial perspective on evaluating of the programme's success was sought, such as making the change in the realised service structure visible. On the other hand, there was a desire to use the review to highlight new, cost-effective forms of work and cooperation models, which can be used in planning work on homelessness in the future.

Three internationally recognised researchers were selected to carry out the review from countries where innovative, new solutions can be found and which have a strong tradition in work on homelessness. The Chair of the group of researchers is Nicholas Pleace from the University of York in the United Kingdom. In addition to the review itself, he has led the work of the group of researchers and has also been responsible for finishing the report. Dennis Culhane from the University of Pennsylvania, USA, is an American researcher, who has acted as an advisor to President Obama, among other things. Marcus Knutagård from Lund University, Sweden, knows the Swedish work on homelessness well and has also followed the implementation of work on homelessness in Finland. The Finnish member of the group of researchers, Riitta Granfelt from the University of Tampere, works within a project funded by the Academy of Finland, which studies the application of the Housing First principle in remedying long-term homelessness in Finland. Riitta's primary task has been to support the international experts in analysing the Finnish service system. In addition to this, Riitta has been responsible for the practical coordination of implementing the study and participated actively in the practical review work.

In their review, the researchers state that the main goal of the programme, the permanent reduction of long-term homelessness at a national level, has been reached with the help of a carefully planned, comprehensive cooperation strategy. Based on the information collected by the European Federation of National Organisations Working with the Homeless (FEANTSA), homelessness has increased in all of the other European countries where statistics on homelessness are compiled. In Finland, both homelessness and long-term homelessness continued to decrease in 2014. It is undeniable that comprehensive work to eradicate homelessness produces results. However, our goal of eradicating long-term homelessness has still not been reached. In 2014, there were approximately 7,100 homeless people, of whom nearly 2,500 were long-term homeless.

The review also highlights the weak points of the Finnish service system and provides recommendations for the further development of the work on homelessness. The most central challenge for eradicating homelessness is significantly improving the availability of affordable rental housing in the Helsinki metropolitan area in particular. The development of support services that ensure the success of living must also continue systematically, with increasing investment in prevention. Preparations for starting a new national homelessness strategy have started. The goal is to make housing social work an even more closely connected part of preventing social exclusion and the policy of social empowerment. Homelessness is a multi-faceted problem, and a new kind of multidisciplinary, open-minded work is needed to solve it. No party alone can solve the problem of homelessness. However, remedying homelessness is humanely justified and financially cost-effective.

Finally, we wish to warmly thank everyone who participated in the review process. Without your efforts, carrying out the review would not have been possible. Together, we must ensure that our ambitious goal of eradicating long-term homelessness will become reality.

The study has been jointly financed by the Housing Finance and Development Centre of Finland (ARA) and the Ministry of the Environment. The Ministry of the Environment has published a web publication on the study.

Helsinki, 10 February 2015
Peter Fredriksson and Jari Karppinen

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BA. MA. Nicholas Pleace has been working in the field of homelessness research since the early 1990s. As part of the Centre for Housing Policy at the University of York, he has directed evidence reviews, policy research and evaluations of homelessness services and programmes for the UK Department of Communities of Local Government, Department for Work and Pensions, Department of Health and the Scottish and Welsh governments. He has worked extensively with the UK charitable sector, including directing multiple research projects for the homeless charities Centrepoint, Crisis and Shelter and the Joseph Rowntree Foundation. Nicholas joined the core research team of the European Observatory of Homelessness (EOH), which operates under the auspices of FEANTSA, in 2010. With other members of the EOH research team, Nicholas has co-authored a series of pan European studies focused on homelessness. He is also a member of the Editorial Committee for the European Journal of Homelessness. Other recent international research includes projects for OECD, the French Government and the Simon Communities of Ireland.

Dr. Dennis Culhane's primary areas of research are homelessness, assisted housing policy, and policy analysis research methods. His current work includes studies of the dynamics of homelessness among families and adults, and the impact of homelessness on the utilization of health, education and social services. He is the Director of Research for the National Center on Homelessness among Veterans at the United States Department of Veteran's Affairs.

PhD Riitta Granfelt has a long career in Finnish homelessness research history, especially social work practice research related to housing services for people living at the margins. She currently works as a senior researcher in the project "Long-term Homelessness and Finnish Adaptation of the 'Housing First' Model", Academy of Finland, School of Social Sciences and Humanities at the University of Tampere.

Dr. Marcus Knutagård is a researcher and senior lecturer at the School of Social Work, Lund University. He is a member of the Nordic Network of Homelessness Research and a member of an on-going COST-action "Social services, welfare state and places". He is currently working on a research project, implementing Housing First in Sweden. Another resent research project is The Moral Geography of Social Work Practice. He has also studied category formation in the field of Homelessness.

CONTENTS

Tiivistelmä

Arvioinnin kohteena oli vuosien 2008–2011 ja 2012–2015 aikana toteutettu pitkäaikaisasunnottomuuden vähentämisohjelmakokonaisuus, Paavo I ja Paavo II. Arvioinnissa keskityttiin ohjelmakokonaisuuteen ja sen eri osa-alueisiin näkökulmana asunto ensin -mallin toteuttaminen suomalaisessa yhteiskunnassa. Arviointiraportissa on kuvattu Iso-Britannian, Ruotsin ja USA:n asunnottomuustyötä keskittyen erityisesti toimintakäytäntöihin, joita voidaan mahdollisesti hyödyntää suomalaisessa asunnottomuustyössä. Arviointi perustuu arviointiryhmää varten koottuun tausta-aineistoon sekä kahteen kenttävierailuun Helsingissä (28.–30.4. ja 15.–18.9.2014). Tämän lisäksi tutkijat ovat hyödyntäneet kukin oman maansa asunnottomuuteen liittyviä aineistoja sekä kansainvälistä asunnottomuustutkimusta.

Arviointiraportissa keskitytään seuraaviin asunnottomuustyön osa-alueisiin: strateginen suunnittelu, asuntomarkkinat, ennalta ehkäisy, liikkuva tuki/kevyen tuen mallit, asunto ensin -periaate ja kohderyhmittäiset erityistarpeet. Temaattisten lukujen pohjaksi raportin alussa on lyhyesti esitelty ohjelmakokonaisuutta, sen toteuttajia ja tavoitteita sekä nostettu esiin saavutettuja tuloksia ja ajankohtaisia haasteita. Johtopäätösluvussa temaattisten lukujen sisällöt on tiivistetty suosituksiksi ohjelmakauden jälkeistä jatkotyöskentelyä varten. Johtopäätökset jakaantuvat kolmeen pääjaksoon: asuntomarkkinat ja strategiat, asumissosiaalinen työ ennalta ehkäisevässä ja vahvan tuen merkityksessä sekä tutkimustarpeet, erityisesti vaikuttavuuden arviointi.

Yleisarviona todetaan, että ohjelman päätavoite, pitkäaikaisasunnottomuuden pysyvä väheneminen kansallisella tasolla, on saavutettu huolellisesti suunnitellun ja kattavan yhteistyöstrategian avulla. Asunto ensin -periaatteen mukainen ohjelmatyö on osoitus siitä, että myös kaikkein vaikeimmassa asemassa oleville pitkäaikaisasunnottomille pystytään turvaamaan pysyvä asuminen riittävän ja oikein kohdennetun tuen avulla. Valtion, kuntien ja järjestöjen ohjelmaan kohdentama merkittävä taloudellinen panostus sekä valtakunnallisen ja paikallisen yhteistyön pitkäjänteisyys ja laaja-alaisuus on mahdollistanut asumisen ja palvelujen kehittämisen integroinnin niin yleisellä tasolla kuin eri kohderyhmien tarpeet huomioon ottaen.

Ohjelmatoiminnan onnistuneisuudesta huolimatta on syytä muistaa, että asunnottomuuden väheneminen tai lisääntyminen on sidoksissa paitsi asunnottomuuspolitiikkaan myös muihin yhteiskuntapolitiikassa tapahtuviin muutoksiin ja kehityskulkuihin. Lisäksi asunnottomuus on alati muuttuva ilmiö, mistä ajankohtaisena haasteena voi mainita maahanmuuttajataustaisten asunnottomien määrän huomattavan kasvun. Asunnottomuustyö, niin asuntojen tarjonnan kuin asumiseen ja asunnottomuuden ennalta ehkäisyyn kohdentuvan tuen osalta, on jatkuvaa kehittämistä vaativa yhteiskuntapolitiikan osa-alue.

Seuraavaksi esitellään, pieneltä osalta, arviointiraportin keskeistä tematiikkaa.

Asuntomarkkinat

Vuokra-asuntotarjonnan riittämättömyys murentaa pohjaa asunnottomuustyön kaikilta muilta osa-alueilta. Tämän vuoksi asuntoloiden muunto-ohjelma on ollut merkittävä osa PAAVO -kokonaisuutta. Vaikeimmassa asemassa oleville asunnottomille kyettiin sitä kautta saamaan nopeasti vuokra-asuntoja. Arvioinnissa kiinnitettiin

myös huomiota Y-Säätiön suureen merkitykseen asunnottomille asuntoja tarjoavana vuokranantajana sekä asunnottomuustyön toimijoiden tuloksekkaan verkostoitumisen toteuttajana erityisesti Paavo II -ohjelman aikana. Näin on edesautettu niiden asunnottomien henkilöiden asunnon saantia, joiden asumishistoriassa on häätöjä ja vuokravelkoja.

Iso-Britanniassa toimii sosiaalisia yrityksiä (local lettings agencies), jotka hankkivat asunnottomille asuntoja yksityisiltä vuokra-asuntomarkkinoilta. Nämä sosiaaliset yritykset tarjoavat yksityisille vuokranantajille apua kaikissa mahdollisissa vuokrasuhteeseen liittyvissä ongelmissa ja takaavat vuokranmaksun. Tällä tavoin on saatu parannetuksi yksin elävien, runsaasti tukea tarvitsevien asunnottomien asemaa yksityisillä vuokra-asuntomarkkinoilla. Yhdysvalloista ja Iso-Britanniasta löytyy esimerkkejä siitä, kuinka intensiivisen tuen ja vuokratakuun avulla on saatu runsaasti tukea tarvitsevia asunnottomia sijoitetuksi yksityissektorin vuokra-asuntomarkkinoille. Ruotsissa järjestö Jagvillhabostad.nu on etsinyt yhdessä nuorten kanssa innovatiivisia, nopeita ratkaisuja nuorten asunnottomuuteen.

Ennalta ehkäisy

Iso-Britanniassa, Ruotsissa ja Yhdysvalloissa asunnottomuustyön painopiste on häätöjen ennalta ehkäisyssä ja asunnottomuusriskissä elävien tai äskettäin asunnottomiksi joutuneiden yksilöiden ja perheiden mahdollisimman pikaisessa asuttamisessa.

Suomessa asumisneuvonta on osoittautunut tehokkaaksi toimintamuodoksi häätöjen ennalta ehkäisyssä. Taloudellinen neuvonta, velkojen selvittely ja nopeasti kohdennettu apu täydennettynä psykososiaalisella palveluohjauksella, on ennalta ehkäisevän asunnottomuustyön muoto, jota tulee olla saatavilla valtakunnallisesti ja myös yksityisillä vuokra-asuntomarkkinoilla. Asunnottomien tukeminen asunnon haussa, ennalta ehkäisevän tuen joustava kiinnittäminen asumiseen, nopea riskitilanteisiin puuttuminen ja pitkäaikaisasunnottomuuden riskiryhmien, kuten päihdeongelmaisten nuorten ja syrjäytymisvaarassa olevien maahanmuuttajataustaisten henkilöiden varhainen tunnistaminen, ovat tärkeitä keinoja pitkäaikaisasunnottomuuden ennalta ehkäisyssä. Suomessa on nuorten lähtökohdista kehitettyjä asumispolkuja ja asumisneuvontaa. Asunto ensin -mallin mukaisen tuen ja asumisen edelleen kehittäminen nimenomaisesti nuorten lähtökohdista on tärkeää ennalta ehkäisevää asunnottomuustyötä. Riskiryhmien tunnistamisessa etsivällä työllä ja matalan kynnyksen palveluilla on suuri merkitys.

Asuminen ja tuki

Suomen asunto ensin -mallin sovellutukset eivät ole kovin uskollisia yhdysvaltalaiselle alkuperäismallille. Tärkeintä suomalaisessa asunnottomuuspolitiikassa on ollut uskollisuus asunto ensin -filosofian tärkeimmille periaatteille, jotka ovat asumisen pysyvyys, haittojen vähentämisen periaate ja asukkaiden oikeus valintoihin suhteessa tukipalveluihin. Yksinkertaisia olettamuksia asumismuotojen (yhteisöllinen asuminen vai hajasijoitettu) vaikutuksista niin sosiaaliseen integraatioon kuin päihdekäyttöön ja mielenterveyden ongelmiin kannattaa välttää. Haja-asuttaminen ei välttämättä edesauta sosiaalista integraatiota, eikä yhteisöasuminen ei ole itsestään selvästi integraatiota vaikeuttava asumismuoto. On syytä säilyttää realismi suhteessa siihen, missä määrin asunto ensin -malli ja ylipäänsä asumispalvelut voivat edesauttaa pitkäaikaisasunnottomien sosiaalista integraatiota ja toipumista. Pitkäaikaisasunnottomuus ja siitä toipuminen on monella tavoin sidoksissa muihin yhteiskunnan palveluihin ja toimintoihin.

Yhteisöllinen asuminen voi olla erityisen toimiva vaihtoehto esimerkiksi runsaasti tukea tarvitseville iäkkäämmille miehille ja henkilöille, joille yhteisöllisyys luo turvallisuuden kokemusta. Asumisyksiköitä voidaan jatkossa hyödyntää liikkuvan tuen keskuksina, jotka tarjoavat tukea itsenäisempään asumiseen siirtyville ja myös suoraan haja-asuttamiseen sijoittuneille. Asumisyksiköistä saatujen kokemusten pohjalta on mahdollista kehittää erilaisia yhteisöllisyyttä hyödyntäviä haja-asuttamisen malleja. Erityisesti nuorille, myös paljon tukea tarvitseville, tulee kehittää hajasijoitetun asumisen malleja. Haja-asuttamiseen perustuvien asumispalvelujen suunnittelussa ja toteutuksessa tulee erityisesti kiinnittää huomiota tuen joustavaan saatavilla oloon ja psykososiaalisen erityisosaamisen kiinnittämiseen osaksi asumissosiaalista työtä. Vaikka asunto ensin -mallin tehokkuus asunnottomuuden vähentämisessä on osoitettu kansainvälisesti ja myös Suomessa, on tärkeää, että saatavilla on myös päihteettömiä asumispalveluita. Asunto ensin -malli ei ole ratkaisu kaikkien paljon tukea tarvitsevien asunnottomien asumiseen. Onkin tärkeää lisätä tietoisuutta siitä, miksi asunto ensin -malli ei toiminut pienen vähemmistön kohdalla.

Kaikissa arviointiin osallistuneissa maissa on saatu hyviä tuloksia vertaistuen käytöstä ennalta ehkäisevässä, kuntouttavassa ja sosiaalista integraatiota tukevassa merkityksessä. Arviointiryhmä pitää tärkeänä, että Suomessa jatketaan kokemusasiantuntijoiden osaamisen integrointia osaksi asunnottomuustyötä sen kaikilla tasoilla. Suomeen on rakentunut ainutlaatuinen kokonaisuus yhteisöllisistä asunto ensin -periaatetta toteuttavista asumisvaihtoehdoista. Suunnitelmallinen tiedon keruu ja vaikutusten arviointi tämän asumismuodon vahvuuksista, rajoituksista ja kehittämismahdollisuuksista on ajankohtaista, myös hajasijoittamiseen perustuvien asumispalvelujen kehittämisen kannalta.

Arviointiryhmän näkemyksen mukaan Suomen pitkäaikaisasunnottomuuden vähentämisohjelma on yksi maailman parhaimmista esimerkeistä, mitä tulee asunto ensin -mallin toimivuuteen pitkäaikaisasunnottomuuden vähentämiseen kohdentuvassa työssä.

Summary

The review covered the whole of the programme to reduce long-term homelessness implemented during 2008–2011 and 2012–2015, Paavo I and Paavo II. The review focused on the programme as a whole as well as its different aspects from the point of view of implementing the Housing First model in Finnish society. The review report described work on homelessness done in the United Kingdom, Sweden and the USA, focusing particularly on operating practices that could be used in work on homelessness in Finland. The review is based on the background materials collected for the evaluation team as well as two field visits in Helsinki (28–30 April and 15–18 September 2014). In addition to this, the researchers have each utilised materials related to homelessness in their own country as well as international research on homelessness.

The review report focuses on the following aspects of work on homelessness: strategic planning, the real estate market, prevention, mobile support/light support models, the Housing First principle as well as special needs by target group. As a basis for the thematic chapters, the programme as a whole has been briefly introduced at the start of the report along with its implementers and goals, and the results reached and the topical challenges have been highlighted. In the chapter on the conclusions, the content of the thematic chapters has been condensed into recommendations for further work after the programme period. The conclusions can be divided into three main sections: property markets and strategies, housing social work in the sense of preventive and strong support as well as research needs, the assessment of effectiveness in particular.

As an overall assessment, it can be stated that the main goal of the programme, the permanent reduction of long-term homelessness on a national level, has been reached with the help of a carefully planned, comprehensive cooperation strategy. Programme work in accordance with the Housing First principle is proof of the fact that with sufficient and correctly allocated support, permanent housing can be guaranteed even for the long-term homeless in the most difficult position. The significant financial investment allocated to the programme by municipalities, organisations and the state as well as the extensive, long-term national and local cooperation have made it possible to integrate the development of housing and services both on a general level and also by taking the needs of different target groups into account.

However, despite the success of the programme's activities, it should not be forgotten that any increase or decrease in homelessness is tied not only to homelessness policy, but also to other changes and developments in social policy. In addition to this, homelessness is a constantly changing phenomenon; one topical challenge that could be mentioned is the significant increase in homeless people with an immigrant background. Work on homelessness is a field of social policy that requires constant development, concerning both the supply of housing as well as the support focused on preventing homelessness.

The following introduces, in a condensed way, the central themes of the review report.

Property market

The insufficient supply of rental housing erodes the foundations of all of the other fields of work on homelessness. As a result, the programme for converting shelters into housing units has been a significant part of the PAAVO programme as a whole. It made it possible to acquire rental housing quickly for the homeless in the most difficult positions. The review also paid attention to the great importance of the Y-Foundation as a lessor providing housing for the homeless and as an implementer of successful networking by the actors in work on homelessness, particularly during the Paavo II programme. In these ways, the acquisition of housing by the homeless with evictions and arrears of rent in their housing history has been promoted.

In the United Kingdom, there are local lettings agencies that acquire housing for the homeless from the private rental housing market. These social enterprises offer private lessors help in all kinds of issues related to tenancy and guarantee that the rent will be paid. This has made it possible to improve the position of the homeless that live alone and require a lot of help in the private rental housing market. There are examples in the United States and the United Kingdom of how it has been possible to place large numbers of homeless people in need of support in the rental housing market in the private sector with the help of intensive support and rent deposits. Together with young people, the Swedish organisation Jagvillhabostad.nu has sought quick, innovative solutions to homelessness among young people.

Prevention

In the United Kingdom, Sweden and the United States, the focus of the work on homelessness is on preventing evictions and providing housing as quickly as possible for individuals and families that are at risk of homelessness or who have recently become homeless.

In Finland, housing guidance has proved to be an effective way to prevent evictions. Financial advice, debt settlement and rapidly allocated assistance, supplemented with psychosocial case management, are forms of preventative work on homelessness that must be available nationally as well as in the private rental housing market. Important methods in preventing long-term homelessness include supporting the homeless in finding housing, connecting preventative support to housing flexibly, addressing risky situations quickly and early identification of the groups at risk of long-term homelessness, such as young people with substance abuse issues as well as people with an immigrant background at risk of social exclusion. In Finland, there are housing paths and housing guidance developed from the starting points of young people. Developing support and housing in accordance with the Housing First model specifically from the starting points of young people is an important form of preventative work on homelessness. In identifying groups at risk, investigative work and services with a low threshold are very important.

Housing and support

The Finnish applications of the Housing First model are not particularly faithful to the original American model. The most important issue in the Finnish homelessness policy has been loyalty to the most important principles of the Housing First philosophy, which are permanence of housing, the principle of harm reduction and the right of the customers to make choices with regard to support services. Simple assumptions on the effects of forms of housing (communal housing or scattered housing) on

both social integration as well as the use of intoxicants and mental health problems should be avoided. Scattered housing does not necessarily promote social integration, and as a form of housing, communal housing does not obviously make integration more difficult. One should remain realistic with regard to how much the Housing First model and housing services in general can promote the social integration and recovery of the long-term homeless. Long-term homelessness and recovery from it are linked in many ways to the other services and functions of society.

Communal housing can be a particularly good option for people such as older men that need a lot of support as well as persons who experience safety in communality. In the future, housing units can be utilised as centres of mobile support that offer support for people moving on to more independent housing as well as those who have been placed directly into scattered housing. Based on the experiences gained from the housing units, it is possible to develop different kinds of models of scattered housing that take advantage of communality. Models of scattered housing should be developed for young people in particular, as well as those who need a lot of support. In the planning and implementation of housing services based on scattered housing, particular attention should be paid to ensuring the flexible availability of support as well as making psychosocial expertise a part of housing social work. Even though the effectiveness of the Housing First model in reducing homelessness has been demonstrated both internationally and in Finland, it is important to ensure that abstinent housing services are also available. The Housing First model is not a solution for the housing of all of the homeless that need a lot of support. In fact, it is important to increase awareness of the reasons why the Housing First model did not work for a small minority.

In all of the countries that participated in the review, the use of peer support in prevention, rehabilitation and supporting social integration have produced good results. The evaluation team considers it important that the integration of experts by experience as a part of the work on homelessness at all of its levels will continue in Finland. A unique combination of communal housing options realising the Housing First principle has been created in Finland. Systematic impact assessment and collection of information regarding the strengths, limitations and development possibilities of this form of housing is topical, which can also be said for the development of housing services based on scattered housing.

In the view of the evaluation team, the Finnish programme to reduce long-term homelessness is one of the best examples in the world with regard to the functionality of the Housing First model in work to reduce long-term homelessness.

1 Introduction

This brief introductory chapter describes the international review of the Finnish homelessness strategy that was undertaken during the course of 2014. The first section describes the review process and the second section describes the structure of this report, which details the results.

About the Review

The international review of the Finnish homelessness strategy was undertaken by Dr Riitta Granfelt of the University of Tampere, Professor Dennis P. Culhane based at the University of Pennsylvania (USA), Dr Marcus Knutagård of Lund University (Sweden) and Nicholas Pleace, Senior Research Fellow at the University of York (United Kingdom). The review team undertook two sets of visits to Finland in the Spring and Autumn of 2014, these visits encompassed site visits to an array of homelessness services, including Housing First services and specialist support for various groups of homeless people, such as former offenders and young people who have experienced homelessness. In addition, the review team also conducted a wide range of interviews, discussion groups and focus groups with service providers, representatives of municipalities and national-level policy makers. In all, over 100 people spent time talking to the review team as part of groups or in one-to-one interviews. Group interviews with people who had experience of homelessness were also undertaken in three communal Housing First services during the first of these two visits. Each group had between three and five participants. Many of the people taking part in the review could speak English, which was the common language among the review team, with a translator being provided as necessary.

In addition to undertaking the two visits, an array of documents and data were shared with the review team, including material that was specifically translated into English. This material included monitoring on the levels and extent of homelessness, outcomes for Housing First services and existing research on homelessness in Finland, including outcome monitoring for the Paavo 1 and Paavo 2 programme which form the core of the national homelessness strategy. Alongside reviewing this material, the three members of the review team from outside Finland also explored research and data from their own countries, looking for lessons and information that might be useful in Finland.

The Report

The report is divided into nine chapters. The second chapter describes homelessness in Finland, covering the challenges that have been met and the ongoing issues which future homelessness strategy will need to address. Chapter 3 looks at strategic planning and includes discussion of the relevant experiences in planning homelessness strategies in Sweden, the UK and USA. Chapter 4 examines the roles of housing markets in homelessness, including the supply of affordable, adequate housing and the experiences and practices from Sweden, the UK and USA that can be related to Finland. Chapter 5 looks at existing Finnish and international practice in homelessness prevention, while Chapter 6 looks at the use of low-intensity support services to reduce and prevent homelessness. Chapter 7 explores national and international perspectives on Housing First as a solution to long-term and repeated homelessness. Chapter 8 focuses on how best to understand and meet the needs of four specific groups of homeless people; women who are homeless, former offenders (people released from prison) who are homeless, young people who are homeless and migrant/immigrant homelessness. Finally, Chapter 9 brings together the earlier discussion to make specific recommendations for the future development of the Finnish homelessness strategy.

2   Reducing Homelessness in Finland

This chapter reviews the achievements and challenges of Finnish Homelessness Reduction programme (Paavo I and II). The text draws on materials translated for the review group and from the two sets of visits conducted for the review. The chapter begins by looking at the programme as a whole[1].

Paavo I

The programme to reduce long-term homelessness (2008–2011) was introduced following a government decision on February 14th 2008. The programme was administered by the Ministry of Environment. Programme implementation involved the Ministry of Social Affairs, Criminal Sanctions Agency, The Housing Finance and Development Centre of Finland (ARA)[2] and Finland´s Slot Machine Association (RAY). The original Paavo programme covered ten cities with the largest percentages of homeless people - Helsinki, Espoo, Vantaa, Tampere, Turku, Lahti, Jyväskylä, Oulu, Joensuu and Kuopio – all of which signed letters of intent with the State administration. Many national and local NGOs also assisted in making the strategy operational. The same tripartite approach, combining the state, municipalities and NGOs was used for the Paavo II homelessness reduction programme 2012–2015 (Paavo II).

Approximately €21 million in subsidies were granted for housing construction during 2012–2013 with a further €13.6 million being granted for developing and delivering services, a total of €34.6 million. The cities participating in implementing the programme also provided significant investment.

The core aim of Paavo 1 was to tackle long-term homelessness and to improve prevention of homelessness. The target was to halve long-term homelessness by year 2011 by creating sustainable and permanent solutions. The programme was designed to deliver at least 1,250 new dwellings and supported housing places for long-term homeless people in the 10 participating cities. A key target was to cease using shared shelters and to replace them with housing units with permanent tenancies. Preventive measures, such as housing advice and the national project on supported youth housing were also included in the Paavo 1 programme.

Conversion of homelessness shelters to Housing First units is perhaps the most important achievement of Paavo I. This change enabled long-term homelessness to be halved, with the most vulnerable people in the homeless population gaining permanent housing and tailored support. An intensive development of professional practices following harm reduction and communality principles was pursued in these new, communal, Housing First services, giving rise to an innovative Finnish model of Housing First.

[1] For more detailed information: *http://www.housingfirst.fi/files/3426/Final_report_PAAVO_I_2008-2011.pdf*
[2] *http://www.housingfirst.fi/files/3461/The_ARA_s_report_Homelessness_in_Finland_2013_(14_2_2014).pdf*

Paavo I reduced long-term homelessness by 28% between 2008 and 2011. By the end of 2011, a total of 1,519 dwellings and supportive housing units had been completed in the 10 cities that signed the letter of intent. The conversion of shelters into Housing First housing units was crucial at the efforts to reduce long-term homelessness.

Helsinki City

In the autumn of 2013, the City of Helsinki had 2,086 supported apartments. In addition, 905 supported apartments were sublet from the Y-Foundation. Most of the apartments are individual apartments within normal housing in which ordinary citizens also lived. City housing services provide apartments for the homeless and people who are at risk of becoming homeless. Over a thousand additional housing units and independent flats are provided by organizations. In accordance with the Finnish National programme to Reduce Homelessness, the City of Helsinki offers 50 homes each year from the city's rental housing stock for people in supported housing. Some of the residents who have severe mental health and substance misuse issues may never be able to live independently, and not everyone wants to move out from supported housing that offers an open-ended lease/permanent tenancy. However, according to estimates of the Social Services, there are approximately 300 residents living in supported housing, who could move to normal housing, if such housing was provided. [3]

The biggest challenge to reduce long-term homelessness is a significant increase in rental housing production in the metropolitan area by searching for new opportunities in addition to the municipal rental foundations, the Y-Foundation [4] and NAL[5] (National Youth Homelessness Organisation). This means both more efficient use of the existing rental housing stock and methods of general housing policy that ensure the sufficient supply of rental housing. In connection with efforts to enlarge housing advice activities in the private housing market, there are promising openings to begin co-operation with the private sector. Shortage of rental housing leads to an inappropriate use of the scattered supported housing when the residents who are rehabilitated enough cannot move to normal housing. As a result of this, there are probably also residents in the intensively supported communal housing who could cope with more independent living with light support.

Large communal units and scattered site housing[6] in the metropolitan area enable a large number of formerly long-term homeless people to be housed with permanent tenancy. Housing units are strongly supported housing services, with those following the Housing First principle being mainly located in the metropolitan area. After some difficulties during the early stages, the larger communal Housing First services

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[3] *http://www.hel.fi/static/public/hela/Kaupunginvaltuusto/Suomi/Esitys/2014/Kanslia_2014-05-21_Kvsto_9_El/440173D4-64DF-47E8-ADA9-44774FC331BB/Liite.pdf*

[4] *http://www.ysaatio.fi/in-english/*

[5] *https://www.nal.fi/en/front+page/*

[6] HF-housing units (CHF) in metropolitan area The Blue Ribbon Foundation: one HF-housing unit in Vantaa; two HF-units in Helsinki: Ruusulankatu is a specialised housing unit for young adults with serious drug abuse and mental health problems; both housing units located in Helsinki have low threshold daycentre activities for the homeless. In addition, the outreach –project "Viimeinen Mohikaani" ("Last of the Mohicans") focuses on the most marginalised homeless people, like rough sleepers, and the homeless in general who have remained without services. For them, there are two crisis flats where they can wash themselves, have a rest and receive help from workers in sorting out everyday matters (e.g. everyday life skills, managing social affairs, dealing with agencies like social services and job centres).
The Blue Ribbon Foundation is also responsible for scattered site support housing in the metropolitan area (28 flats): the residents are referred by social services and the goal is to rehabilitate the residents for independent housing (e.g. social rental housing or the Y-Foundation).
The Salvation Army: two HF-units in Helsinki specialised in low threshold work activities; one HF-unit in Espoo, where half of the residents have an immigrant background.
The Helsinki Deaconess Institute: in Helsinki the Aurora house, a housing unit for female homeless people, housing unit for elderly alcoholics; in Espoo one HF- housing unit

have become more settled living environments, and it has been possible, with a few exceptions, to secure permanent housing with round the clock support for people with severe substance abuse and mental health problems.

Housing units implement community-based ways of working which aim to strengthen the social integration of the residents, with regard to both their personal lives, their interpersonal relationships in the housing unit and their relationship with wider society. The residents are not required to reduce substance misuse and do not need to commit to rehabilitation. Housing units with support, do however, seek to create a climate that supports recovery and resists institutionalization and the domination of a substance misuse centred lifestyle. Some of the residents may be linked to the drug subculture and are forced to engage in drug trafficking. This complicates the lives of those residents, who want to break away from intoxicants, and in addition, it makes it difficult to create a climate of trust in the community.

Moves to supported scattered housing for long-term homeless people have shown some promising results. The most effective model appears to be using drug and alcohol services employing a harm reduction framework in combination with supported housing. Housing has, however, succeeded even for individuals who have a permanent ban on rental housing of the municipality and housing provided by social services due to the destruction of their homes and the harassment of neighbours.

So far, the main unresolved challenge is the prevention of the repetitive homelessness of people with substance abuse and mental health problems who are violent. This group of people are among the few who have been evicted from communal Housing First services. Badly marginalized young people living in a spiral of acute substance abuse have mainly received permanent housing from communal Housing First, primarily from the Ruusulankatu Housing Unit,[7] which is aimed primarily at young adults. Still, a housing unit is not the best option for young homeless people, at least permanently. One of the challenges of the homelessness work is to gain the trust of young people who refuse the services and to support them in their transition from the housing units to more independent living.

The Helsinki Deaconess Institute is a pioneer in organizing housing services for women. The organization has accumulated a great deal of experience about women in communal living where each resident has her own apartment in the housing unit. In addition, for nearly 20 years the organization has developed low-threshold day centre activities for women. The current challenge is to develop gender-specific housing services and support for the young and early middle-age women using drugs. Housing First offers the possibility of permanent housing for women directly after their release from prison and who are substance abusers and do not take part in rehabilitation. Organizing their housing has previously been almost impossible, and still is in many municipalities[8].

The current challenge is the development of housing units as centres of housing social work[9], from where sufficiently intensive transition paths can be built to scattered housing and from where flexibly available and multi-sector mobile support to scattered housing is offered[10].

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[7] http://www.sna.fi/
[8] https://www.hdl.fi/en/, Granfelt 2013
[9] http://www.housingfirst.fi/files/3372/Housing_Social_Work_Experiences_from_the_Women_s_Community_Riit-taGranfelt.pdf
[10] http://pelastusarmeija.fi/toiminta/helsinki/helsingin-asumispalveluyksikot/alppikadun-asumispalveluyksikkoe/

Paavo II programme

The objectives of the Paavo II programme have been recorded as follows:
- Elimination of long-term homelessness by 2015
- Reduction of the risk of long-term homelessness by making the use of social housing rental stock more efficient
- Creation of more effective measures for preventing homelessness[11]

Immigration and internal migration, as well as shortage of social housing especially lack of small flats and high housing prices in the metropolitan area, particularly in Helsinki, may be contributing to ongoing homelessness. Progress in reducing long term homelessness has still be made, the number of long-term homeless people decreased by 102 in 2014, compared to the previous year, falling to 2,443[12]. Even in Helsinki long-term homelessness was decreased by 195, from 1,415 to 1,220.

During the Paavo II programme (2012–2015) there has been more focus on developing scattered housing alternatives with floating support and preventative services. A number of scattered housing projects with a strong social integration dimension have been launched. In particular, services for young people, housing advice as well as co-operation with social and health care services have been developed. The participation of experts by experience has been strengthened at all levels. Housing units have continued to develop communal professional practices and environmental work in order to overcome the negative attitudes towards the homeless and enable settlement in scattered housing.

Prevention and floating support have been the main themes of the Paavo II programme. In the following sections these aspects will be discussed shortly and more in details in the 5 (Prevention) and 6 (Low intensity support).

Housing advice services

Housing advice work is of central importance in preventing homelessness in Finland. In 2012–2013, in Helsinki there were over 16,000 housing advice clients, and 280 evictions cancelled thanks to housing advice work. During years 2001–2008 housing advice services decreased evictions by 32% in Helsinki[13] and can also provide psycho-social support. Housing advice is provided by both social housing companies and social services. Housing advice has proven to be cost effective form of low intensity support and it has significantly helped to influence the reduction of evictions[14].

There is scope to expand Housing Advice into nationwide service and it make advice available to the residents living in the private rented sector. The knowledge about housing advice work with the residents of migrant background could also be utilized in the training of the housing social work professionals and in co-operation networks. Housing advice services might also be used to reduce homelessness among young people and women, which is largely so-called invisible homelessness, i.e. living with relatives and friends.[15]

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[11] *http://www.housingfirst.fi/files/3480/Intermediate_report_2012_2013_Paavo_2.pdf*
[12] As at 15.11.2014.
[13] *http://www.housingfirst.fi/files/3494/Housing_Advice_in_Helsinki_040314_A._Kinni.pdf*
[14] *http://www.housingfirst.fi/files/3494/Housing_Advice_in_Helsinki_040314_A._Kinni.pdf*
[15] *http://www.julkari.fi/bitstream/handle/10024/116222/kuussaari.pdf?sequence=2*

Floating support (mobile support)

Outreach work is one of the preventive activities developed by the organizations and cities taking part in the implementation of the programme. One of the most successful outreach project, called Vamos is run by Helsinki Deaconess Institute.[16]

If homelessness is understood as a holistic phenomenon having deep connections with recovery and desistance processes, preventing homelessness is part of the fight against social exclusion. In practice, this means strengthening housing skills, the co-ordination of a social support network and arranging housing before release from prison or psychiatric hospital. For example, when preventing the homelessness of people with severe mental health problems; the residents will, if needed, immediately be admitted for interim treatment at a hospital and after getting out they will receive appropriate support from a familiar support team at his/her home. Securing the housing during longer periods in institutions, for example, during prison sentences, requires the development of multi-sectorial co-operation as well as the continuation of support over interruptions, such as hospital care, substance abuse rehabilitation and imprisonment.[17]

During the Paavo II programme, in particular, a number of mobile support projects have been developed. Floating support given to someone in their own home is a long tradition in social services and drug rehabilitation services. These services tend to follow a low-intensity approach.

Contemporary purchase contracts may sometimes complicate the building and maintenance of the client centred relationships in support services. Recovery is not often linear, but includes relapses, crises, and bad times. Gradual reduction in support is not therefore always justified, but may indeed jeopardise the housing. Connecting housing social work to employment and training services that promote social integration, the correct level of psycho-social services and self-help groups still appears to require further development[18].

Low intensity services can work well for those ex-offenders, people with severe mental health problems and people with problematic drug use. In contrast, deeply marginalized long-term homeless people often need intensive support. The content and delivery of this support should be systematically developed without forgetting the know-how of the peer support organizations. Floating support should be developed in such a way that receiving it is not tied to fixed-term purchase contracts.

Low intensity services are available to varying degrees and exist in different forms in different parts of the country. In Finland, such services are often offered by Social Services and by a large number of third sector organizations. There is some evidence that there should be an effort to clarify the concept of low intensity services and the ways in which these services are delivered, as well as to evaluate the limits of the housing social work, to understand what these services can achieve and what forms of support are most effective.

The field of housing providers is diverse; functioning with different principles and applying the Housing First model to varying degrees. The core task of some of the third sector organizations working with potentially and formerly homeless people

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[16] *https://www.hdl.fi/images/stories/liitteet/HDL_Raportti_VAMOS.pdf, https://www.hdl.fi/images/stories/liitteet/HDL_Vamos_etsivn_ksikirja_sahkoinen_sivut_DEF.pdf*

[17] *https://helda.helsinki.fi/bitstream/handle/10138/136174/YMra_24_2014.pdf?sequence=1*

[18] The concept of housing social work arose as part of the development of work with the homelessness in the Housing First Context. The concept describes the work where the primary objective is to reduce homelessness: housing social work is successful if housing can be secured. The result is even better if the recovery of a resident can be supported. Several professional groups, such as adult social workers and social workers in after-care of child protection, are carrying out housing social work of as part of their work. Housing social work consists of the work of housing advisors and housing counselors: this client-centred work with homeless and ex-homeless people, as well as work in networks are aimed at improving the services to homeless and to enhance their status in society.

often centres on areas other than homelessness. Low intensity support services can for example be focused on recovery from mental illness or problematic drug/alcohol use. There is some evidence that services that do not follow the Housing First principle can be effective for some potentially and formerly homeless people. There is scope to develop a better understanding of lower intensity housing support, the extent to which it relates to Housing First and harm reduction principles and the ways in which it can be effective at preventing and reducing homelessness.

Homelessness services are increasingly understood as being a necessary and permanent part of the housing policy of the state and municipalities. There is an opportunity to learn from the experiences of professionals employed in housing related social work for non-governmental organisations and municipalities, understanding good practice and replicating it. This applies to both communal models being developed in housing units and floating support implemented in scattered housing.

3 Strategic Planning

Strategic planning to address the problem of homelessness internationally has become more common as the service sector has grown more sophisticated, and as social policies in the area have become more expansive and detailed. This is equally true in Finland, where housing and homelessness policies have evolved significantly in recent years.

In some countries, such as the UK, national legislation that authorizes specific programmes, establishes eligibility and governs programme administration and rules, has emerged as the primary framework through which programmes are designed and delivered. In the US, federal grant programmes set priorities and goals, but devolve specific programme development and administration to local planning councils, and rely substantially on local public-private partnerships to fill gaps in federal funding. The Swedish experience has relied on an initial national policy strategy, with broadly defined goals, like reducing evictions and addressing at-risk populations, but it has required local authorities to implement policies and to address the needs of vulnerable populations.

The Finnish experience is a hybrid of these, but, especially in the last decade, has evolved to include a broad partnership among levels of government, and spending targets that have enabled them to substantially develop housing options and reduce homelessness. In this chapter, we examine further the varying approaches of the Finnish, US, the UK and Sweden in how they have managed the deployment of their homelessness programmes in the context of their national strategies.

The Finnish Context

Homelessness assistance policy in Finland has evolved significantly over the last several decades, as it has throughout many Western democratic countries. Public sector involvement has grown as the problem has shifted and commanded more public attention. Greater involvement by the state in the rental housing sector in Finland beginning in the 1960s helped to establish state financing and corresponding duties for municipalities, including setting priorities in the health and social sector related to unmet housing needs for people who were homeless.[1] Local municipalities, like Helsinki, assumed greater responsibility for alternatives to emergency accommodation, including supported common living in group homes and flats. The setting of national goals to abolish homelessness in the late 1980s included requirements for coordination among the housing, health and social sectors. It also included more extensive and centralized local responsibilities to develop and maintain this new housing capacity, which was enabled in part by the creation of broad partnerships among housing developers, funders, and service providers through non-profit intermediaries and NGOs such as the Y Foundation.

More recently, the Finnish efforts to abolish homelessness have continued to evolve, including a more robust housing development and acquisition strategy, a focus on "housing first" principles over shelters, the functional separation of housing and services, and the fuller integration of the new supported housing units within community development plans. The renewed Finnish efforts continue to emphasize a balance of roles and responsibilities among the varying levels of government and their partners in the non-profit sector. State financing of housing, health and social services, strengthened by constitutional guarantees and rights, continues to provide the backbone of support for the overall initiative. Local governments continue to play the key intermediary role, providing for local/regional planning for land use, site development (where necessary), and the provision of social housing. The NGOs play a key role in providing support services to tenants, and developing/acquiring housing in the private rental sector.

The success of these efforts can be measured by the steep reduction in homelessness since 1985, when nearly 10,000 people were homeless in institutions, outside, in shelters or hostels, as compared to 2012, when fewer than 2,000 people were homeless in such conditions.[2] Given the success of these state/local/NGO partnerships, other countries have much to learn from the Finnish experience. From a strategic planning perspective, this success could not have been possible without a coordinated approach among the different sectors, each playing their respective roles; it also required a commitment of budgeted resources and real, achievable targets for housing development and acquisition. Moreover, the Finnish efforts to show cost-offsets associated with housing development, as indicated in Fredriksson's presentation,[3] have provided compelling evidence of the "value for money" of this work, beyond its humanitarian and constitutional purposes, and future data collection could help make such cost accounting and performance measurement a more regular asset to the policy and strategic planning process. These are clear strengths to emerge from the Finnish experience.

Going forward, the fuller achievement of the goal of ending homelessness may require a more balanced approach to include prevention strategies, in addition to housing acquisition, a focus on special populations, such as youth, and more diverse and flexible approaches to the provision of support services (these issues are addressed in other chapters of this report). It might also include building further the data infrastructure for measuring and evaluating progress. And, while the US may provide some exemplars for data collection and tracking, as will be discussed below, it is not a substitute for the actual commitment of resources and partnerships to get the job done, as Finland has.

Strategic Planning in the USA

The US approach to homelessness has evolved in many ways that are similar to that in Finland, but also quite distinct. "Skid Row" homelessness, in which post-War single adults, mostly male, resided in private and cheaply rented single room occupancy accommodations (SROs), was replaced by new forms of homelessness in the 1980s.[4] When homelessness re-emerged in the 1980s, the marginal SRO housing stock had largely disappeared through conversion and demolition, so the new homelessness was addressed by private shelter charities, and the sleeping accommodations were principally open dormitories, if they were available at all. The presence of youth and young adults, and families with children, also reflected a significant shift in the composition of the population, beyond the older, more disabled population of Skid Row.[5]

Public authorities were reluctantly drawn into a response to the issue, as advocates decried the newly visible public destitution that accompanied the resurgent homelessness, and its limited forms of shelter. But unlike in Finland, the initial federal response through the McKinney Act (1987) did not aim to "end" homelessness as a primary policy objective. Instead, it sought to reform the systems of response, primarily through the funding of a broad range of supportive health and social services (largely uncoordinated) in shelters, especially a new form of service-enriched shelter called transitional housing. A further federal reform in 1993, changed the way that federal funding was dispensed, channelling funds through local "Continuums of Care," or coordinated networks of providers. This new system required a local planning process including an analysis of "gaps" in the continuum of services that would be ostensibly filled by proposed local project priorities. By regulation, these local Continuums were required to be dominated by private non-profit providers, and not by local government officials, which meant that a service provider philosophy and approach would predominate, including a continued emphasis on enhanced services rather than housing solutions. In this important way, these initial federal approaches to address contemporary homelessness in the US were quite different than those that emerged in Finland (or the UK as will be discussed later). Federal leadership was effectively abdicated to more parochial-minded local non-profit councils who had a self-interest in growing the system of emergency accommodations and the services provided therein.

A critical shift in US policy started to emerge around 2000, and resulted from national advocates' use of research and data to make the case for a change in the direction of federal policy.[6] Research from both surveys and local shelter system databases began to show that homelessness was more common and widespread than had previously been thought.[7] One-night counts provided a limited, cross-sectional view, but the new *longitudinal* data sources showed that homelessness affected as much as 1% of the population annually in large US cities, 4-6% of the poverty population, and as much as 15% of poor single adults with substance use disorders.[8] The research further showed that a relatively small proportion of the population that experienced homelessness was homeless on a long-term or continuous basis ("chronically homeless"), about 10-15%, whereas the vast majority of the population (80-85%) experienced "crisis" homelessness on a short-term or temporary basis.[9] This distinction proved critical insofar as it identified two very different segments of the population for which very different approaches seemed indicated.

The initial advocacy that derived from this research focused on the "chronically homeless" single adult subpopulation, which used approximately 50% of the shelter beds on any given night. These open-dormitory shelter facilities were designed as emergency accommodations but were effectively being used as a primitive form of permanent housing for half of their residents. As in the Finnish recognition about this time, federal and local government leaders understood that this form of housing was inappropriate as a long-term arrangement. Alternatively, evaluation research on the effectiveness of "permanent supported housing" programmes (PSH) also started to amass at this time, showing that as many as 85% of people placed in such housing retained that housing for up to two years later, with high rates of tenant satisfaction.[10] This included housing that targeted even the most "hard to house" who often refused treatment programmes, but were instead offered housing with harm reduction or use-tolerant approaches, such as the Pathways to Housing programme in New York City, and other such "housing first" models. Furthermore, as has been documented in Finland, most people placed in this housing were found to reduce their use of emergency, detoxification, and inpatient health services, as well as shelters and jails, such that for many residents, the cost avoidance offset the costs of the new housing and related services.[11] This convergence of evidence – that relatively few of the homeless

population (10-15%) accounted for half of the bed usage, that housing them in conventional rental units (usually efficiency apartments) could be done so successfully (85% retention), including people with behavioural issues previously thought nearly impossible to house, and that it could be done so cost-effectively – created momentum for a significant change in federal policy.

Starting in 2000, the US Congress required that one-third of the federal housing funds for homelessness programmes had to be set aside for permanent housing interventions, rather than emergency shelter or supportive services in shelters. In his 2003 budget, President Bush went further to state that it was the goal of his administration to "end chronic homelessness."[12] Federal funding for homelessness increased approximately $500 million annually, or nearly 35% during the ensuing five years. The local Continuums of Care planning councils were directed to prioritize permanent supported housing (PSH) targeting people who were chronically homeless for any *new* funding (committed funding could largely continue unchanged). As a result, the inventory of PSH for single adults more than doubled by 2009, and communities began reporting declines in chronic homelessness for the first time.[13]

Concurrently, beginning in 2003, the federal government, through the US Interagency Council on Homelessness, also began to urge local communities to develop "ten year plans to end (chronic) homelessness."[14] These plans (which were nonbinding and not required for federal funds) were largely directed by local governments, including mayors and county government leaders, as an intentional way of engaging public sector agencies in health, human services, and housing in the effort to address chronic homelessness. This stimulation of a more active leadership role by local government was hoped to displace the dominance of the service provider industry in setting local priorities through the Continuums of Care. However, the plans were quite uneven in their depth and sophistication, and they did not always have detailed and attainable funding targets. More importantly, they did not command a set of predictable future resources that they could rely upon from the federal government, where funding allocations for the PSH initiatives were discretionary and could rise, fall or go flat in any future budget year. The lack of entitlements to housing, health and social services for many of the single adults who experience homelessness meant that "ten year plans" had few guaranteed resources to fund their ambitions, at least for substantial segments of the chronically homeless population.

Also concurrent with this shift in federal policy was a requirement that communities implement "homelessness services management information systems" or HMIS, as a way of tracking the use of homelessness programmes, including eventually the newly funded supportive housing units.[15] Given their recent experience, federal officials understood the political importance of data for guiding the new spending, for targeting the resources to the chronically homeless, and for determining effectiveness. In perhaps a rare victory in the field of policy analysis, data and research were placed at the centre of the initiative, including the new "ten year plans." Indeed, as many as 50 of the ten year plans included "cost studies" of chronic homelessness, to demonstrate to local audiences that known individuals in their communities were using significant public resources, including hospitals, shelter and jails, and that without PSH they were going to remain homeless and continue with those costs.[16] Some communities even included studies of the cost offsets for people placed in PSH programmes (pre-post studies), which were used to provide further evidence for a need to shift the local approach toward PSH and away from shelters. The requirement for HMIS was hoped to establish an institutionalized source of data by which communities were going to do better targeting, planning and evaluation.

The federal chronic homelessness initiatives under the Bush administration, and continuing under the Obama administration, have continued to show progress, but limitations have also emerged. Progress has slowed, as federal spending on the prima-

ry McKinney-funded homelessness programmes has effectively been flat for the last five years. The discretionary nature of federal homelessness spending in this tough budget climate has meant that local communities have had to re-engineer existing funds or find alternative sources of funding if they are to increase the supply of PSH and continue progress on chronic homelessness. Moreover, given that localities have ultimate discretion on how federal dollars are spent (within some guidelines), means that vested interests which benefit from the historic pattern of funding for shelters and related emergency services can be expected to resist the reallocation of their funding, in many cases. Additionally, the effectiveness of the *targeting* of PSH to people who are chronically homeless has also been an issue, as concerns have been raised that persons who are not eligible (or "lesser eligible") for the housing and perhaps are easier to house are being served in preference to those who are more challenging to serve. (The lack of an entitlement or rights-based approach in the US often leads to such "lesser eligibility" conflicts in US policy.) Finally, while HMIS was intended to be a strong complement to the planning and implementation of local plans to end chronic homelessness, implementation of these information systems took more time than expected, and data collection is often viewed as much as a burden as a benefit by providers. Only in a handful of communities has HMIS data been rigorously employed to establish targets, and drive on-going monitoring and evaluation of the chronic homelessness initiatives.

The other major shifts that occurred in US homelessness policy developed in 2009, as the global economic crisis deepened and the Obama administration assumed leadership. Perhaps the biggest innovation was the mass piloting of the "Homelessness Prevention and Rapid Rehousing programme" (HPRP), which was authorized by the federal economic stimulus law in 2009 with $1.5 billion over three years.[17]

The target of this funding was the "crisis homelessness" (short term homelessness) that besets families, and most of the non-chronically homeless single adults. Once again, local communities had broad discretion as to how they would spend this funding, in terms of the relative balance for families versus singles, and for prevention versus rapid rehousing activities. The federal government did set income eligibility requirements and eligible activities, but in the end, communities chose primarily to serve *families* much more than singles, and to spend the resources mostly on *prevention* rather than rapid rehousing. Regardless of how this emergency spending might have been done differently today, the most important net effect was that it introduced a whole new service and programme philosophy into local homelessness service systems – bringing a "housing first" or "housing led" strategy to the problem of crisis homelessness for the first time. The reauthorization of the McKinney Act later in 2009 institutionalized this new approach in federal law, and now local Continuums are under pressure by the federal government to shift federal funding away from transitional shelters and shelter-based services, and into rapid rehousing.[18] A new programme was also created under the law that provides up to $250 million annually for rapid rehousing, mostly targeted to families. It is hard to overstate the importance of this shift, as the move away from shelters and to housing stabilization solutions has represented a sea-change in the field, and brought forth a whole new set of housing advice services (and new ways of thinking), which while more common in Finland, Sweden and the UK, was rare in the US prior to 2009. Indeed, much of the thinking behind the design of these programmes benefited from the lessons learned in Europe, especially in the UK.[19]

The current US policy approaches to homelessness, represented by the PSH solution for people who experience *chronic* homelessness, and the prevention and rapid rehousing approach for people who experience *crisis* homelessness, is perhaps best reflected in the Obama administration's signature effort to end homelessness among veterans. Since 2008, the US Congress and administration have allocated 70,000 per-

manent housing vouchers to PSH programmes targeting veterans who are chronically homeless. Veterans, most of whom are entitled to health services, can access the subsidies through Veterans Administration medical centres – the only national health system in the US – along with the case management services.

The Obama administration and Congress also created a new programme four years ago that creates a community-based homelessness prevention and rapid rehousing programme for veterans experiencing crisis homelessness (or who are at risk of homelessness), called Supportive Services to Veterans and their Families (SSVF). The programme is currently funded at $300 million annually, and serves approximately 100,000 veteran households through local non-profit organizations (many formerly HPRP contractors). Evaluations report that 85% of the people served do not return to homelessness up to 2 years after exit.[20] As a result of these two initiatives, veteran homelessness overall has decline 35% between 2009 and 2014. Moreover, with these two initiatives federal policy in the US has clearly endorsed the dual segmentation of the population suggested by research (chronic and crisis homelessness), and the two evidence-based, housing-led approaches to target them (PSH and prevention/rapid rehousing).

The US experience, in contrast to that in Finland, UK and Sweden, reflects some substantial limitations inherent to its policy environment. In the much stronger social welfare systems in Europe, national government leadership is much more obligated to providing funding for housing and services due to entitlements, in some cases rights guaranteed by the constitution. Thus, national funding can be counted upon, even if implemented and customized through local government, in partnership with non-profit providers who specialize in their concern and work with these special populations. In contrast, the US federal government provides funding on a contingent, discretionary basis, and is only one piece of the total funding picture for homelessness programmes. Therefore, the federal government's power is primarily to goad and urge local governments on a direction in policy, but ultimately it has had to fund legally eligible programmes, particularly those with long histories of local support, regardless of their merits. Moreover, the decision early on to give majority authority for deciding how to spend federal homelessness funds to councils dominated by local non-profit service providers has meant that local governments have often been on the side-lines, and homelessness programmes have not been integrated with mainstream policy in health, housing and social services -- quite the opposite from Finland and, to a lesser extent, the UK. "Ten year plans" to end chronic homelessness, and new efforts on homelessness prevention and rapid rehousing have begun to reverse that pattern, as these initiatives have required more local government engagement, but progress has been uneven, as federal funding has waxed and waned, and as localities have had varying levels of real commitment to change. Thus, all of these positive efforts in the US have to be understood against the backdrop of comparatively weak-to-nonexistent federal entitlements for housing and services for most poor adults (in contrast to veterans), and a devolved system to local and non-profit sectors for responsibility and authority -- circumstances that greatly constrain progress.

As a final note, HMIS data which track homelessness programme participants continue to improve and to provide valuable evidence on what works and for whom. Indeed, in the more mature systems, the data are being used on a regular and even daily basis to guide homelessness prevention and rapid rehousing efforts, as well as efforts to end chronic homelessness. Some of the lessons learned in the US may provide guidance for Finnish reformers. First and perhaps most obviously, access to client level data across the homelessness service system has provided immediate and timely access to case management information for case planning and coordination. Second, it has provided quick access to data which describes utilization of the *system* of shelter, prevention and housing programmes, enabling local communities to have

"dashboards" that monitor system dynamics, both as a whole and at a provider level. Of course, such aggregate data has enabled communities to conduct basic research on trends in homelessness, overall progress in achieving goals, and information on housing market sectors that are contributing to the problem. Third, the linkage of the HMIS data with other mainstream social welfare system databases, known as *Integrated Data Systems* (IDS),[21] has enabled some communities to have a far more sophisticated source of information for assessing institutional sources of homelessness, and corresponding institutional impacts. For example, ready access to child welfare and correctional system data has enabled communities to monitor how many young adults are becoming homeless after they "age out" of foster care, or how many adults become homeless following discharge from prison. Such information can drive prevention interventions, and be used on a regular basis to monitor the performance of those prevention efforts. Similarly, the targeting of chronic homelessness resources can be improved by identifying people who are heavy users of acute care systems more quickly, and following the impact of housing placement on their subsequent use of such services. Moreover, these data linkage efforts also enable communities to perform predictive analytics that can improve targeting of programmes prospectively, minimizing "moral hazard" problems. Overall, these sophisticated data "mashups" are creating a new frontier in the use of "big data" in housing, health and human services (with necessary data security and confidentiality safeguards), and bode watching by Finnish reformers who may see opportunities in this work for Finnish practice.

Strategic Planning in the UK

Strategic planning in the UK has been heavily influenced by homelessness laws first introduced in 1977.[22] The laws arose because of evidence of lone women parents and couples with children experiencing homelessness[23] and lone adult homelessness associated with high support needs, including severe mental illness.[24] The consequences of homelessness had become unacceptable. Families could be separated, including the children being removed from parents and placed into social services care, because while the children were protected by statutory systems, their parents were not.[25] Lone adults with very high support needs were long-term residents of very basic emergency shelters for homeless people.[26]

   The new law placed responsibilities on local authorities to house certain groups of homeless people. Homeless people who had – or were about to have – one or more dependent children or who were "vulnerable," who were not "intentionally" homeless, i.e. homeless through deliberate action or inaction, and who, in most cases, had a local connection to the area, could get priority access to social housing. Individual and households in this group were defined as *statutorily homeless*. A local authority that did not fulfil the duty to house a statutorily homeless household, or which unfairly or inaccurately assessed the needs of a statutorily homeless household, could be taken to court.[27]

   The homelessness law included socially progressive elements, including pioneering protection for women whose homelessness was caused by gender-based/domestic violence, waiving requirements for a local connection to the authority from which they sought assistance. Alongside this, there was protection for people who were "vulnerable" because of mental health problems, disability, ill-health or other reasons, such as being a young person with support needs. Homelessness itself was also defined in quite broad terms, focusing on whether someone had access to housing they could reasonably be expected to occupy, which meant severely overcrowded,

unfit and highly insecure housing, alongside an absence of housing, was defined as 'homelessness.'

By providing priority access to social housing, homelessness laws could be read as supporting the idea that homelessness arose because housing and labour markets and social protection systems failed, as the law sought to stop homelessness by the British State directly providing rapid access to suitable, secure and affordable housing. However, the law was also designed to stop people from "gaming" the system to get undeserved access to housing, including anyone whose homelessness was primarily a result of a failure to take personal responsibility.[28]

Alterations in laws in the 1980s reduced local authority duties to only providing temporary accommodation to statutorily homeless people, but this had little impact on how the law worked in practice. However, a succession of policies that significantly constricted the supply of secure, affordable and adequate housing in the UK were to have an important impact on the role of homelessness laws.

The criteria for determining vulnerability, intentionality and local connection were quite broadly defined in the homelessness laws and associated guidance, leaving considerable scope for local authorities to exercise discretion. As social housing supply constricted in the UK, through privatisation and an end to investment levels that allowed large numbers of social rented homes to be built, it became apparent that strict and also unreasonable interpretations of homelessness law were being employed to manage the demand for help[29].

Homeless people with support needs were being assessed not being vulnerable and therefore as not statutorily homeless by local authorities. Local connection and intentionality rules could also block access to the statutory system for homeless people. Lone adults and couples without children who had low support needs were outside the homeless populations the legislation was designed to help. There is longstanding and widespread evidence that there is a population of lone adult homeless people, including people with high support needs, who cannot access statutory homelessness systems[30]. This population is referred to as *non-statutorily homeless* people and sometimes as *single homeless people*, reflecting the presence of many lone adults.

The UK has developed separate strategies to respond to the presence of adults with high support needs experiencing sustained and recurrent homelessness, in a context in which homelessness laws, theoretically designed to protect 'vulnerable' homeless adults, exist. These strategies have centred on programme designed to reduce living rough and on providing housing related support for non-statutorily homeless people. All were developed on the assumption that the needs of these groups *could not* be met through statutory homelessness systems.

The *Rough Sleepers Initiative* (RSI) programme, combined outreach services with a client-led tenancy sustainment team (TST) model and forms of supported housing[31] that closely reflected, though were not based upon, many elements of a Housing First philosophy. The RSI programme in London, other English regions and Scotland all successfully reduced street homelessness, albeit at considerable cost[32]. RSI was followed, in London, by the *No Second Night Out* programme,[33] with a continued use of innovative service models, including some Housing First pilots, being supported by the *Homelessness Transition Fund*[34] and the Greater London Authority.[35] Other innovations include using Social Impact Bond (SIB) funding approaches, which pay a dividend to investors in successful services that reduce levels of rough sleeping in London.[36]

The welfare system and capital investment programme were also adapted to allow significant spending on support services for non-statutorily homeless people with high support needs. This culminated in the *Supporting People* programme, which created dedicated central government funding and a requirement for local authorities to have a Supporting People strategy, covering housing-related mobile support

services and supported housing services that specifically designed to prevent and reduce homelessness, alongside support for other groups.[37] There was some evidence that the Supporting People programme reduced homelessness,[38] but the programme has been greatly reduced by austerity measures and has effectively disappeared in England and Scotland.[39] Cuts to Supporting People have combined with a new emphasis on localism since 2010, giving local authorities more discretion on spending. Local differences in funding levels for non-statutory homelessness services have led to growing geographical inconsistencies[40].

Constrictions in social housing supply have had other undesirable effects on the statutory homelessness system. There has been extensive and sustained use of temporary accommodation for statutorily homeless families by local authorities, particularly within London, but also in other highly pressured housing markets, at significant cost[41]. In the mid-2000s, statutorily homeless families in London were sometimes waiting in temporary accommodation for years before suitable social rented housing could be found by a local authority.[42] In the second quarter of 2014, 59,710 statutorily homeless households were in temporary accommodation in England.[43]

Attempts at liberalisation of the homelessness law to better protect homeless people with high support needs have also taken place. Extensive devolution of power to Scotland, Wales and Northern Ireland has produced growing regional variation. The definition of who should be regarded as vulnerable was widened in England and has been removed altogether in Scotland, with significant reforms also planned in Wales. However, ongoing limitations to affordable housing supply have continued to fundamentally limit the rate at which statutory systems are able to house lone adults experiencing homelessness.

As in the US, a two-tier strategy has been adopted to attempt to improve responses to homelessness. The first element has been a marked policy shift towards the use of preventative services, attempting to stop homelessness from occurring by enabling existing housing to be retained or by very rapidly re-housing a homeless household, so that there is no need to use the statutory homeless system. This preventative approach changes the role of the statutory system to being a safety net of last resort. In England, the focus on prevention has seen a marked reduction in the use of the statutory homelessness system since 2003. While levels of statutory homelessness have recently increased in England, they are in a state of long term decline from much higher levels (the most recent peak in 2003/4 was 135,430 compared to 53,770 in 2012/13). Preventative services were recorded as helping 165,200 homeless households in England in 2009/10 and 202,400 in 2012/13.[44]

Some researchers have suggested that alongside reducing homelessness, preventative services in England may have formed a barrier to the statutory system to homeless people who *should* be housed under the terms of the homelessness law.[45] At present, however, there is insufficient evidence to be clear about what exactly is happening. In Scotland, the liberalisation of the homelessness law, removing the criteria that someone has to have children or be vulnerable, has seen *falls* rather than increases in levels of statutory homelessness, again associated with steadily rising use of preventative services.[46]

The second tier of strategy to improve responses to homelessness has been to increase use of the private rented sector. The private rented sector is being used as a key resource for homelessness prevention in much of England. Homelessness law in England was amended to allow local authorities to meet their legal duty to statutorily homeless households by using the private rented sector, providing the household agreed, a change also recently adopted in Scotland. English homelessness law has more recently been amended to allow local authorities to use the private rented sector to perform the legal duty to statutorily homeless households *without* the consent of the people they are housing.[47]

Use of the private rented sector potentially changes the outcomes for an individual or family being found statutorily homeless. There are examples of good quality private rented housing, but the sector can also be characterised by high rents, low standards and, particularly, by precariousness for tenants. UK laws give only restricted rights to private rented tenants and there are few protections against eviction if a landlord wishes to evict someone. Many private rented tenancies are six or 12 month time-limited agreements that cannot be renewed without the landlord's consent.[48] Many private landlords are also reluctant to house homeless people and other low-income households,[49] restricting the effective size of the private rented markets that homeless and potentially homeless people can access and generally limiting the extent to which the private rented sector can mitigate the effects of constricting social housing supply.

The key lessons from UK experience for Finland centre on the problems of attempt to pursuing a comprehensive homelessness policy without having sufficient affordable housing supply in place, and the potentially negative effects of limiting access to housing to only some groups of homeless people. Expensive and unwanted consequences have resulted from UK policies. Statutorily homeless families are making sustained and expensive use of temporary accommodation. For homeless lone adults with high support needs, significant barriers to the statutory system have resulted in the need for separate policy responses to people sleeping rough and non-statutory homelessness, rather than a single, coordinated, homelessness strategy.

Strategic planning in Sweden

A major difference between Sweden and Finland is that Sweden lacks a national homelessness strategy. The latest national homelessness strategy was *Homelessness - Many Faces, Many People's Responsibility* during the years 2007–2009.[50] The goals of the strategy were:

- Everyone has to be guaranteed a roof over their head and be offered further coordinated action based on their individual needs.
- The number of women and men who have been admitted to or registered at a prison or treatment unit or have supported accommodation or are staying in care homes and do not have any accommodation arranged before being discharged has to decrease.
- Entry into the ordinary housing market has to be facilitated for women and men who are in housing ladders, training flats or other forms of accommodation provided by the social services or other actors.
- The number of evictions has to decrease and no children are to be evicted.[51]

The evaluation of the strategy showed that these goals were not accomplished in any greater extent.[52] One reason for this was that the funding for the different projects were spread out geographically in the country and very few applications referred to any research evidence in relation to what they intended to do. The evaluation of the strategy showed that there was a lack of outreach work directed to rough sleepers. The second goal showed some improvement in relation to former prisoners, but the demand for housing was high. The third goal was not met. Instead the so-called secondary housing market continued to grow and only 10 per cent of the households could take over their lease during a year. The last goal was not fulfilled either. During 2010 632 children were evicted. But, on the other hand a greater focus on evictions started to shape the local policies towards combating homelessness. Many municipalities introduced a "One way in" strategy. This means that one social work-

er was appointed to handle the eviction notices and establish the relationship and cooperation with the landlords. Before, the landlord had to call many different social workers before they could get hold of the responsible social worker for the specific client. During this time-gap many households faced eviction.

In January 2012 the government appointed a national homelessness coordinator. The coordinator's task was to support the municipalities in their work to combat homelessness and exclusion from the housing market. The coordinator should also inform the municipalities about best practise. The aim of this work was to support the creation of long term and sustainable structures in homelessness work on a regional and local level. A specific focus was on eviction prevention and particularly on families with children at risk of eviction. During the two years that the coordinator was appointed he visited 39 of 290 municipalities. The selected municipalities were the ones that had the highest rate of homelessness (in total the municipalities had 65 per cent of the total number of homeless people from the survey in 2011).[53] The aim of the visits was to create local action plans and homelessness strategies. The result from the evaluation of the national homelessness strategy showed that very few municipalities had a homelessness strategy and many municipalities didn´t have a structure for monitoring the extent and profile of homelessness in their municipalities.[54]

One of the key reasons why homelessness is a growing phenomenon in Sweden is the housing shortage and the increased demands from landlords to sign an own lease. Many housing companies (both private and public) do not accept social assistance as a steady income, which excludes a large share of poor households from entering the ordinary housing market.[55] Instead they are referred to the so-called secondary housing market where the social services lease the apartments from the housing companies and then sublet the apartments to their clients. Research has shown that the homeless clients tend to get "locked-up" in this system without any real possibilities to take over the lease over the apartment.[56] On the other hand the group of homeless people that are counted as homeless within the secondary housing market would not be regarded as homeless in many other European countries.[57]

In 2011 new legislation on municipal housing companies was introduced, "the Act (2010: 879) on public municipal housing companies". The new law states that public housing companies shall operate on business principles. The surplus, however, can be transferred to the municipality if the surplus is used for integration and social cohesion to prevent housing exclusion. Very few municipalities have used this new possibility of using the surplus for dealing with the needs of targeted groups.

The national homelessness coordinator recommends in his final report that Sweden should introduce a new national homelessness strategy in order to combat homelessness.[58] He also pointed out that the municipalities should introduce Housing First Services in order to reduce homelessness. It is too early to say if the introduction of Housing First will take off in any broader sense in the near future.

On a more strategic level a lot of progress has been made on preventing evictions. This has led to a reduction in the amount of evictions in Sweden on a national level. The total number of children that got evicted increased by ten per cent during 2011 and then dropped during 2012 and 2013. During 2014 the number of evictions has increased slightly. The dilemma is that the children (and households in general) that live within the secondary housing market are not counted in the eviction data set. Therefore the National Board of Health and Welfare is doing a special investigation on the eviction rates within the secondary housing market. One aspect of the secondary housing market is that the types of contracts that are given to the clients are often short-term and the tenant can be forced to move out of the apartment quickly if the tenant doesn't comply with the terms. This often leads to a need for acute temporary accommodation that is both costly and of low quality.

The focus on evictions has also led to the creation of national guidelines and government policies.[59] A lot of work has also been made on financial support and debt counselling. Having a rental debt is equal to not getting a new tenancy on the ordinary housing market.

During the past few years new groups and new challenges have emerged. New groups like old people and EU-migrants have entered the homelessness scene and groups like youth and women have increased in the past several years.[60] This has called for new solutions for specific groups, but very few models of best practice in a Swedish context exist.

Conclusions

Homelessness policy is a work-in-progress in each of the countries examined here. With the possible exception of Sweden, in the countries examined here, homelessness emerged as a national policy issue in the late 1970s and early 1980s. Attention at the national level in both Finland and the UK was partly obligatory insofar as statutory and constitutional rights require the national governments to provide the financial support for housing and services. In both cases, the funding is administered by local authorities, which often work in partnership with non-profits to improve access to more customized housing resources for these special needs populations. Increasingly, both countries have turned to the private rental sector to access units, including in Finland the establishment of private, non-profit intermediaries that acquire and manage housing for formerly homeless households.

In the US, federal resources are also administered locally, but local non-profit homeless provider organizations have a majority vote on deciding how the resources will be spent, which has historically funded increases in emergency services. An increased federal priority for housing has been urged upon local councils, and local plans to "end chronic homelessness" especially have brought in housing and housing support services partners, as well as local government. In Sweden, the absence of a federal plan is notable, although *local* plans have been encouraged by national leadership.

A national goal of making progress on evictions has been encouraged, as has work with prisoners returning to their communities and young people. But, overall, there does not seem to be much of a national plan on homelessness in Sweden. Importantly, an emerging emphasis in both the US and in the UK, as well as in Sweden's eviction programmes, is a focus on homelessness prevention, and the rapid stabilization of households at risk of homelessness or who are newly homeless. This is an area where Finland could well learn from others' experience, as research continues to support this approach, particularly as it might assist people who experience crisis or short-term homelessness. Lastly, although data collection and evaluation seems to have a secondary role in every country, the US has benefited from systematic tracking of homelessness programme utilization, and could help to provide an example of how to integrate data collection and evaluation into a continuous policy and programme improvement strategy. Indeed, much of the evolution of US policy toward more effective and evidence-based practices has resulted from the increasing use of data and research to inform their decision-making. The emergence of Integrated Data Systems, whereby homelessness programme users are matched with their data in other health, housing and human service systems, has provided a further depth of understanding – and policy and planning opportunities – to guide systems reform. Finland may well find in this work an opportunity for improving its own policy, planning and evaluation efforts, and for maximizing the impact of national and local resources on ending homelessness.

4 Housing Markets and Homelessness

The special attention to housing policies and housing markets is a key factor in the development of the next homelessness strategy in Finland (2016–2019). The previous homelessness programmes in Finland (Paavo I and II) have already gained great international attention. They have had a clear housing policy approach with a focus on "ensuring a socially and regionally stable and balanced housing market, eradicating long-term homelessness, and developing the standard of living". The homelessness programmes have had very ambitious and clear goals: halve the long-term homelessness by 2011 and eradicating long-term homelessness by 2015. An important point is that the Finnish homelessness strategies in the past have also had quantitative targets on the creation of new homes, and by that the connection between homelessness and housing policy becomes evident.

For quite some time there has been a struggle about the causes of homelessness were some have argued for individual causes of homelessness like mental illness and addiction while others have argued for structural explanations like the lack of affordable housing and job-opportunities. Today the discussion is more nuanced where the complex interplay of individual, organizational and structural factors are taken into consideration when analysing the causes of homelessness. In this chapter we will briefly touch upon the Finnish housing regime and discuss experiences and lessons that can be drawn from Sweden, the USA and the UK.

The financial crisis in 2007 has had a significant impact on many housing markets in the US, Europe and in the Nordic countries.[61] When analysing local housing markets the effects of the global financial system should be considered. Even though housing is seen as a basic human right in many countries its function as a commodity makes it dependent on the housing market.[62] Comparing different housing regimes is not an easy task. The Nordic countries are often considered to represent the same social-democratic welfare regime, but they differ quite dramatically when the different housing systems are compared. In many ways the Finnish housing system is more similar to the US than the Swedish system. At the same time many institutional practices and welfare services are quite similar in Finland and Sweden.[63] Ruonavaara and Bengtsson argues that one common feature of the housing systems in the Nordic countries is that the private rental system has not gained the same role as a solution to social needs.[64] Instead housing policy instruments have been created to hinder the private rental sector from increasing their profit. It is however very profitable even in a Swedish context to own buildings and rent them out on the market.

Housing Markets and Homelessness in Sweden

The universalistic and egalitarian aspects of the Swedish welfare state has given it an international reputation not only in regards to welfare services in general, but also in regards to housing policy. During the industrialisation it was primarily the factory owners that provided housing for their employees. In the early 1900s philanthropic housing was also developed for workers. As a way of reducing the employees' reliance on the employers a new type of housing associations were established. HSB started its first housing cooperation in 1923, but most of the housing was still provided by private companies.[65]

The housing situation in Sweden after the First World War was tough for many people with increasing rents and a lack of available housing. The municipalities were more or less forced to engage with the housing problem. This led to the construction of for example "Barnrikehus" – housing for families with many children.[66] This type of category housing soon led to the stigmatization of the families that inhabited them.

The public housing system (with municipal housing companies) in Sweden was introduced in the 1930s. One of the key ideas with the public housing system was to reduce the risk of socio-economic segregation. The housing policy that was established in the 1940s was more or less the same until the retrenchment phase that took place in the early 1990s. One of the most famous and significant housing programmes in Sweden was the Million programme. During the mid-1960s to the mid-1970s almost a million new homes were constructed[67]. The million programme, more or less eradicated homelessness. At the end of the 1970s new problems were evolving in the so-called million programme areas. Many low-income families were concentrated in these areas and also many families with an immigrant background.

In the early 1990s there were a radical shift in Swedish housing policy. Most of the institutions of the former housing policy were abolished[68]. During the 1990s there was a conversion of public rental housing into housing cooperatives – a process that have continued ever since[69]. Housing policies are used as correctives to the housing market. The government's engagement in regulations on the housing market differs greatly between countries. Sweden has been one of the most regulated housing markets, but is now considered to be one of the most unregulated housing markets in the western world.[70] This is however not a Swedish phenomenon. The homeownership ideology is a strong force that put pressure towards market solutions on housing provision and deregulation on government interventions. Finland can be described as a home-ownership society and housing have been more market oriented in the last decades. The housing regime is a dual housing system with a needs-based social market and a free-financed private market.[71] This dual system is a big difference from the Swedish corporatist-housing regime with an integrated rental market.[72]

Social housing has often been regarded as a solution for providing housing for people that cannot build their own home or buy a house on the private housing market. Social housing has been regarded as something negative in a Swedish context. This is primarily due to the selective premises of housing provision. Social housing is often needs and means tested with reduced rents. The integrated housing market in Sweden with its focus on public housing has been open for any citizen. This might be an historical fact, but during the last decades it has become more and more difficult for low-income households to enter the rental housing market – instead many are referred to the social services and the so-called secondary housing market. At the same time some of the public housing areas are now housed by poor families creating strong social polarization in the cities.[73]

Housing Markets and Homelessness in the USA

Contemporary homelessness in the US emerged in the late 1970s and early 1980s as the nation's rental housing market tipped from having an excess supply of affordable housing, to a stark deficit.[74] That deficit continued to grow into the early 1990s, as wages and incomes stagnated, and housing costs rose.[75] The gap widened significantly again as the Great Recession took hold, with about 8.5 million households in 2011 reporting to have very low income and paying more than half of their income toward rent.[76] The homelessness crisis has run unabated in parallel with this problem, and is its most visible manifestation.

At the heart of the US affordability crisis is a decline in the incomes of poor and low-income households. Government assistance in the form of cash grants for families with dependent children has lost substantial ground to inflation and periods of assistance have been curbed by the Congress.[77] Cash benefits to single adults have been slashed across the country by state legislatures, such that only a handful of states now provide any cash assistance to indigent adults at all.[78] Disabled adults without a sufficient work history are forced to live on an income that is 40 percent below the poverty level for single adults.[79] Meanwhile, minimum wage has lost ground to inflation, and is now nearly half of its value in the early 1970s.[80] Moreover the changing nature of work, including more temporary and service oriented jobs, has disadvantaged those with less educational attainment, who are often stuck in low paying sectors, with frequent bouts of underemployment and job loss, and limited access to benefits.

In light of this, the primary resource for effectively addressing chronic homelessness has been the provision of permanent rental assistance vouchers, with support services, otherwise known as permanent supported housing (PSH). However, such housing assistance is not an entitlement, and must be allocated by the Congress. Very few new vouchers have been funded in recent years, except for veterans, requiring communities to try to set aside existing "turnover" vouchers for this purpose, or to use their limited homelessness assistance grants.

A debate has existed among advocates regarding whether housing of this type should be "scattered site" or "multi-unit buildings." Some client advocates have argued for "normalized" options that are scattered and fully integrated in the community, including some have used a recent Supreme Court case prohibiting segregation of disabled people in buildings to support their argument.[81] Yet others have taken a more opportunistic view about what buildings are available, including relying on large multiunit stock in larger cities. Supporters of this work have argued that many tenants value the community dimension of shared buildings. Research has generally found that client preferences are for scattered site, but the outcome research on multi-site buildings finds them to be successful and with comparable rates of satisfaction.[82] The Obama administration's recent efforts to end veteran homelessness has focused on scattered site units, rather than building development, in part because of time – scattered units are generally available and can be leased more readily, whereas the siting and development of new buildings takes several years. Another strategy that has been used in some cities, is for service providers to master lease buildings, and to used mixed income tenancies as a means of cross-subsidizing the units of the formerly homeless with market-rate rentals in the same buildings.[83]

More recently, the US policy to address "crisis" homelessness (short-term homelessness) has also moved in a "housing first" approach. In this case, homelessness prevention and rapid rehousing models have been developed that provide case management, linkage to benefits, housing advice, and emergency or temporary rental assistance, as a way to help people get out of homelessness as quickly as possible. The assumption is that for most households such temporary assistance will be sufficient as a more stable

platform than shelter from which to increase employment and household income. Evaluations of the approach, including a large new national programme targeting veterans, have shown some success, with returns to homelessness of 10 percent for families and 15 percent for singles, one year following exit from the programme.[84] Results from that evaluation further suggest that returns to homelessness are not higher in rental markets with higher rents or lower vacancy rates.

Housing Markets and Homelessness in the UK

There has been a sustained constriction of affordable housing supply in the UK since the 1970s. This has been achieved by effectively ending levels of investment that would allow significant building of social housing and privatising much of the social housing by selling it to existing tenants. Simultaneously, policy has encouraged mass owner occupation by financial deregulation, making large mortgages far more accessible to lower income households, stimulating sustained increases in house prices.[85] In 1981, 32.5% of housing stock in Great Britain was social housing, by 2013, this had fallen to 17.9%.[86] House prices rose twice as fast as earnings between 1990 and 2008[87] and while they fell back in the recent crash, the general trend is still upward. Marked increases have also occurred in private rented sector rents, as the social rented sector constricted and owner occupation has become increasingly unaffordable, creating new demand.[88] Investment in the private rented sector has been encouraged through by-to-let schemes (mortgages designed to allow someone to buy a house and rent it out privately to pay the mortgage) and significant reductions in tenants' rights, particularly with regard to protection against eviction. New social rented housing has also become more expensive since the late 1980s, as housing associations (NGOs providing social housing) have been increasingly expected to raise funding for new development from banks, rather than receiving central government grants, requiring rent levels sufficient to pay off bank loans for new developments.[89]

Sustained investment in social housing, focusing on the development and management of social housing by local authorities, had been at the core of government policy from the late 1940s to early 1970s. Alongside a need to replace the housing destroyed during the second world war, there was also a policy desire to improve urban living conditions. Poor quality nineteenth century housing had not been replaced in many cities which had undergone expansion as the UK rapidly industrialised from the 1840s onwards. Social housing was seen as a means by which to improve the social fabric of cities, building sustainable and attractive urban environments.[90]

The shift away from social housing occurred in part because rebuilding entire neighbourhoods of cities was an extremely expensive policy to pursue. With the election of Thatcherite governments from 1979-1997, investment was also withdrawn for ideological reasons. Thatcherism saw the effective end to significant development of social housing and the mass privatisation of local authority run social housing through the 'Right to Buy' for tenants.[91]

The benefits of social housing, particularly large-scale projects designed for urban improvement, were also increasingly questioned. Social housing contained spatial concentrations of poverty, the more so once many working households left the sector by buying their homes.[92] While contentious and not clearly evidenced, the idea that social housing creates negative area effects has become very influential in the UK and Northern EU, creating a policy context in which mass social housing is seen as *generating* social problems. This has led to resistance to housing (poor) homeless people among some social landlords in the UK seeking to avoid the supposedly destructive area effects associated with spatial concentration of poverty in their housing.[93]

Using the private rented sector as an alternative to social renting has some viability, as the sector contains good quality housing at affordable rents. However, the private rented sector is also partially characterised by very high rents, a reluctance to house people claiming welfare benefits, poor standards and by marked insecurity of tenure, with private rented tenants having only restricted rights and widespread use of 6-12 month tenancies.[94] By contrast, the social rented sector generally offers better space standards, higher quality, much lower rents and lifetime tenancies.

The link between income poverty and housing poverty had been broken by the 1970s, i.e. income poverty no longer automatically meant living in poor quality housing, but is now being re-established. Many working households also find it difficult to meet the costs of rent or a mortgage, including two parent households where both adults are in paid work.[95]

A key effect of the constriction of social housing supply has been to place significant limits on the resources available to implement the homelessness laws in the UK. Separate strategies have been developed to manage some of the difficulties that the statutory system has in securing social housing supply. These range from preventative measures and increased use of private rented housing, through to entire programme, such as the *Rough Sleepers Initiative* for groups of homeless people facing significant barriers to statutory systems.[96]

UK homelessness statistics are based largely on administrative data, which makes the scale of those elements of the homeless population that do not approach or cannot access services hard to judge accurately. What data there are do not suggest that more than a small fraction of the UK population are homeless at any one point in time and that the vast majority never experience homelessness. Poor quality, inadequate and insecure housing is a major issue, affecting millions, and is closely linked to inadequate supply of adequate and affordable housing, but actual homelessness is much less widespread.[97]

One reason for comparatively low levels of homelessness in a situation of falling supply of affordable housing may be the presence of extensive social protection systems designed to assist low income households by providing a basic income and helping with housing costs. This includes assistance for working households containing children through the tax credit system as well as help for households and individuals with no earned income, including retired people.

Direct spending on social housing has greatly decreased in the last 30 years, but welfare payments designed to assist with meeting the costs of rent for poorer people have greatly *increased*, effectively shifting subsidy from building new social housing to instead helping pay the rents of poor and low income people.[98] In England, Scotland and Wales, £24.7 billion was spent on rent subsidies in 2013/14 (€31 billion at current exchange rates), equivalent to some 67% of the projected UK defence budget for 2014/15.[99] Sustained efforts to reduce these rent subsidies payments are in place. These include restricting the rights of people under 35 to the rent for a room in a shared house, if they live in the private rented sector, and reducing rent subsidies to anyone with a spare bedroom not in regular use.[100] Further, deep, cuts are anticipated, but it is too early to determine whether and to what extent these may lead to increases in homelessness.

Several attempts have been made to increase access to affordable housing in the UK that are worth briefly describing. Local lettings agencies are social enterprises that offer a housing management service to private landlords, effectively handling all aspects of dealing with the tenant and guaranteeing the rent, for a fee. Local lettings agencies are designed to directly compete against for-profit letting agents managing private rented housing on behalf of landlords. As social enterprises, local lettings agencies are self-financing, but they seek only to cover operating costs and are targeted on finding and securing suitable private rented sector housing for homeless

people and other groups who might otherwise encounter barriers, such as landlord prejudice or apprehension. This can improve access to suitable private rented housing for groups like lone adults with support needs with experience of homelessness.[101]

Other attempts to improve access to affordable housing have included the development of various Low Cost Home Ownership (LCHO) models, which essentially work by a household securing a mortgage on part of the value of their housing, for example 40% of the market value, and paying a rent for the rest. This can confer some of the advantages of home ownership, as when the home is sold, the value of whatever financial stake the (part) owner has taken would normally be expected to have increased in value, possibly giving them other options, such as buying housing on the open market. However, the affordability of LCHO to low income, working, households has been questioned.[102] There have also been attempts to subsidise the development of new social housing by housing associations (NGOs that are social landlords), either by developing mixed tenure schemes, in which the sale of full market price housing subsidises the development of social rented housing, or through building entire market price housing estates or apartment blocks, the profits from which then fund building of new social housing.

The various attempts to improve housing supply have not led to any significant improvements in access to affordable housing. Access to affordable housing remains limited and owner occupation is unaffordable for many UK households.

Key lessons for Finland centre on the UK quite possibly only being able to avoid very significant increases in homelessness, which could have been caused by sustained constrictions in affordable housing supply, by very substantial expenditure on rent subsidies for lower income households. However, constrictions in affordable housing supply have re-established a link between poor quality housing, housing insecurity and poverty, creating wider structural problems in UK society. As social protection for low-income households reduces, economic causation of homelessness may begin to increase significantly, though whether and to what extent this will happen is unclear at present.

Conclusions

At the time of writing there is a trend in many European countries towards a "housing first" approach. A discussion that is far from clear is how "housing first" relates to concepts like permanent supported housing and housing led strategies. Many actors in Sweden ask for a clarification of what Housing First really is about and if it would be more fruitful to use the concept of housing led rather than housing first due to the great variation in how Housing First- programmes are organized. Even though we still need more research in this area, we know that the Housing First- programmes work in a European and Nordic context as well. This new evidence has led to a push towards interventions that see housing as a necessary precondition for ending homelessness. In many ways this is positive, but on the other hand the lack of affordable housing (especially in the metropolitan areas), increasing rents and higher thresholds to enter the housing market truly complicates the possibility to implement a large scale housing led approach.

The lack of affordable housing is a key challenge for all the compared countries. There is no evidence that owner-occupation will be less popular in the near future. It is rather the opposite. Housing has become more and more connected to individual consumption and to creating an individual identity. This is of course problematic for the people that are left behind because of poverty. The Low Cost Home Ownership (LCHO) models from the UK could be an alternative.

The previous homelessness strategies in Finland have gained great interest in many other countries. There are many reasons for this – especially the ambitious goals of reducing and eliminating long-term homelessness, but also for the construction of new housing for homeless people. The production of new apartments is crucial, but it takes time. In the previous programmes it took less time to renovate existing housing than to build new ones. For the next programme it will be important to decide if one should try to use scattered site housing rather than multi-unit buildings. The experiences from the US show that scattered site housing is an easier alternative when it comes to the speed of allocating new housing. The challenge is to connect floating support to the spread out apartments. Multi-unit buildings have the advantage of making support-structures easier and maybe less costly, but on the other hand it can take many years to find a suitable site where it is possible to develop new buildings. When developing new sites the NIMBY-effect usually kicks in.

The experience from the UK and Sweden also show that there is a risk of the spatial concentration of poverty in social housing and public housing areas. One of the aims of the public housing system in Sweden was to build good quality housing for all. The idea was to minimise the risk of segregation. This is the challenge with radical innovations and large-scale programmes. When implementing radical innovations it is difficult to foresee what the consequences will be. The Million programme did solve a lot of housing problems in the 1960s, but it also created new problems in the 1970s. The causes of these problems did not have its roots only in the million- programme areas. The gentrification and filtering process always needs to be analysed relationally.[103] A high concentration of high-income households in one area relates to a high concentration of low-income households in another. One idea that has been put forward is that a housing chain can be created if new housing is constructed. If new housing is being built for more affluent households then their move into the new homes will create a space for other people to move in. There is little evidence that new housing for high-income households will automatically lead to available and accessible housing for low-income households.[104]

Another trend that is resurfacing in the UK and in Sweden is the link between housing poverty and income poverty. We also know that poor housing quality have great impact on people´s health. The city of Malmö recently set up a commission that had the purpose of investigating the city´s inequality in health. The commission produced reports en masse and the results were handed over to the politicians. The work of the Malmö commission could be of interest for the next homelessness programme in Finland.[105]

Finland is moving towards housing first or housing led solutions in scattered site housing rather than the congregate model that was introduced in Paavo 1. Research shows the positive aspects of a scattered site approach. On the other hand research from the US indicate the effectiveness of multi-unit buildings. So far several of the congregate units in Finland have also showed high housing retention rates. This implies that the road ahead for the next homelessness programme is not so clear as one would hope it to be.

Another key challenge for the next programme is the responsibility for the homelessness issue. In Sweden the main responsibility for homeless people is on the municipalities. In practise this means that the social services have the responsibility for a problem that they cannot solve. The production of housing is not a question for social services, but rather a question for the housing departments, an institution that Sweden demolished in the 1990s. Since then, the market is more or less trusted to correct itself. The network approach that has been used in Paavo II seems to be productive in connecting the relevant actors.[106]

Securing housing for the most vulnerable is not an easy task. The task is to get affordable scattered housing, but it is important that this is an integral part of the

housing system rather than a special provision for certain groups. What incentives are established so that a private landlord finds it attractive to rent out to a homeless person? The experiences from the local lettings agencies in the UK seem to be an interesting alternative. Looking at the development of the homelessness population in Finland, young people and people with an immigrant background are growing. This is also an important fact to take into consideration. We know from previous studies that young people in Finland tend to move out from their parental home a lot earlier than in many other European countries. Young people often stay with friends or relatives; this makes it difficult to estimate the total amount of young people that are in need of housing. Young people rarely have previous references to fall back on. In Sweden an organisation called Jagvillhabostad.nu has tried to create different forms of solutions in order to speed up the housing production for young people. Both self-building initiatives and so-called fast housing have been tested. Self-building programmes might be successful for those involved, but they take time to develop and they cannot provide housing for a large number of people.

5 Homelessness Prevention

Homelessness prevention has become an emergent and growing field of practice within the homelessness sector throughout Europe, the US and Canada. Programmes that have traditionally provided eviction prevention services have become more specialized, more professionalized, and more broadly available as an alternative or supplement to traditional forms of homelessness assistance. Efforts to connect this work to especially vulnerable populations, and to specific sectors of the housing market, are thought to be having a significant impact on the reduction of homelessness in several countries. In this chapter, we review the practice of homelessness prevention in Finland, and with some comparative perspectives from the UK, USA and Sweden. The results suggest a converging set of priorities and target populations, as well as some innovative practices from which new lessons can be learned.

Homelessness Prevention in Finland

In Finland, homelessness prevention primarily takes the form of housing social work services, with varying forms of "housing advice." Homelessness prevention is also targeted to specific subpopulations at risk, including people exiting prisons and psychiatric hospitals, as well as vulnerable youth. Different kinds of outreach and low threshold activities run by municipalities and NGOs are also available both for young people and adults in many cities and towns. Maybe the most promising result of prevention is the decreasing numbers of evictions achieved by co-operation of housing advices services, debt counsellors and municipal social workers. Moreover, housing allowances are critically important for low-income families struggling with housing costs.

Institutions (prisons and psychiatric hospitals): In Finland, preventing homelessness among people exiting institutions is part of the fight against social exclusion, which in practice means *strengthening housing skills, the co-ordination of social support networks and arranging housing before release*. The goal is to secure a permanent place to live and to provide individual support for everyone, if needed.

Progress towards achieving this goal varies between municipalities and is linked to the extent of the co-operation that the institutions have with health and social care, housing services and non-governmental organisations (NGOs). In the best case, the co-operation takes place, for example, when preventing the homelessness of people with severe mental health problems; the residents will, if needed, immediately be admitted for interim treatment at a hospital and after getting out they will receive appropriate support from a familiar support team at his/her home. A key component in the prevention of homelessness is the availability and continuity of this support, which helps to build relationships based on mutual trust.

Homelessness prevention carried out by the Criminal Sanctions Agency can be seen as part of activities focused on social integration within a gradual releasing process. Great variation in preventing the homelessness of ex-offenders also exists between municipalities in the field of criminal sanctions. These variations are due to different working cultures in the prisons and differences in the level of co-operation between authorities.

Preventive work with young people: Young people who are at high risk are those with a child protection background, those who moved away from home as very young persons, and young people of immigrant origin. In some municipalities, training courses on housing are available for young people. These courses focus on the obligations of the resident and the basics of maintaining one's housing. The courses are intended for young people who have either lost their homes or are moving to the first apartment of their own. Many municipalities also do outreach work with the young and one aim is to prevent homelessness or the prolonging of the homelessness of young people.

Good results have been achieved when working with young people when the same worker works intensively with a young person and gathers an appropriate support network to help him/her. An example is in Vamos with a project run by Helsinki Deaconess Institute. For young people, the prevention of homelessness is regarded as part of the social empowerment approach, which may include, for example, supporting enrolment in education, strengthening mental health, and the management of substance abuse. For young people living alone, it may be scary and too demanding even with support. Housing options have been developed for young people where the sense of community and privacy are combined: a private apartment and a community with other young residents, similar to the Foyer programme in the UK and elsewhere. A major agency working on the prevention of homelessness among the young is the National Youth Housing Organisation. It offers rental housing for young people, housing advice developed from the starting point of their clients, and, where appropriate, intensive housing support.

In Finland housing advice is the most important form of work to prevent homelessness. It has proven to be a cost-effective way of preventing evictions. During the period 2008-2013, the number of evictions targeting residents in the rental housing provided by the city of Helsinki declined significantly, despite the economic downturn. More than 30% of clients receiving housing advice have a foreign language as their mother tongue. Housing advice is an important form of support in preventing the homelessness of families with children with a migrant background and for homeless families with rental debts. A current challenge in developing the prevention of homelessness is to expand and model the housing advice to also make it compatible in small municipalities. The functioning of housing advice in the prevention of homelessness could be strengthened by developing greater co-operation with psycho-social services. This would mean that the psycho-social services would be available flexibly even when the resident at risk of becoming homeless does not have an existing client relationship.

Currently, the main challenges to the development of homelessness prevention services in Finland are the lack of affordable rental housing supply and the need to develop light supports that are understood as part of a holistic approach to the client.

Homelessness Prevention in the UK

Legislation passed in England in 2002 requires local authorities to develop homelessness strategies with an emphasis on prevention. The core of the preventative model is a system referred to as 'Housing Options.' Most local authorities have a Housing Options team, which is designed to act as a first point of contact between a local authority and anyone who is experiencing a housing problem. The function of the Housing Options team is to provide people with the ways and means to address their housing needs to avoid homelessness, which can include both enabling people to *retain* existing housing and facilitating a move into *new* housing to avoid actual homelessness being experienced.

When functioning correctly, a Housing Options team should function as a single point of assessment that directs a potentially or newly homeless household to the required services to stop a loss of housing or immediately end their homelessness. In England, prevention is defined as "providing people with the ways and means to address their housing and other needs to avoid homelessness."[107]

There was a marked increase in preventative activity in England during the period 2010-2014, from 140,900 cases in fiscal 2010 to 209,300 cases in fiscal 2014. During this same period a shift in the nature of preventative activity has also occurred, in 2010, 54.3% of prevention cases were households which moved into new, alternative housing to avoid homelessness, but this level had fallen to 46.8% by 2014, with 53.2% of cases enabled to retain existing housing in that same year.[108] In England and more recently in Scotland, increases in preventative service delivery have been associated with very significant reductions in the number of statutorily homeless households assisted under homelessness laws.

Preventative services can go beyond housing advice and can include support services such as case management for people whose potential homelessness is linked to unmet support needs. Housing advice services can both offer help when someone is experiencing difficulties with their existing home, for example by helping them negotiate with a landlord when rent arrears have occurred, and also give them advice and help in finding a new home if they cannot remain in their existing housing. Housing advice services can also provide support if a private rented or social landlord behaves inappropriately or breaks the law. Alongside the local authority Housing Options teams, charities and NGOs also operate housing advice services. The national homelessness charity Shelter runs helplines and websites offering housing advice, alongside legal advice centres.[109] Housing advice services can also provide assistance if there are problems or errors in claiming rent subsidies which may cause rent arrears. As homelessness and tenancy laws differ across the UK, advice services have to be specific to each UK country.

Mediation services, which are particularly focused on young people, but which can also be used when relationships break down between friends or relatives who are sharing housing, are designed to stop unplanned moves that may result in homelessness. Essentially, these services negotiate when a dispute within a household may result in homelessness, working to stop moves where possible and desirable, or to at least delay moving out until alternative housing can be found.

A range of specialist supported accommodation exists that is designed to prevent homelessness among at risk groups. This includes services such as Foyers targeted to young people who might be at risk of homelessness and service provision for ex-offenders leaving prison who are at heightened risk of homelessness.

Floating support services (FSS) are designed to both prevent and reduce homelessness. FSS offer a *low* intensity case management based service that provides advice, basic practical support and some emotional support. These services coordinate access

to necessary services when health and support needs either threaten sustainment of existing housing, or present risks to the loss of newly acquired housing.

Some social landlords run FSS dedicated to their own existing and new tenants. Other FSS are provided by NGOs, often commissioned by local authorities and cover both potentially and formerly homeless people with support needs in both the private and social rented sectors. Specialist variants of these services exist, for example a FSS focusing on nuisance behaviour associated with unmet support needs that prevents eviction from the social rented sector[110] and FSS designed to engage with ex-prisoners with high support needs who are at heightened risk of homelessness on release.[111]

Sanctuary schemes are designed to prevent homelessness associated with gender-based/domestic violence. These services provide physical security, support and sometimes legal protection that enable a woman who has experienced, or been threatened by violence to remain in her home, while being designed to ensure that the male perpetrator has been removed and no longer presents a risk to her. These services have been evaluated as providing a workable alternative to the use of refuges and as preventing the disruption to a woman's life, were she (and her children, where present) to become homeless as a result of escaping the threat of violence in the home.[112]

The overall effectiveness of preventative services is difficult to ascertain because data are only in place that record the number of interventions. It is not possible, at present, to determine whether many potentially homeless people are receiving multiple 'preventative' interventions and effectively experiencing recurrent risks of homelessness that are only being temporarily resolved.[113] In the two countries where it is most established, England and more recently Scotland, homelessness prevention is presented as an unqualified success by national governments. However, questions have been raised about the extent to which homeless people, who should qualify as statutorily homeless under homelessness law, are being diverted away from the statutory systems and receiving potentially less effective and enduring solutions to their homelessness as a result.[114]

At the time of writing, statistical data on the extent of homelessness and research on individual services and programmes does suggest that these various forms of preventative interventions are often effective and that levels of homelessness would be higher without use of preventative services.[115] However, since 2010, sustained and deep cuts in homelessness service provision have occurred and increases in some forms of homelessness, particularly youth homelessness, are being reported.[116]

The key lessons for Finland from the UK centre on developing prevention as a multi-layered set of services that range from basic, generic, housing advice through to a range of specialist support services designed to meet the needs of specific groups, such as women at risk of violence, ex-offenders and vulnerable young people. The use of Housing Option teams as a common assessment point also enables the coordination of preventative services. In many respects, however, current Finnish policy and service development already closely follows a multifaceted and coordinated approach to homelessness prevention.

Homelessness Prevention in the USA

Homelessness prevention has emerged in the US as a promising area of policy and practice, borrowing from other communities and countries. Led by successful innovations in the UK and Germany, the USA has recently developed several new programmes to more proactively work with families and individuals experiencing a housing crisis. The first national effort in the US to fund homelessness prevention was enacted as part of the economic stimulus of the Obama administration in 2009.[117] The

programme, dubbed the Homelessness Prevention and Rapid Rehousing programme (HPRP), subsequently assisted more than a million persons over its three year period of funding.[118] More recently, the reauthorized legislation for federal homelessness assistance (the HEARTH Act of 2009) established a new programme, the Emergency Solutions Grant programme, that encourages communities to focus on expanding rapid rehousing programmes as a form of secondary or tertiary prevention, and as an alternative to traditional shelter and transitional housing programmes.[119] The emphasis under the new law is to focus more on rehousing those presenting or currently homeless, rather than those "at risk," under the assumption that many at risk households would not become homelessness without the assistance, and resources would be more efficiently targeted by focusing on those already homeless.

However, a randomized controlled trial of homelessness prevention in New York City did find that, with the aid of a screening tool developed by Beth Shinn to identify those at greater risk, that families served by homelessness prevention cut their odds of shelter entry in half, and that the difference in shelter costs relative to the prevention costs actually yielded a net savings for households assigned to prevention.[120]

Despite this evidence, the appetite for expanded prevention as a strategy for the general poor population has been weak among policymakers, who prefer the more efficient targeting of rapid rehousing those who are already homeless. However, there continues to be support for more targeted efforts at homelessness prevention among specific subpopulations, including among veterans, youth aging out of foster care, and people released from correctional programmes or lengthy psychiatric treatment. Given that these populations have substantially higher risks of homelessness than the general population, the targeting of these efforts to these groups not only makes sense from an efficiency perspective, but the special circumstances of the populations also affords them more political support than the general poverty population.

For veterans, the national health care system that serves them in the US now has in place a universal screener for homelessness risk that is asked of all patients seen in outpatient care. A positive screen for homelessness or risk of homelessness triggers a social work appointment for a "light touch" intervention, consisting mostly of housing advice, and possible referral to other programmes, including the VA's community based homelessness prevention and rapid rehousing programme, known as the Supportive Services to Veteran Families programme (SSVF). The Veterans Affairs' SSVF programme funds community organizations to provide homelessness prevention assistance, including rent arrears, debt clearance, case management, conflict resolution and referral to health services and employment. For veterans who are already experiencing homelessness, the programme also provides relocation assistance (housing search, first/last month's rent and security deposit) and up to nine months of rental assistance.

For youth aging out of care, recent legislation in the US has extended the age for emancipation from 18 to 21, at the option of states.[121] Youth are thus able to stay in care, with the accompany housing payments, health insurance, and social supports from family or other care providers, during these vulnerable young adult years. Pilot efforts to fund housing subsidies for such youth in the 18-25 year period, such as the Transitional Housing programme (TH) and THP Plus programme, as well as HUD's Family Unification Plan vouchers, have proven successful, but there remain limited slots for the much greater number of youth in need of these housing supports.[122] Use of residential programmes, like the Foyer programme model from Europe, are less common, but are being developed in large US cities, providing peer and professional support in clustered apartments or rooms.

For adults who are leaving correctional facilities, or who are leaving inpatient psychiatric treatment, the Critical Time Intervention (CTI) programme has shown substantial promise.[123] CTI is designed as a time-limited intervention in which a per-

son transitioning back to the community receives team-led supports in that transition, with decreasing intensity, over a nine month period. Typically, people receive very intensive supports in the first 90 days, which is stepped down in the next 90 days, and then lower still in the final 90 days, before there is a "hand-off" to the regular community support or treatment system. Multiple RCTs have demonstrated that CTI is effective and cost effective, in reducing re-hospitalization, re-incarceration, and homelessness. The potential for using behavioural health funding to pay for this service, at least for people with qualifying behavioural health conditions, has also opened the prospect of a new funding source for homelessness prevention in the US – Medicaid, which under the Affordable Care Act passed in 2010 is now available to adults who experience homelessness in states that have adopted the expansion (states also have to include CTI as a fundable activity in their state Medicaid plans).[124]

Lastly, people who are residents of public housing can sometimes be the target of homelessness prevention assistance, depending on the locality. As many as 20 percent of the people entering homelessness are thought to be coming from public housing.[125] Because of their mandate to serve qualifying poor households, it could be argued that public housing authorities should have their own programmes that focus on eviction prevention and homelessness prevention among their tenants, including secondary tenants, rather than sending their troubled tenants to other community-based prevention programmes. Some public housing authorities do use their social service programmes to help address such issues, but federal policy supporting such intervention is only advisory. The Finnish experience of providing homelessness prevention and anti-eviction assistance to its social housing tenants serves as a model here, and should be assessed for its adequacy and replicability.

Homelessness Prevention in Sweden

From the Swedish perspective, the best way to end homelessness is to prevent people from getting into a homeless situation in the first place. And the best solution to prevent people from becoming homeless is to make sure that there is enough available housing supply that is affordable and that people can access. The major challenges in Sweden and in many other countries is that it is getting more and more difficult to get into the ordinary housing market. The financial crisis has also resulted in greater pressure on low-income households. Housing allowances have been reduced and social benefits have not increased in relation to inflation.

One tool that the municipalities can use to help people getting housed is the so-called municipal rental guarantee. This tool enables the tenant to get their own lease, but if the tenant should not be able to pay the rent, the municipality will guarantee the rent. For landlords this provides extra security, and reduces the risk of renting to lower income tenants. Municipalities can get a government grant for these rental guarantees. Unfortunately the municipalities do not use this tool very often.

One of the key strategies in a Swedish context has been to prevent eviction and especially families with children threatened by eviction. Such early intervention is regularly performed by social workers who have a special position to be the link between social services and housing companies (public, for-profit and non-profit). The social worker handles reports from the housing companies regarding disturbances or if a client is not able to pay their rent. An important development concerning preventing evictions has been to reduce the time between a disturbance report and actions taken. Housing support workers also fulfil an important role in preventing evictions. It is however difficult to evaluate the effectiveness of preventive measures, because cases of eviction that are averted are not always tracked or counted.

Another important preventive intervention is the so-called hyresrådgivning (rental advisors). The prime task for the rental advisors is to help clients to stay housed. The advisors can help clients with questions concerning rent arrears, difficulties in paying the rent in time or if the client is at risk of losing their lease due to unpaid rent. If the client is at risk of eviction the rent advisor can seek an agreement with the landlord to keep the client housed.

If the tenant has a lot of debt there are also budget and debt counsellors who can help with the tenant's financial situation. Unfortunately the queues for getting in touch with the counsellors have been long, which has resulted in unnecessary evictions. This type of preventive work has improved in many ways over the years and the work of the rent advisors and the budget and debt counsellors have become more formalized and routinized. One of the main aims of the budget and debt counsellors is to prevent over-indebtedness. Research has shown that previous evictions, rent arrears and no previous references are major barriers for getting one's own lease.[126] We also know from research that evictions are very expensive and they have little or no effect as a "pedagogical tool." Most households don't have huge rent arrears. Often the cost that an eviction creates is many times more expensive than the sum of the debts.[127]

Homelessness prevention has also been improved by the use of outreach social work. This type of work was a very rare intervention in the beginning of the 21th century. But suddenly young people started to show up at the emergency shelters and this initiated the demand for other housing solutions.[128] There have been many different forms of housing solutions for young people, but there is no research evidence that can guide practice at this stage. The results from the Danish Housing First evaluation showed that there was support for Housing First even for young people. However, the housing retention rates were lower.[129]

The other two groups that have been on the policy agenda are former offenders and people with mental health problems. For former offenders the key challenge has been to minimize the risk of re-entering homelessness after getting out of prison. Many NGOs have been involved in projects and programmes in order to help former offenders to find housing before leaving prison. Many municipalities have also developed cooperation's between the criminal justice system and social services.

Research has shown that many people risk "falling between chairs" because they have problems that that different organizations don't consider to be their responsibility. This is especially true for people with mental illness and addiction. One example of a practice that had good results was a so-called "distress accommodation."[130] This is an emergency apartment that could house up to three guests. Most of the staff had their own experiences with mental health problems. The aim of the project was to prevent evictions by letting people with mental health problems to come and stay a night or two instead of being admitted to a psychiatric ward. However, even though the project showed good results, it was terminated after the funding ran out.

Due to organizational factors there tends to be a gap between social services and especially psychiatric services in Sweden. The consequences are, for example, that an ACT-team can be implemented for targeting people with dual diagnosis, but the service is not linked up with the Housing First service.

Personal or peer representatives are a relatively new profession in Sweden that also have had impact on the preventive work. Personal representatives are appointed to people with mental health problems, but lately to other groups as well. They work closely with the service users and can follow them to appointments with social services and other authorities.[131] This type of service has grown out of the recent development of greater attention to service user involvement. Personal representatives work with empowerment, but it is also a form of advocacy.

Conclusions

Several common strategies emerge when examining the practice of homelessness prevention in Finland, and in the comparative contexts of the UK, USA and Sweden. First, homelessness prevention seems to be predominantly approached through a variety of "housing advice" services. Finland has such services, including special services within its social housing programmes, as well as a social work practice focused on addressing the housing problems of special populations. The Swedish system seems to have the greatest variety of such services, whereas the UK's local "Housing Options" teams seem to provide the most comprehensive coverage. In Sweden, in addition to housing advice as a social work service to prevent evictions, special social work services are available for young people with housing problems, for budget and debt counselling, and for connecting people with mental health problems to treatment. This emergence of a variety of forms of housing advice as an area of social work practice seems to be growing in importance and value, including expanded "floating support services" in the UK, although evaluations and effectiveness measures are difficult to come by. Only in the US does the practice of housing advice seem particularly limited, due to their focus on maximizing the targeting of housing stabilization resources to people who are currently homeless, rather than people who may be at risk, but who are not yet homeless (and may not yet become homeless). The exception to this in the US is for military veterans, for whom a new prevention service has been created, similar to housing advice approaches in these other countries, and which is offered through a universal screening programme to veterans seen in outpatient clinics.

This focus on veterans in US relates to another common stream to the evolution to homelessness prevention in all of the countries observed here, and that is a focus on specific vulnerable subpopulations. All of the countries seem to have specific prevention programmes targeting young people, including specialized social work services. In the UK, the Foyer programme is a special housing programme that successfully serves the needs of young people. In the US, special housing programmes for youth tend to be limited to those who have aged out of the foster care system. In that regard, the raising of the age of emancipation from 18 to 21 has recently created an extension of housing and social supports to youth in care in the US, and is expected to reduce homelessness significantly in this group, at least through age 21. In Sweden and in Finland, special housing supports for youth leaving care are also available as a way to provide support in the transition to adulthood, as well as avert homelessness. All of the countries also seem to have developed special housing support programmes for offenders transitioning back to the community, and for women facing domestic violence.

Other innovations observed here and deserving of note are the Swedish "municipal rent guarantee" programme, which provides assurances to landlords that rent payment arrears can be covered by government, for households who have low income and to whom landlords might be otherwise reluctant to serve. In the US the use of Critical Time Intervention has shown success in aiding people with the transition from prison and inpatient psychiatric hospitalization, through a case management service that declines in intensity over a 9 month period, with transition to the community treatment system. The programme has demonstrated success in multiple countries, including Denmark, and has been established through randomized controlled trials. An advantage is that it can be paid for through health services funding.

In conclusion, Finland's homelessness prevention activities, including its housing advice services, especially those targeted to tenants in social housing, and its outreach to youth and offenders, seem to align with the emergence of homelessness prevention in the other observed countries. The UK seems to have a longer and more developed

track record in systematically providing such assistance as an alternative to emergency accommodations, especially through local "housing options" programmes. The US seems to have picked up on this as well, and is expanding its efforts at "rapid rehousing" as an alternative to stays in emergency accommodation. But the expansion of housing advice as both a more generalized area of social work practice, and as a service targeted to particularly at-risk households, seems to be taking hold in Sweden, the UK and Finland. Future research efforts might look specifically at the expansion and practice of housing advice, and more systematically at its effectiveness and how it is adapted for different subpopulations. But, it is clear from this review that interventions to prevent evictions, mediate with landlords and family members, and to provide connections between at-risk populations and other community resources, are having a significant impact on efforts to avert homelessness at a household level, and that reductions in overall homelessness in many countries have been associated with the adoption and expansion of housing advice and housing prevention programmes.

6 Using Lower Intensity Support to Reduce Homelessness

In this chapter we will discuss successful approaches using lower intensity support in reducing homelessness, including long-term homelessness, in the USA and UK, alongside experiences from Sweden. The lessons for Finnish experience from these models will be discussed.

Lower Intensity Support in the USA

Research in the US has shown that relatively intensive supports, such as that provided by ACT teams, are successful in assisting people who experience chronic homelessness to get into housing and to sustain in that housing. However, the Critical Time Intervention (CTI) approach has also shown that in most cases those supports can be stepped down in intensity over time.[132] For example, the model of CTI for people who have severe and disabling psychiatric disorders calls for a nine month intervention, with supports being most intensive in the first 90 days, lesser so in the next, and lesser still in the final 90 days, when transition to regular community supports is planned. The model can be even more brief in the case of people with less severe behavioural health needs.

The efficacy of this "time-limited and decreasing intensity" approach has raised some questions as to how to optimally organize supports for people in supportive housing, including whether an ACT team may be necessary in many cases, or for a permanent or semi-permanent duration. For example, recent research has shown that intensive case management of people in PSH is as effective as an ACT team in achieving positive housing and treatment engagement outcomes. Research on peer counsellors and peer groups has further found that such supports are also effective, and could substitute for some professional floating supports, although research in this area is continuing.[133]

A similar debate has emerged in the area of homelessness prevention and rapid rehousing, regarding what intensity of services is appropriate and at what point. In this case, the debate has centred on whether clients seeking homelessness prevention or rapid rehousing assistance should get a full psychosocial workup with *a priori* assignment to varying levels of service intensity, or whether the assessment and intervention should be progressively staged with intensity.[134] Under the *a priori* model, an assumption is made that triage can be accomplished by various assessment tools, and that matching of clients with relative intensities of service as indicated by the assessments will produce a better outcome for the respective groups. Alternatively, the progressive engagement model assumes that all clients should be screened with limited and minimally intrusive requests for information and provided initially with relatively low intensity supports ("light touch"). As a client persists in their crisis or in

homelessness, further assessment is done, and the intensity of supports is increased to try to resolve the situation. As the intensity of supports grows, so does the assessment to better inform the nature of the supports needed.

At present, there is no clear research-based answer to which of these approaches is superior. Research has generally found that individual risk factors or demographic background characteristics – while significant -- are not strong predictors of who becomes homeless, nor the duration of homelessness.[135] While some factors show an association in research, collectively these factors don't account for much of the variation in incidence or duration of homelessness, whereas "events" or the stage and nature of the presenting housing or domestic crises seem to be more important factors, which may change over the course of the homelessness episode. Such evidence would to seem to support the relative value of a "progressive engagement" versus "*a priori*" matching approach. However, as yet, definitive evidence is not available to resolve this debate, and must await the results of further research.

As interventions to address homelessness in the US continue to evolve, a deeper appreciation of the need for more nuanced and adaptable service models seems to emerge, in preference to models that emphasize more uniformity and consistency. This evolving perspective, including the provision of "light supports" may yet reflect a maturing of the field and the evidence-base.

Lower Intensity Homelessness Services in the UK

Low intensity support in the UK has its origins in the closures of large scale, central government funded, homeless shelters in the 1980s. Closure was pursued using a combination of smaller, more supportive, communal and congregate supported housing schemes and a new model, at that time known as a resettlement service.

Resettlement services, which used mobile support workers visiting former shelter residents in their own homes, offered a low intensity, housing-related support model. These services offered support with living independently, managing a home and budgeting, low level emotional support and organised access to any necessary health and social services via case management. Initial evaluations found that there was a need for support with social integration, alongside help with accessing required health, care and support services, and that assumptions that there would always be a high need for support in learning how to live independently after being in the institution-like setting of emergency accommodation were questionable[136].

By the early 1990s, some larger local authorities - which at that time were still large scale social landlords - were also experimenting with using resettlement services. These services had been developed as a direct result of a lack of housing sustainment among people accepted as statutorily homeless because they were vulnerable. Many of these statutorily homeless 'vulnerable' individuals were not sustaining the social housing they had been allocated, because they had unmet support needs. By the mid-1990s, resettlement services using low intensity, housing related support and case management were orchestrating services to meet support needs, promoting daily living skills (household management), ensuring financial needs were met (via the welfare system) and supporting social integration (promote positive personal and community relationships). Resettlement services placing homeless people with support needs *directly* into ordinary housing and seeking to sustain that housing through low intensity floating support and case management were active by this point[137].

This basic model of low intensity support underwent changes that mirrored wider developments in British homelessness policy. As social housing shortfalls became a major issue, the role of these floating support services was slowly widened, encom-

passing formerly homeless people with support needs living in both social and private rented housing. As an emphasis on prevention emerged in the early 2000s in England, services began to evolve into tenancy sustainment services and acquired both a preventative and resettlement function. Alongside supporting housing sustainment for rehoused formerly homeless people with support needs, a tenancy sustainment service could also be used to prevent homelessness among vulnerable people whose existing housing was at risk. The core functions of these services remained consistent, mixing low intensity, housing related support with case management[138].

Client loads of 25-30, or more, are common in tenancy sustainment services, restricting the time that a support worker can spend with each person. As resources have tightened, some services have placed more emphasis on an initial case management role, ensuring the correct package of support, health and social services is in place, with support lessening after an short-term case management focused intervention designed to reduce risk that housing will be lost. These services are, however, *less* intensive than critical time intervention models. It is not uncommon for tenancy sustainment services to be time-limited, for example for 6, 9 or 12 months, despite research evidence suggesting that they need to offer open ended support if formerly and potentially homeless people with support needs are to avoid homelessness[139].

Data on the use of tenancy sustainment services in England is available from 2003/4 to 2003/4 to 2010/11. While the use of congregate supported and transitional housing were to remain predominant in UK as a response to lone homeless adults with high support needs, there were some increases in the use of tenancy sustainment services (TSS). In 2003/4, 62,523 single homeless people received homelessness services funded through the Supporting People programme in England, most in (congregate) supported housing (41.5%) or direct access emergency accommodation (39.2%), but 9% were supported by TSS. By 2010/11, use of supported housing (43.9%) and direct access (20.6%), by 60,443 lone homeless people with support needs, while still predominant, had fallen relative to 2003/4, with 18.2% receiving support from TSS[140]. More recent data on homelessness service activity in England are incomplete, as government funding for data collection has been withdrawn, and now represent only a large sample of homelessness services. However, these data show 25% of 35,271 lone homeless adults using homelessness services using TSS in 2013/14[141], suggesting this form of service provision is continuing to grow relative to congregate, single site services.

Available outcomes data are restricted to service exit interviews. In 2010/11, the last year with complete data, 74% of lone homeless adults with support needs using TSS, with an identified need for support with housing sustainment, were successfully housed as service contact ended. The most recent data for 2013/14, effectively only a large sample of homeless people using FSS, show 82% of lone homeless adults with support needs with a need for support with housing sustainment were housed as service contact ended[142]. An absence of longitudinal data on what happens to these formerly homeless people after service contact ends, i.e. whether they are still housed six, nine or 12 months after they stop receiving TSS, makes it unclear exactly how successful these services are in the medium to long term. A series of evaluations conducted in the 1990s and early 2000s are limited in that they are observational, rather than control trials and also tend not to be longitudinal[143]. Nevertheless, there is certainly some evidence that TSS can sustain housing at high rates and there is a policy *assumption* that TSS is an effective approach[144], albeit in a context where many homelessness services are still single site, congregate supported housing models.

TSS is also used on a small scale for homeless families with support needs and, for this group, providing ordinary housing with TSS support is a more common service model than using congregate supported housing. In the British context, family homelessness is much more closely linked to economic and social factors, i.e. poverty

and gender based/domestic violence, than to high support needs, homeless families requiring TSS or other services are therefore comparatively rare.

People sleeping rough, i.e. who are living on the streets, are less likely than other homeless groups to be placed in TSS, being more likely to be placed in direct access/emergency and supported housing. British direct access services receiving state or local authority funding will offer self-contained apartments, or at least individual rooms, dedicated keyworker support, case management and a resettlement programme[145]. Placement of people sleeping rough in supported housing for lone homeless adults with support needs is also a widespread service response. However, use of TSS for people sleeping rough has expanded in England, in 2003/4, only 3% of people sleeping rough were placed in TSS, rising to 9.6% for 2010/11 (the last year for which full data are available) and 18.8% in 2013/14 (based on a large sample of people using homelessness services)[146].

Research has suggested that low intensity TSS can be highly vulnerable to adverse working conditions, particularly when there are challenges linked to the level and continuity of support they are able to provide or challenges with finding suitable housing in suitable neighbourhoods. Very heavy reliance on case management can mean that if, for example, health, mental health, social services and other supports are not relatively easily accessible and cooperative, a TSS can struggle to maintain housing sustainment for a vulnerable homeless person. Equally, high caseloads for workers, limiting the extent of contact with formerly homeless people with support needs or time limits being placed on service delivery, cutting off support at six, nine or 12 months, can have an adverse effect on outcomes. Further, if housing is in very poor condition, or located in an area where someone feels unsafe or is persecuted, positive outcomes are hard to achieve[147].

Several elements of the core philosophy of Housing First models is reflected in the operation of British TSS services. These services did however develop without reference to the pioneer Housing First services in the USA. TSS operate in a context in which formerly homeless people living in ordinary housing have the same tenancies in the social or private rented sector as any ordinary citizen would have. This situation has probably arisen in part because the statutory homeless systems were originally designed to work by providing priority access to ordinary housing with an ordinary tenancy, and still generally seek that same outcome. Housing is thus separated from support. Equally, a longstanding mainstream policy shift towards harm reduction is reflected in how many homelessness services operate[148].

Key lessons for Finland need to be considered in the light of the UK evidence base not being as robust as it could be for TSS. The indications are that this low intensity, case management based, approach using mobile workers who support people in their own homes can deliver housing sustainment, including for high need groups. However, TSS is heavily reliant on good working relationships and access to sufficient health, social work and other support services required for their case management role to work well. There are some indications that overloading support workers, providing time-limited services and inappropriate housing can also undermine service effectiveness.

The UK has developed Tenancy Sustainment Teams (TSTs) funded under the Rough Sleepers Initiative and subsequent programme, which are a *high* intensity, ongoing support model with much in common with Housing First models. Equally, the use of TSS needs to be contextualised, in that most of the homeless service provision in the UK is still congregate supported housing[149]. While British congregate supported housing is often less strict with regard to abstinence and meeting conditions to progress towards housing, the use of what is effectively a form of staircase model is still widespread[150].

Lower Intensity Support to Reduce Homelessness in Sweden

In many ways Finland and Sweden are similar when it comes to lower intensity support. They both have extensive welfare services, but the cooperation between different services can be quite difficult to arrange. This is especially so when it comes to the cooperation between social services and mental health services. Lower intensity support is often used in transitional housing and on the secondary housing market. The tenants receive housing support when needed. Some of this support could rather be described as a control function.

Many congregate supported housing units and transitional housing units require abstinence and they often have extra rules that the clients need to follow in order to keep their apartment. In some congregate and category housing there are on-site support workers, but in many others there are housing support workers that do home visits. Many of the larger cities have a division of labour between housing social workers and housing support workers. The former refer the clients to different forms of housing while the latter do the actual support work in their homes. The housing support workers have to check that the apartments are in good shape and that the tenants do not have someone living with them. This double role has been problematized in previous research where the support workers both have to help the clients with their housing situation and evict them from their housing if they do not manage to follow the rules.

Using Lower Intensity Support to Reduce Homelessness in Finland

Interpretation and the relation to the ACT team

What does lower intensity mean? Where is the line between intensive and low threshold support? Is the service given within office hours low intensity support? There is no floating or mobile support service like the ACT team in Finland. Around the clock support by a multi-professional team is mainly available in the intensive support housing units.

In most cases low intensity support means floating support provided by the social and health care professionals in a client's home. Multi-professional approach takes place as networks and the functionality may vary depending on location and client group. A lack of intensive floating support has meant that the most marginalized homeless have mainly been left out from supported housing following the scattered housing principle. The current issue is organising light, but not too light, support for people moving from housing units to independent housing. Lower intensity support is difficult to define accurately. It can mean home visits taking place once a week or once a month. On the other hand home visits three times a week can also be defined as low intensity support, especially if the support is mostly given during the office hours.

Organising the support

In general, the baseline is gradual reduction on the intensity of the support. During the transition (e.g. releasing from psychiatric hospital or prison) support is usually most intense, even daily. The problem is the availability of the support after the fixed-duration support is finished, or when the situation of the resident becomes critical and the amount of support has already been reduced. Availability of the support is a current challenge when developing floating or mobile support. The circumstances of the residents may go into crisis after the housing has been stable for a long time. Recovery is a process that often takes years and in which the intensity of support may vary.

Housing units, communities and low threshold day centres as support providers

Lower intensity support can be directed to a number of dwellings which are closely situated and work with a low threshold service principle. Lower intensity support can also work in small communities, such as terraced houses, accommodating people with severe mental health problems. In this way it is possible to ensure the availability as well as adequate and flexible variations of the intensity support. The current issue is how intensive support housing units could provide support that varies in its intensity to scattered housing. Housing units could be the providers of the lower intensity support not only for the clients who have moved from that particular housing unit into independent housing but, in a wider sense, they could also make scattered housing possible for long term homeless who need support in varying degrees.

Non-profit Rental Housing Corporations

Housing support provided by Non-profit Rental Housing Corporations include traditional, very low intensity support activities, which will mainly consist of monitoring how well life goes on in the housing, such as rapid intervening in case of rental debts and disorder in housing. Housing support is often associated with a situation in which a rental contract with a third sector organisation has finished but it is uncertain if the resident can sustain their housing independently. Housing support is a parallel lower intensity support model which can also provide housing advice, which is provided by both social housing companies and social services. However, housing advice also responds to difficult crises in housing and provides psycho-social support. Housing advice has been developed particularly in the metropolitan area, where a significant proportion of the clients are families with immigrant background. Housing advice has proven to be financially efficient form of light support and it has significantly helped to influence the reduction of evictions[151].

The expansion of low intensity support requires a significant increase in the supply of rental housing, particularly in the metropolitan area. The main rental housing providers are rental housing agencies owned by the cities, the Y-Foundation and The Finnish Youth Housing Association. In addition, the third sector organisations have purchased apartments with the funding from the Slot Machine Association and which they sublet to their clients. Some organisations have also managed to rent apartments from the private sector to sublet them to their clients.

Housing for people with severe mental health problems is currently ongoing a process of change in the service structure. This means moving from heavily supported assisted living to placing people with severe mental health problems into normal housing. In most cases, people with severe mental health problems, just like homeless people, hope to have a home of their own, either in scattered housing or in communities of a couple of apartments, in which each resident have their own apartment.

Research on the young, people with severe mental health problems and ex-offenders has shown that trust and continuity are the key factors when building functional and appropriate support models for housing. The importance of a reliable employee as support provider and networker has proven to be great. Contemporary contracts of purchase complicate the building and maintaining the client centred relationships of support. Recovery is not often linear, but includes relapses, crises, and "worse periods". Gradual reduction of the support is not therefore always justified, but may jeopardise the housing[152].

Overview

Low intensity support services are available and work well, for example, for the young homeless clients of the Youth Housing Organisation (NAL) who work or study, or at least are applying for the above. For this group low intensity support is sufficient, because they have survival and integration elements in their lives. Low intensity services also work well for those ex-offenders, people with severe mental health problems and drug abusers who are attached to work or education, special level of mental health services or drug rehabilitation or self-help groups.

In contrast, deeply marginalized long-term homeless people need intensive support. The content and delivery of this support should now be systematically developed without forgetting the know-how of the peer support organisations. For example, for young people with history in institutions, ex-offenders and people with severe mental health problems low intensity support is often not enough but has to be introduced gradually. To move to low intensity support requires the residents to have an opportunity to have normal services, both basic and specific. Floating support should be developed in such a way that receiving it is not tied to fixed-term contracts of purchase. Planning the housing and strengthening the housing skills should be more closely connected to rehabilitative work in psychiatric hospitals and prisons to contribute to the securing the housing.

Low intensity services are available to varying degrees, including the standard and intensity, in different parts of the country. In Finland such a service has traditionally been offered by Social Services and by a large number of third sector organisations. It is now time to clarify the concept of lower intensity services and the ways to deliver it, as well as to evaluate the limits of the housing social work: how comprehensively and at what level the housing services should respond to the (psycho) social problems of the residents.

7 Housing First

This chapter critically assesses the use of Housing First in Finland, exploring both the strengths of Finnish Housing First services and the questions that have been raised about their effectiveness. The chapter begins by looking at the comparative success of Housing First in ending long term homelessness in Finland, contrasting experiences with those in Sweden, the UK and USA and briefly examining the wider evidence base. Key criticisms that have been directed at Housing First in Finland are then considered. Again, experience in Finland is contrasted with Sweden, the UK and USA and the wider evidence base. The chapter concludes with a discussion.

The Housing First concept

Guidance, discussion and debate about Housing First is widely available. Housing First services follow a core philosophy that regards housing, i.e. a home rather than temporary accommodation, as a human right. Provision of housing is not conditional on behaving in a certain way, nor is retaining housing. So, for example, if a long-term homeless person is drinking alcohol, this is neither a barrier to their being housed nor to their keeping that housing. Housing First service users should have the same level of security and rights as anyone renting a home or an apartment. Housing First follows a harm reduction approach and people using Housing First can exercise choices as to whether or not they use services. Support is also flexible, non-judgemental and open ended, i.e. there is no set time limit.

There are variations in how Housing First is delivered. This variation centres on where support is delivered and how it is delivered. Housing First can be communal or congregate, i.e. be delivered in apartment blocks that only contain apartments for formerly long-term homeless people. Housing First can be scattered, i.e. delivered to ordinary apartments or houses that are not close to one another using mobile workers. Housing First can have dedicated, comprehensive services, with a staff team including mental health and drug and alcohol specialists (one example is assertive community treatment or ACT services). There are also case management based Housing First services, where workers' key role centres on coordinating externally provided health, social work, drug/alcohol and other support services (an example is the intensive case management or ICM services). Housing First might also use both forms of support, for example ACT and ICM services. Another important variation can be the degree to which peer support is provided. Some Housing First services integrate a peer-support worker, who has shared experiences of long-term homelessness, others seek to employ support workers with shared experiences, while in other examples, peer support might be restricted to informal arrangements, or is not used extensively[153].

The Successes of Housing First

Ending long-term homelessness

Housing First in Finland often uses a communal/congregate model although the Paavo II programme resulted in increased use of scattered housing based services that are regarded as a form of Housing First.

The necessary housing for communal Housing First was provided through conversion of existing buildings, including some existing homeless shelters, into apartments exclusively for the use of formerly and potentially long-term homeless people. The Alppikatu Housing First service in Helsinki City[19], for example, had been an emergency shelter since 1937, at one point containing over 500 short-term places for homeless people in shared dormitories, before being converted to an 80 apartment Housing First service. Another example, the Ruusulankatu[20] Housing First service for younger adults, is a single block containing 93 apartments. Scattered housing models of Housing First tend to use social rented housing, provided for example, by the Y Foundation. Housing First is delivered using a case-management led approach in both the communal and scattered housing services.

Housing sustainment statistics are not collected in a uniform way across Housing First services. However, reports from service providers and policy makers are that rates of housing sustainment are generally very high. Only very low numbers appear to have abandoned or been evicted from apartments in the Housing First services in Helsinki City, during the last year, for example. The longstanding statistical monitoring of the long-term homeless population is seen as a key indicator of the success of Housing First. In 2008, 2,931 people were long-term homeless in Finland, in ten biggest cities, falling to 2,192 in late 2013, a reduction of 25%. Long-term homelessness fell from 45% of all homelessness to 36% of all homelessness in Finland between 2008 and 2011[21]. This is a major achievement in which the use of Housing First services played a crucial role.

Fieldwork visits by the research team found a widespread view among homelessness service providers and policy makers that Housing First has directly reduced long-term homelessness. One respondent summarised the general view:

> *If you go to the units here, absolutely it has worked. I think in that sense we have reached the hard core of the group. Absolutely.*

Experience in Sweden, the USA and UK

Sweden has not pursued a national Housing First strategy and no specific funding has been introduced. Housing First services were first developed in 2009 and have so far followed a scattered site approach, unlike the communal model used in Finland[154]. The majority of Swedish services use a case management approach, but there is an ACT team connected to a Housing First service in Gothenburg.

Swedish examples are all pilot (experimental) small scale scattered Housing First services that vary in organisation and in the services they provide[155]. Not every Housing First service has been evaluated, however, the results of existing and ongoing research all indicate high rates of housing sustainment. Currently, 46 long-term homeless people have been housed in Stockholm and 33 in Helsingborg. A housing

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[19] Run by the Salvation Army.
[20] Run by Blue Ribbon.
[21] Source: ARA, 2014.

sustainment rate of 87% has been achieved in Helsingborg, prompting an expansion of the Housing First programme. People using Housing First value the sense of independence and control from having their own home, valued peer support and had developed trusting relationships with Housing First service providers, in marked contrast to their attitude to some of the services they had previously worked with.

Scattered site Housing First services in Sweden can struggle to find suitable housing, in part because of shortages of affordable housing, but also because private landlords and housing companies can be reluctant to house formerly homeless people. One concern is that formerly homeless people will invite or allow other people to live with them. The view that formerly homeless people will be disruptive and fail to pay rent is widespread among social landlords across the Northern EU[156].

Housing First originated in the USA and has been the subject of multiple empirical studies. This research has consistently demonstrated effectiveness in delivering housing sustainment for those homeless people who are 'hardest to house', including people who have been evicted from 'clean and sober' (residential treatment) services. Data from the USA are extensive and suggests housing sustainment rates of between 80-85% at two years plus for Housing First services[157]. There is also some evidence of comparable successes in housing sustainment for communal models of Housing First[158].

Housing First is prominent in Federal, State and city-level homelessness strategies and has been adopted by the US Interagency Council on Homelessness and the US Department of Veterans Affairs as the primary programme for people experiencing 'chronic'[22] homelessness. Success in ending long-term homelessness has, again, been associated with providing people with a home, their own living space which they control and which they value, and which can form a base in which a wider process of recovery and reintegration can begin[159].

Housing First is only one of several models of homelessness service in use in the USA, and has been described as one of several forms of 'permanent supportive housing' (PSH) that combine housing and support services. There is evidence supporting the use of alternative approaches to Housing First, which mean that the successes Housing First has achieved in housing sustainment within the USA are not unique. It has also been argued that a robust evidence base comparing Housing First with other approaches is not yet fully in place.

The British situation broadly parallels that of Sweden in some respects, with a relatively small number of pilot services, almost all of which are case-management based services using a scattered housing approach, currently in operation. Each individual project is small, with few services working with more than 10-15 formerly long-term homeless people at any one point. The Housing First use a mix of social rented and private rented housing, with considerable variation as to the extent to which they rely on one or the other. As in Sweden, there is not a dedicated budget, nor a national strategy and while a small scale evaluation is currently underway of most of the existing pilot projects[160], there is no equivalent to the large scale systematic trials of Housing First conducted in France[161] or Canada[162]. The UK currently has no Housing First service using an ACT-based model or equivalent[23].

Levels of success in housing sustainment for British Housing First services appear to be high. However, the evidence base for these services is currently limited to a handful of observational studies of small projects. Based on observational evaluations in Wales[163], Scotland[164] and London[165] and forthcoming research[166], housing sustainment rates appear generally equivalent to those encountered elsewhere, at between 80-90% of long-term homeless people at one year.

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[22] Long-term and recurrent homelessness associated with high support needs.
[23] i.e. a specialist support team including mental health and drug/alcohol specialists which is integral to the Housing First service.

Housing First is not a mainstream homelessness service in the UK and the evidence base for Housing First is not extensive. The UK, while making heavy use of communal services designed to make long-term homeless people 'housing ready', has also experimented with more flexible, housing-led approaches using mobile support. Services such as the tenancy sustainment team (TST) model[167] developed towards the latter part of the Rough Sleepers Initiative bear close resemblance to Housing First in many respects, despite being developed without reference to American services. In some senses, evaluations of these similar services add weight to the argument for Housing First in the British context, as they show very similar services achieving similar outcomes.

To the American, British and Swedish evidence can be added the results of evaluations of Housing First in Canada[168], Denmark[169], France[170], Portugal and the Netherlands[171], all showing that the Housing First approach is effective in ending long-term and recurrent homelessness among people with high support needs. Further, the results from Canada, Denmark and France are the results of socially scientific robust evaluations.

Criticisms of Housing First

Criticisms of Housing First in Finland can be divided into two main groups. The first group of criticisms centres on arguments that Housing First in Finland has low fidelity with the pioneer Housing First projects in the USA, focusing specifically on those Finnish Housing First services using a communal/congregate model. The second group of criticisms relate to Housing First as an approach to long-term homelessness.

Use of the Communal Model

Housing First in Finland is provided using both scattered housing and communal/congregate models. The communal models of Housing First used in Finland have been criticised as having a low fidelity with pioneering Housing First projects in the USA[172]. These criticisms centre on arguments that communal approaches undermine the capacity of Housing First to deliver housing sustainment, social integration and the communal model being viewed as replicating institutional responses to homelessness, centred on many people with high support needs living together in a shared space, that are detrimental to well-being[173].

Communal Housing First and Housing Sustainment

In the USA, a wide range of services refer to themselves as being Housing First. Criticisms have been made of the evidence base around housing sustainment, i.e. remaining housed following long-term homelessness, because while success is being claimed for Housing First, one Housing First project is not necessarily very similar to another Housing First project[174]. Adding to these concerns, there is evidence that the popularity of Housing First as a slogan and as a philosophy has led services that are not actually following a Housing First approach describing themselves as Housing First. One example is services that do accept that long-term homelessness can only be solved by providing housing, but which also insist on abstinence, rather than following the harm reduction, choice-led approach that is integral to Housing First. This, it has been argued, make it unclear exactly how effective Housing First really is in ending long-term homelessness[175].

Swedish and British experience is more limited and the research base is narrower. There is also variation in fidelity to the pioneer models of Housing First. For exam-

ple in Sweden, the organisation of support differs between Housing First services. Equally, in the UK, the ways in which housing and support are arranged varies between Housing First services. However, both Sweden and the UK tend to use the core philosophy of the Pathways model of Housing First as a shared reference point, meaning that there is *less* variation, at least at present, than is the case in the USA.

In Finland, communal models of Housing First appear to perform well in delivering housing sustainment. Data in respect of scattered site Housing First services were not available. The research visits to Finland indicated that, like Britain and Sweden, the degree of cohesion in Finnish Housing First services was quite high, i.e. there was a shared emphasis on client choice, harm reduction and separating housing and support.

Reviewing the current evidence, it appears that across North America and those EU countries in which Housing First services have been evaluated, success in reducing long-term homelessness is conditional on *philosophical* compliance with a Housing First model. In essence, following the idea that homeless people are entitled to their own home, should not be judged or expected to behave in certain ways in exchange for being offered or keeping a home and should be supported for as long as they require by services that can respond flexibly to a wide range of need is what makes a Housing First service work. Failure to end long-term homelessness is clearly linked not to the detail of where people are housed or the organisation of support, it is instead linked to inadequate support, insecure housing and requiring people to not drink, not use drugs, engage with treatment and generally have their lives regulated in return for being offered and being able to retain housing[176].

Communal Housing First and Social Integration

Housing First in Finland is provided using both scattered and communal models. Criticisms that Finnish Housing First may not enable social integration have centred on communal Housing First. Critics portray communal Housing First service users as living in distinct, physically separate accommodation that potentially reinforces their status as both being different from their fellow citizens and, where communal Housing First apartments are identified as for homeless people, as being 'marked' by their use of those services in a way that is potentially stigmatising.

There is some evidence to suggest that living in communal Housing First is potentially stigmatising. During the fieldwork visits, the research team had the opportunity to visit several communal Housing First services in Helsinki City and it was evident that considerable effort had to be made to manage the relationships between these Housing First services and the neighbourhoods in which they were situated. Environmental teams of workers are used who patrolled the area surrounding the Housing First services, looking for neighbourhood problems that might be associated Housing First residents, or which might be *assumed* to be the result of the presence of the Housing First project. This work involved connecting with local businesses and community groups and also developing interrelationships between the surrounding communities and the communal Housing First projects.

That there was a requirement for neighbourhood management could be seen as an indication that communal Housing First has a potentially stigmatising effect. However, there is a need for caution here. Sometimes negative attitudes towards long-term homeless people may be similar regardless of the circumstances in which they are living, it cannot be simply assumed that attitudes, on learning an immediate neighbour was formerly homeless, would be any more positive.

More generally, in relation to social integration, the barriers to formerly long-term homeless people having something meaningful in their lives, in terms of relationships, activity and civic participation, may be attitudinal and cultural and may not go away simply because someone is housed in a particular way. Having been homeless can be

a barrier to social integration, because society, not just in Finland but across Europe, may not view homeless people in a positive way[177].

Swedish research shows that there are barriers to using a scattered site approach which are also linked to stigmatisation, with both housing companies and private landlords refusing to house formerly long-term homeless people on the basis of assumptions that those individuals will present housing management problems. These barriers to scattered housing for long-term homeless people also exist in the UK. In Finland, securing housing supply for scattered models of Housing First could generate some challenges, particularly in the context of high demand for social housing and high housing costs in Helsinki City and other housing markets where there is considerable demand pressure for affordable housing and limitations in supply.

British experience, outside Housing First, has been that using housing-led approaches that place vulnerable people in ordinary housing scattered across the community can generate undesired effects if that housing is not suitable. A key issue here is the idea of toxic neighbourhoods, in which community is absent, social cohesion is very low and the neighbouring households may persecute vulnerable individuals. Equally, there is some evidence that people may simply be ignored by neighbours[178]. These findings indicate caution is required in assuming that scattered housing models will automatically produce better results in relation to social integration than communal Housing First.

Another potential difficulty is that argument scattered housing promotes social integration is problematic. In part, this relates to the idea that neighbourhoods are not always nurturing and supportive environments, but actually a more fundamental question can be raised, which is *how* exactly being in ordinary housing in an ordinary community helps social integration[179].

There is some American evidence that being in ordinary housing can create a sense of normalization, disconnecting someone who has been long term homeless from their former life and changing their outlook[180]. Swedish research on Housing First also shows positive effects associated with someone having control over their own *home*, with better relationships with family and reductions in drug and alcohol use being reported. American work asserting that scattered Housing First achieves better social integration[181] - arguably - fails to clearly differentiate between the positive effects on social integration of having one's own home, with the (presumed) positive effects of living in the midst of ordinary citizens who have no experience of homelessness. There is some evidence that having an independent *home* promotes social integration, it is less clear whether and to what extent that home being provided by a communal or scattered model of Housing First may make a difference to social integration[182].

Finally on the issue of social integration, it can be argued that the potential for communal models to be a source of community and peer support is somewhat neglected by arguments advocating that only scattered Housing First services should be used. Here, the fieldwork visits conducted by the research team produced interesting results. Some of the people who were living in communal Housing First projects reporting a positive picture of social integration and that their apartments were their homes.

> *It is up to me whether I open the door or not, it is my own place, and I can decide what to do.*

Housing First resident [via translator].

> *This definitely feels like home. Before I was sharing a room with five others. The first thing I wanted to do when I woke up was get out. This feels like home now, for the first time.*

Housing First resident [via translator].

There is a sense of community, we have had all had quite a tough life, but you are also allowed to be what you are and there is a sense of being together and being asked what you think. Housing First Resident [via translator].

In ordinary flats, you don't know your neighbours, here you do and you always say hi and bye and so on.

Housing First Resident [via translator].

The evidence base on Housing First in relation to social integration is not complete. There is some research, for example from Denmark, where communal and scattered models of Housing First have been compared, suggesting less positive outcomes for communal models compared to scattered housing models[183]. Elsewhere the evidence is less clear cut, with for example Canadian and American communal Housing First services being reported on positively in terms of what they are achieving, but often with an emphasis on housing sustainment and reductions in drug/alcohol use, rather than social integration[184].

The answer to better social integration may be more complex than the forms of housing that Housing First services use. As one respondent to the fieldwork conducted by the research team expressed it, answers may lie in examining the support needed for social integration.

It is not a question of centralised units or scattered housing, it is a question of the intensity of the support and the relevance to the needs of the people.

The British approach to social integration, with a considerable emphasis on moving formerly homeless people towards paid work, has been to develop a separate range of services that are specifically dedicated to social integration, separated from services that provide and sustaining housing[185]. This raises some interesting questions about what the limits of Housing First services might be in relation to social integration and whether and to what extent, new forms of service and new forms of support that are either integrated into Housing First models or operate alongside them, may be required. Realism, both in respect of what Housing First can achieve, but also in terms of what any one homelessness service should be expected to achieve[186], should perhaps be the starting point for discussions around promotion of social integration for long-term homeless people in Finland, both in respect of communal and scattered models of Housing First.

Communal Housing First and Health and Well-Being

Another criticism that is directed at the communal Housing First provided in Finland - again excluding the scattered Housing First services that are also in operation - is that communal models risk replicating the institutional living environments they were designed to replace. Alongside arguments that communal models may undermine social integration, there is also the argument that these living environments, in which groups of formerly long-term homeless people are all living in the same building, albeit in their own apartments are potentially detrimental to health and well-being. The argument has two main elements. First, communal Housing First may be inherently difficult to manage and because of this, may be an environment that is stressful to live in. Second, being surrounded by people who use drugs and alcohol, again albeit in their own apartments, creates an additional challenge to someone who wants to move away from using drugs and alcohol[187].

Some evidence exists that during the early phases of the Housing First programme problems with managing the behaviour of some long-term homeless people using

communal Housing First did occur, creating challenges for staff and the people living in communal Housing First[188]. However, fieldwork visits and discussions conducted by the research team did not indicate that problems with managing communal Housing First services had continued and that, on the contrary, communal Housing First services were generally stable environments. Some long-term homeless people who could not adjust to communal Housing First had left, or in some instances been evicted, but there was no evidence to suggest this had happened on a large scale, as the communal Housing First services all reported very low rates of eviction.

This said, it should be noted that the relative strengths and weaknesses of communal models of Housing First compared to scattered site Housing First have yet to be fully evaluated. There is positive evidence, suggesting gains in mental well-being and improvements in physical health for both communal and scattered Housing First. This evidence does not always show clear gains in well-being for everyone using these services. However, given some health conditions are permanent, or degenerative, and may, at best, only be partially improved by whatever treatment or support someone using Housing First chooses to engage with, it would be illogical to expect every long-term homeless person using a Housing First service to eventually have good health[189]. Again, the point that Housing First will face limitations in terms of what can be achieved, in the sense that some health problems can only be managed, needs to be borne in mind.

Evidence around drug and alcohol use shows patterns of reduction and of stabilisation in use, but does not show that people using Housing First services tend to actually stop drinking or using drugs at a very high rate. The extent to which using communal models of Housing First may influence drug and alcohol use is unclear, as there are arguments that being in the presence of other drug and alcohol users may make reducing use or abstaining more challenging. Equally, there is the potential for communal Housing First to provide a supportive environment, in which people with shared experiences could potentially support each other. Drugs and alcohol might also be more freely available on the street than within the monitored environments of communal Housing First services. The evidence base is, at present, unclear on these issues[190], but it may prove to be the case that simple assumptions should not be made about communal versus scattered models of Housing First in relation to drug or alcohol use.

Conclusions

There are still some gaps in the evidence for Housing First both within Finland, as well as in Sweden, the UK, the USA and in other countries that making use of Housing First services. One of these evidence gaps centres on cost effectiveness. Some US evidence indicates that Housing First costs no more, or only a little more, than other homelessness services, while being more effective at ending long-term homelessness[191]. Systematic evaluations of Housing First in Canada have also indicated that Housing First is a cost effective option when seeking to reduce long-term homelessness[192]. Within Europe, both the economic costs of homelessness and the cost-effectiveness of homelessness services is generally not well understood[193]. Some British research suggests, like the American results, that Housing First is no more expensive and may actually be more cost effective than supported congregate services that are designed to transition long-term homeless people into housing, but the evidence base is not very strong[194]. Equally, some Finnish research has also suggested savings may result from using a Housing First approach, though again there is scope for further exploration of cost effectiveness[195].

The evidence, at present, is that Housing First in Finland has proven crucial to the reductions in long-term homelessness that have been achieved and criticisms of the communal Housing First approach that has been used have to be viewed in that light. Reviewing current international evidence on Housing First, it can be argued that there is a much clearer association between fidelity to the core *philosophy* and ending long-term homelessness than there is a clear association between any *particular* model of Housing First and ending long-term homelessness. In this sense, both the communal and scattered Finnish Housing First services, with their close adherence to harm reduction, not placing requirements on people to receive and remain in housing and emphasis on giving formerly long-term homeless people choice and control, are examples of Housing First with high fidelity to the core philosophy of pioneering projects in the USA. In common with other Housing First which also follow this approach closely, Housing First in Finland tends to be very effective at ending long-term homelessness. There is scope to further explore this issue, as Finland is using both scattered and communal models of Housing First, there is the possibility of comparing and contrasting the outcomes across these two types of Housing First service.

There are however limits to what Housing First can achieve and challenges to be faced, both within Finland and elsewhere. Housing First is not a panacea, it will not correct all mental and physical health problems or consistently end addiction, nor, importantly, will it necessarily work for all long-term homeless people. Success rates are high, but there will be some people for whom Housing First is not the answer and other approaches may be required. Equally, moving beyond sustaining housing and towards social integration and greater health and well-being may require additional and perhaps specially developed services operating alongside Housing First.

Scattered site services require suitable housing and supply issues are evident in Sweden and the UK, while the risks associated with toxic neighbourhoods show it is not just a matter of providing scattered housing but the *right* scattered housing. Any simple assumption that social isolation is less likely to occur in scattered housing is also problematic, nor should the potentially beneficial social supports of well managed communal Housing First be neglected.

Finally, some of the limitations in relation to what Housing First may be able to achieve relate to the lasting damage that long-term homelessness can cause to someone. Housing First may well be able to help improve well-being, but it may not be possible for any form of housing and support to reverse the damage that has been done by long term homelessness. In many ways, Housing First represents a way of repairing and managing damage that ideally should not have occurred, the consequences of failures to prevent long-term homelessness. The importance of reducing long-term homelessness using Housing First is equalled and arguably exceeded by the need to prevent long-term homelessness from occurring where this is possible.

8 Meeting specific needs

This section of the report explores the different forms that homelessness can take in Finland, discussing the needs of specific populations of homeless people and undertaking comparisons with experience in Sweden, the UK and USA. Women, young people, migrants and former offenders who are homeless are included in this chapter. Drawing on international experience, possible areas for new developments in policy and service design for these groups of homeless people are discussed.

Women

In Finland, women are less likely to experience homelessness than men, but there is some evidence that women are forming an increasing proportion of the single homeless population. In 2008, 18.7% of single homeless people were women, this proportion rose over the next few years and in both 2012 and 2013, 24% of single homeless people were women. During this same period, total single homelessness fell from 7,955 people in 2008 to 7,500 in 2013[196]. Long term homelessness is also more likely to be experienced by men, but there were 534 women among the 2,545 long-term homeless people counted and estimated at national level in 2013 (21% of long term homeless people were female)[197]. Exact statistics were not available, but among the people living in Housing First services in Helsinki City, while many formerly long term homeless people are men, there is again some representation of women. During fieldwork visits the research team also encountered some reports that women were an increasing proportion of drug users with complex needs who were at potentially heightened risk of homelessness.

The welfare systems available to women lone parents with dependent children in Finland are relatively extensive, which make explain why homelessness among this group of women appears to be uncommon. More generally, family homelessness - among both one and two parent households - appears to be unusual, with 475 families with children being recorded as homeless in 2013[198].

In Sweden, the proportion of women experiencing homelessness appears higher than in Finland, at 36% of the total homeless population, although quite a high proportion of these women are also migrants (39%). There is some regional variation, with Stockholm reporting 27% of all homeless people were women in 2012. In the USA, the representation of women among lone homeless adults is lower (19%)[199] but there is evidence that women can have higher support needs than lone men[200]. In both the USA and UK, many homeless families are lone women parents with dependent children.

In the UK, women are not strongly represented among people living rough using emergency accommodation and other homelessness services (14% of people sleeping rough using housing related homelessness services in England during 2010/11, 15%

in 2013/14[201]). Data from the CHAIN database system in London shows that 13% of the 6,508 people who slept rough for at least one night during 2013/14 were women[202]. Women are present in greater numbers in congregate temporary supported housing, transitional housing and mobile support services for lone homeless adults (29% in England during 2010/11, 30% in 2013/14[203]). Women are strongly represented among users of the statutory homelessness systems throughout the UK, but these systems are explicitly designed to support homeless lone women parents with dependent children and other women with support needs[204].

Fieldwork visits also showed that homelessness service providers, along with people who had been homeless, thought women could sometimes experience homelessness in different ways from men. One issue was an association with gender-based violence, i.e. women experiencing homelessness as a result of escaping violence or threatened violence from a male partner. There is evidence from much of the European Union and North America showing a clear association between gender based violence and women's homelessness, both among lone adult women and lone women parents with dependent children who experience homelessness[205]. Very high rates of experience of gender based violence are found among lone women and lone women parents who experience homelessness in the UK[206]. In Sweden, one of the most common causes of women's homelessness is gender based violence[207] and recently some increases in levels have been reported, for example in the City of Malmö, a rise of 50% was reported between 2013 and 2014. In the USA, there is widespread evidence of experience sexual abuse among women, both prior to and during homelessness[208].

In Sweden and the UK there are concerns that an absence of alternatives can mean that women who wish to escape violent men are unable to exit their relationships because they fear that homelessness will be a consequence. In a technical sense this is potential, rather than actualised homelessness. In the UK, under the homelessness laws, being at risk of gender based violence in your own home is recognised and legally defined as being a state of homelessness, i.e. a woman cannot be expected to remain living in those circumstances[209]. During 2010, a national mapping exercise of gender based violence services for women in England indicated that effective need for these services considerably exceeded current provision, suggesting this dimension of homelessness was potentially even larger than already thought[210]. One group of women is poorly protected in the UK from homelessness due to gender based violence. If a migrant woman has been allowed to enter and remain in the UK on the basis she is someone's wife and then becomes homeless due to gender based violence, she may be unable to access any services, could have her migration status revoked and may face repatriation[211].

It was also reported during fieldwork visits that women were more likely to seek informal solutions to homelessness, i.e. rely on social networks of friends and family to find somewhere to stay, rather than approach homelessness or social services for help. Recent research in Ireland[212] and some work in the USA[213] has indicated a similar pattern, with women who experience homelessness sometimes only seeking help from services if the arrangements they had made with friends or family broke down. British research on families using the statutory homelessness system in England indicated a similar pattern in 2005, showing that women with children were resorting to the homelessness system, not infrequently with reluctance, because they had exhausted the possibilities for staying with families and friends[214.] Homeless women living in informal arrangements with relatives or friends is thought to produce undercounts of women's homelessness when Sweden attempts to map overall levels of homelessness. This emerging evidence that women react to homelessness in different ways to men, that they are much more likely to rely on informal arrangements, i.e. staying with friends and relatives, may mean that the true extent of women's homelessness is concealed.

Swedish research has highlighted another aspect of women's homelessness, which is how women are regarded and processed by homelessness services. Women's character is more likely to be judged and their homelessness, being outside the home and not in the expected domestic and motherhood role, more likely to be regarded with hostility. The discourse around women's homelessness is often connected with stigmatising ideas about a woman's character[215], with homeless women reporting, for example, that they are assumed to be active in sex work just because they are homeless[216]. Some older British research has suggested that women avoid some homelessness services, partially because those services are largely used by men and partially because of the judgemental attitudes they may encounter[217].

There is an evidence gap in relation to women's experience of homelessness, both globally and in the specific context of the European Union[218]. It is difficult to be precise about the true nature and extent of women's homelessness in this context, but it is possible to undertake some, partially, informed speculation about the issues around women's homelessness that may exist in Finland.

More research is indicating that the true extent and negative consequences of women's homelessness may be, at least partially, be concealed. This concealment is in part because of what appears to be women's greater reliance on informal arrangements when they lose their home. There are some potential concerns here, women may sometimes be exploited or abused in exchange for accommodation, equally, even when they are being positively supported by friends or family, they may be living in overcrowded or otherwise unsuitable conditions. Informal arrangements that women make to avoid using homelessness services may still place them in situations that are precarious, detrimental to their well-being and which are, effectively, a state of homelessness[219]. Recent research in Ireland has highlighted the possibility that long-term and recurrent homelessness among women with high support is also being concealed. Women within the long-term homeless population were often using informal arrangements, avoiding using homelessness services because of some of the attitudes they encounter, and not having their support needs met[220].

Where Finland is ahead of many other EU countries is in the efforts devoted to understanding and counting the extent of homelessness which exists among women (and men) who are relying on informal arrangements because they have no home of their own. Recognising this as a form of homelessness is, in itself, effectively a recognition of what may be a key dimension of women's experience of homelessness. This approach means there is a clearer picture of women's homelessness than would otherwise be the case. By contrast, the UK has little or no idea of the extent of this population, its statistical data being restricted to women who actually use homelessness services, although research makes it evident that this population, of homeless women, living precariously in informal arrangements that risk their well-being, does exist[221].

As it is sometimes an issue in some other countries with comparable levels of welfare and homelessness service development, including Sweden and the UK, it may be worth exploring whether any barriers exist to homelessness services and other services for women. These barriers may be attitudinal, for example negative assumptions about a woman and her lifestyle, or reflect wider sexism, a homeless woman being judged more harshly than a homeless man because she is outside an expected 'domestic' role. Of course, there may be a broader issue here, if women and men are ever treated as undeserving individuals whose behaviour needs to be corrected by any homelessness services, this is a concern as the evidence base says this is both unfair and, crucially from a policy perspective, very often results in services that are fundamentally ineffective[222].

Homelessness among women is clearly an issue in Finland, women are represented in the homeless and long-term homeless populations and experiencing all the potentially harmful effects of homelessness. Ensuring that this social problem is

accurately mapped and understood, which may mean using specific methodologies for understanding women's homelessness and also ensuring that homelessness services exist that cater effectively for women's needs, lies at the heart of ensuring that this dimension of homelessness is fully addressed.

Young homeless people

Youth Homelessness in Finland

The shortage of small rental dwellings and very high rents in the metropolitan area, especially in Helsinki, create and sustain youth homelessness.[223] Two kinds of groups can be found within youth homelessness: young people who are homeless due to their low level of income and overpriced rental housing, and young people who, in addition to housing, need support services.

The Finnish Youth Housing Association (NAL) is an important national organisation that has developed housing services for young people. In addition to housing, the organisation offers support services designed to meet the needs of young people. The organisation also co-operates extensively with municipalities and other organisations. The housing and the support offered by NAL provides needed resources for young people who are in employment or in education, or who are seeking them. The housing provided by the organisation can be a particularly good solution to homelessness for young people with a child welfare background, recently released prisoners or young people recovering from mental health and substance abuse problems. Young people in child protection aftercare are offered housing support services, social services and employment guidance by child welfare authorities. In addition, both municipalities and NGOs have developed different kinds of outreach services for youth. The purpose of outreach is to help those young people under 29 years of age who need support or who are at risk of social exclusion to reach public sector services. Methods of outreach include street work, mobile social work or targeted efforts aimed at specific subgroups and environments. As one example, the Vamos project run by the Helsinki institute, aimed at young people aged 17 to 29 has been very successful.

During the Homelessness Reduction programme period (2008-2015) several cities developed preventive measures in addition to general housing advice for young people. These include, for example, courses on housing for homeless youth and for young people who have lost their homes due to eviction. Housing pathways have also been developed for young people who experience long-term homelessness with psycho-social support in different areas of their lives. These include both group and individual supports, and aim to secure stable housing and social integration. A number of third sector organisations (e.g. mental health and criminal sanction/probation agencies), have projects aimed particularly at young homeless clients.

From the perspective of the Paavo programme (especially for the next programme) the most challenging group is the youth who live in groups with their friends, outside and in shelters, who use multiple substances and/or are injection substance users. Some of them have received permanent housing from housing programmes that follow the Housing First principle, primarily the Ruusulankatu Housing Unit, which is a housing service aimed at young adults. A small number of young adults who are in a severe spiral of substance abuse, who lack very basics living skills and/or who suffer from serious mental health problems, live in the Alppikatu Housing Unit and in the Aurora House. One ongoing challenge is to gain the trust of young people who refuse services and to support them in their transition from these kinds of housing units to more independent living.

Unfortunately, very little information is available on homelessness among young women and immigrants. Many of the young women are thought to be using substances, and they are more likely to refuse the option of a housing unit and instead to bunk with their acquaintances, which places them at risk for abuse. The proportion of immigrants among the youth who are homeless is remarkably high in relation to the proportion of young people in general. However, only anecdotal information about this group is available, and it is the topic of an ongoing study.

Youth Homelessness in Sweden

Youth homelessness is a relatively new phenomenon in Sweden. Around 2005 social workers reported that young people (often with an immigrant background) without any problems with addictions started to use acute housing solutions like night shelters. Some special housing alternatives have been tried like having scattered site apartments. Connected to the satellite apartments is a contact family where the young person can get support from or take part in daily activities. In a peer-review in Denmark in 2013 on "Sustainable ways of preventing homelessness" a special focus was on youth homelessness[224].

From the Danish experience, Housing First services were recommended as a solution even for homeless youth. In the Danish evaluation it was younger persons with both addiction and mental health issues that were also included in the programme. This can be of interest in the implementation of the new Finnish strategy but also for the other Nordic countries. The Danish evaluation promoted scattered site solutions with ACT-teams. The research evidence in the Nordic countries on successful solutions towards youth homelessness is rather rare. International research has shown that many of the younger homeless people became homeless because of family problems or getting kicked out of their parental home due to the youth's sexual orientation.[225] We do not have any data on this in the Nordic countries. There have been issues around cultural differences and family breakdowns.

21 per cent of the total amount of homeless people in Sweden was in the age of 19-26[226]. Most of the young homeless persons were living with friends or in training flats. Eight per cent of the group were acute homeless. The main cause of the young person's homelessness was that they were not accepted as tenants on the ordinary housing market. Another common cause was family problems including violence. Around 25 per cent of the young homeless persons became homeless because of problems with alcohol and drug abuse.

The fact that many of the younger homeless people find themselves in a homeless situation due to the housing market has caused a grass root movement called "Jag-villhabostad.nu [I want housing now]"[227]. One of the organisations idea is to build so-called fast housing based on mobile housing modules that are built on plots with a temporary planning permission. Many municipalities have also actively started to work with innovative solutions to address housing needs for younger people. One of this is the UngBo-project in Malmö and the design project FunkyRooms[228]. The idea is to create and produce functional housing for young people at a reasonable cost. Another solution that can be discussed is the self-building idea. This has been tried out in a Norwegian context and also a few projects in Sweden and in countries like Italy[229].

Youth homelessness in the UK

Youth homelessness in the UK can be strongly associated with relationship breakdown with a parent or parents. Mediation services, which essentially provide a means for young people and their parent or parents to negotiate, are designed to stop youth homelessness from occurring by stopping young people from leaving home prema-

turely, or if a move is inevitable, making sure that move is planned carefully so that homelessness does not occur[230]. Mediation may be provided alongside other services, for example life skills training and peer mentoring, to ensure that when a young person does eventually leave home, the supports necessary to sustain independent housing are in place[231].

A sustained and alarming association existed between youth homelessness and experience of going into social services care as a child across the UK for several decades. Significant efforts were made to break this pattern during the 2000s, extending the duration for which social services were responsible for young people whom they had 'looked after' as children and issuing guidance and designing systems to ensure that transitions from care did not result in homelessness[232]. NGOs are funded specifically to focus on preventing this form of youth homelessness, including the National Care Advisory Service (NCAS)[233].

Supported housing services, which in the UK refers to congregate (single site) services with multiple service users in residence with on-site services have been developed with a specific focus on youth homelessness prevention. The 'Foyer' movement is designed not only to provide supported accommodation that makes young people ready for independent living, but is also designed to promote the development of social skills, educational attainment and training focused on securing paid work[234]. There are also specific supported housing services for teenage parents, designed to promote housing sustainment, good parenting and social integration[235].

Specific services designed for homelessness prevention among young people are mirrored by an array of specialist services for reducing the level of youth homelessness. There are specialist service providers for young homeless people, such as St Basils[236] and Alone in London[237] alongside a dedicated national charity, Centrepoint[238], which delivers services, promotes good practice in service delivery and campaigns on youth homelessness issues.

The models of homelessness service used for young people do not differ fundamentally from those used with lone homeless adults with support needs. Supported housing services (congregate, single site models) and floating support services (FSS) follow the same basic approach as homelessness services for adults, but are specifically and solely intended for homeless people aged 16-25 and inaccessible to other groups. The emphasis of these services may also be somewhat different, with a greater focus on giving young people 'life-skills' which will be required to live independently in their own home in the community. Additionally, youth homelessness services have a longstanding focus on social integration, especially participation in training, education and paid work, than is the case for services working with homeless adults or homeless families, which have tended to focus more on housing sustainment. This pattern is changing however, with homelessness services for adults and families increasingly focusing on social integration, again with an emphasis on economic participation. There are also services focused on social integration rather than housing sustainment which work with both homeless young people and adults, such as the Crisis Skylight programme[239] and Time Banks[240] for homeless people.

Modifications have also been made to the homelessness legislation. In Scotland, reforms have removed any requirement that a lone young person must be in some way 'vulnerable' to receive assistance, for example because they have mental health problems or experience of being in the care of social services, and in England, any young person aged 16-17 who is homeless is *automatically* regarded as vulnerable under homelessness law.

Key lessons for Finland centre on the UK's development of an array of specialist preventative services and homelessness services that are focused solely on working with young homeless people. Developing a specifically focused array of homelessness services has appeared to deliver better outcomes than would be the case if young

people were using the same services as homeless adults. However, while service outcomes are generally regarded as acceptable by policymakers, there is an absence of systematic and longitudinal research on the medium and long-term outcomes for young people using specialist youth homelessness services. Additionally, available evidence indicates the ongoing presence of a high need population of young homeless people, which may number as much as 30-40,000 at any one point in time[241].

Youth Homelessness in the USA

Youth homelessness has emerged as an increasing area of concern and focus in US policy circles. Unfortunately, firm data from which to estimate the prevalence of youth homelessness is quite limited. The most recent Annual Homelessness Assessment Report to Congress (2014) reports that 45,205 youth were enumerated as "unaccompanied" and homeless on a given night in January, 2014.[242] This includes 6,200 children under the age of 18 and 39,000 between 18 and 24 years of age. These figures are widely considered to be underestimates, as youth who experience homeless are much more likely to be hidden from enumeration as couch surfers, and in other informal accommodations. The coming of age of the "millennial" population (children born between 1983 and 2003) is likely contributing to a perception that youth homelessness is increasing, and may yet threaten to become a problem of "young adult" homelessness, as this generation progresses in age.

The US does not have a strong history of developing evidence-based solutions for youth, and looks to international models where there seems to be much more experience and research.[243] Efforts to develop "foyer" models in the US are nascent, as are other clustered apartment approaches. The one area where there has been some concerted attention, albeit under-resourced, has been the housing problems of youth who have aged out of foster care. Research suggests that nearly half of these youth will experience homelessness by age 25. Perhaps the most important recent intervention for this group has been the federal option provided to states to extend the age of emancipation from 18 to 21.[244] This offers three years of additional government support to youth who remain in care, which is essentially a subsidy for housing and for the supports provided by foster families or other providers. This will likely lead to a reduction in homelessness for this group, but for others may just forestall housing problems that will yet emerge upon emancipation at 21. Other interventions targeting this population include housing subsidies through the Transitional Housing Plus programme, which is a rental assistance programme up through age 25, and the Family Unification programme, which is a housing voucher programme that includes eligibility for youth exiting care. Non-housing interventions include Chafee Act supports for education and training. Unfortunately, all of these programmes are funded from discretionary funds and are not sufficient in size to cover the population in need (i.e. they are not "entitlements"); thus, demand far outstrips supply.

Other youth who experience homelessness are people who are fleeing abuse, which can include runaway youth. Some shelter programmes do target this population, but youth under age 18 must be reported to child welfare authorities after a two week period, which can contribute to such people avoiding the support of shelters. Special issues of significance for youth that many programmes attempt to address are issues related to sexuality and sexual minorities (LGTBQ), sexual abuse and exploitation, including sex work, developmentally appropriate health and mental health services, as well as mediation with family. Many youth who experience homelessness are believed to exit homelessness through reconciliation with family, so supports for family mediation are important. However, family dysfunction and abuse prevent many young people from being able to return, so the need for other housing and social supports remains an important but often unmet need.

Conclusions

The problem of youth homelessness seems to be gaining attention in Nordic countries and in the US, and has already been an area of attention and programming in the UK. The provision of age-specific services seems to be a desired strategy in each of the countries, recognizing the unique developmental challenges facing these young people. Specialized group housing with peer and mentorship supports, like the Foyer model, as well as some independent housing, seem to be effective. Specialized services are required for those young people with active substance use issues, or for people experiencing the onset of severe mental disorders, and who may need specialized mental health supports. The basic array of behavioural health services for young adults are no different than for other adults, but young people are likely to be in need of vocational and employment supports that assist them in connecting to the labour market and in achieving self-sufficiency.

Migrant and Immigrant Homelessness

Immigrants often run a higher risk of being marginalised on the housing market. Previous research has shown how some ethnic groups run the risk of being discriminated. This phenomenon has been referred to as structural discrimination. In a Swedish context research has shown that cities are often segregated and segmented along ethnic lines. This evidence has implications for housing policies and it challenges the Swedish idea of public housing as universal with equal access to equal housing regardless of origin.[245] In the research on homeless immigrants the structural barriers are elucidated. Homeless immigrants often have to live in the worst apartments in the most economically disadvantaged areas and they often experience overcrowding. One huge barrier for many homeless immigrants is language difficulties.[246] In this section we will briefly discuss migrants and immigrants positions on the housing market in Sweden, the USA and the UK. We will relate the discussion to Finland and to the challenges that need to be addressed in the development of a new homelessness programme.

Migrant and Immigrant Homelessness in the USA

Generally speaking, internal migrants within the US are not a topic of research or policy, as geographic mobility in the US is relatively common and citizens are entitled to public benefits irrespective of residency. The issue sometimes emerges when local political officials express concerns about whether local homeless programmes are a "magnet" attracting people from other jurisdictions seeking those programmes. Indeed, some local jurisdictions, like Philadelphia, may restrict access to shelters or certain types of shelter for people who have established prior residency in the locality. Whether such a practice is legal is not entirely clear, but it may well be given that access to shelter is not a right or entitlement and is largely governed by private organizations; except in New York City, Washington, DC and Massachusetts, where authorities must provide shelter to whoever requests it.

Unpublished data from several states analysed by the author and colleagues at Abt Associates has suggested an average of 75% of shelter residents reporting to have lived in the sheltering jurisdiction prior to entry. Yet, this varies as a function of geography, with some jurisdictions, such as Spokane, Washington, and Minneapolis, Minnesota – northern US cities in the West and Midwest, between which there are few other cities -- reporting approximately 50% of their shelter residents as from outside

their jurisdictions. Their distance from other large cities is likely attracting people seeking employment from the smaller towns and cities between them. The unpublished research Dennis P. Culhane and collaborators from Abt Associates has found that within states, people who have migrated prior to shelter entry, generally go from less populated to more populated areas. For example, people from rural areas tend to move to small cities nearby. People from small cities tend to move to medium-sized cities, and people from medium sized cities to larger cities. The presumption is that this migration pattern primarily reflects the pursuit of employment or other economic opportunities, and that shelter entry becomes a fall-back option when other opportunities do not emerge. This area deserves further research, as it may well be that some people do migrate to areas with better services or access to services.

Homelessness among *immigrant* populations in the US has not been a major focus of either homelessness researchers or policymakers. In part, this may be owing to the fact that the bulk of the poor and undocumented immigrants from Mexico and Central America are addressed primarily by immigration authorities, and in the agricultural sector, where many find work and primitive housing. However, these immigrant populations have increasingly become visible in homelessness enumerations, as unsheltered people living on the edge of cities and towns, and in canyons, washes and other unsettled areas.[247] For a long time, it was thought that Hispanic people were underrepresented among the US homeless, but as counting has expanded and improved, more Hispanics and immigrant populations are being detected as homeless programme users. However, this remains an area with very limited research, and has not been the subject of specific intervention research. Other immigrant populations, from Asia, Africa, Europe and South America, tend to be from non-poor groups, and are not very prevalent in US homeless populations, or at least have not been detected as such. The general assumption is that immigrant groups are more likely to rely on mutual aid networks especially with persons of similar nationality, rather than public welfare agencies, but this area is in need of more research.[248]

Migrant and Immigrant Homelessness in the UK

The UK response to migrant homelessness essentially centres on denying access to homelessness services and seeking repatriation for migrant populations, including EU citizens who are economic migrants, who join lone adult and rough sleeping populations. The housing element of the costs of supported housing services (congregate, single site services with on-staffing) is paid by the Housing Benefit system, the part of the welfare system designed to help low income people and individuals with support needs meet housing costs. Non-UK citizens cannot claim Housing Benefit, unless they are an EU/EEA citizen, who has worked and paid tax in the UK, and can pass a habitual residence test[249]. This effectively prohibits access to Housing Benefit and thus to accommodation based homelessness services that require Housing Benefit to help cover their costs, for recent EU migrants and any undocumented migrant from elsewhere in the World. Asylum seekers are ineligible for benefits, although someone given refugee status/leave to remain in the UK can access the entire welfare system. Support costs for supported housing will be paid for separately, usually via local authority commissioning, which may set additional criteria, for example, by requiring homeless people using the service have a local connection to the area.

In 1985, the homelessness laws in England were amended to explicitly prevent access to the statutory system for non-UK citizens and asylum seekers. As with the welfare system more generally, someone granted refugee status by the UK does have access to the statutory system. The statutory homelessness systems in Wales, Northern Ireland and Scotland operate on the same basis. Much of the Northern EU

blocks access to welfare and social housing systems for migrant populations on a similar basis[250].

Not all homelessness services are dependent on government or local government grants or commissioning and some do not require contributions from the welfare system, including Housing Benefit, in order to operate. These services may be open to migrant populations experiencing homelessness, including EU/EEA citizens, asylum seekers and undocumented migrants. Examples might include day centres, soup runs (services that provide food to people living on the street)[251] and some, charitably funded, emergency accommodation which does not require someone to pay anything and does not ask questions about identity or nationality before providing a service. Alongside some local charities and services provided by faith based organisations (such as individual churches or mosques) may provide basic shelter, food and sometimes support services to any homeless person seeking them, regardless of nationality. Emergency health services, which are universally freely available in the UK, would also be accessible to homeless migrants who cannot demonstrate habitual residence, though accessing free primary care (general practitioner/family doctor) and outpatient services might be problematic[252].

The core of the public policy response to migrant homelessness among people without a clear right to live in the UK is not a question of homelessness policy, but a question of immigration policy. Essentially people who do not have the right to be in the UK will be removed if their presence is detected, forming a further potential barrier to services and support for homeless migrants requiring help and support services. Further, there is a policy response towards homeless migrants who do have the right to be in the UK which is also centred on repatriation. The term 'reconnection' is used to describe homelessness services that are designed to repatriate homeless migrants. Barka, for example, is an NGO that has contracts with several London boroughs (the local authorities that administer London) to return Eastern European homeless people to their country of origin[253].

From a Finnish perspective, the UK is an example of another EU member state that essentially seeks to block access to the majority of homelessness services to migrants who are not established - economically active - residents of the UK. Responses to migrant homelessness, including people living rough who come from outside the UK, centre on repatriation and the issue is seen at least as much as one of immigration and border control as it is one of homelessness. This creates a context in which migrant homelessness is effectively not addressed by homelessness services and migrants who cannot establish habitual residence face repatriation if their presence is detected.

Migrant and Immigrant Homelessness in Sweden

Prior to the latest election in Sweden many parties engaged in debates about housing policies. There were a lot of promises about building affordable homes, especially for young people. But soon another question took over the whole debate. It was the question on begging and the situation of EU-migrants. After the election the Swedish Democrats (a right wing party) had become the third largest political party in Sweden. This result reflects a more general trend in Europe. But the question of beggars and EU-migrants didn't stop after the election, on the contrary. In Denmark begging in the streets is prohibited and countries like Norway have also decided that the municipalities can decide if begging should be allowed or not.

The field visit to the Hirundo day centre in Helsinki made a big impression. The place was crowded when we got there. On any day they can have hundreds of visitors. People were washing their clothes, taking showers and getting something to eat. Hirundo doesn't provide any beds, so visitors have to find other solutions for where to spend the night. It was very unclear where most of the people lived, but

some lived in tents or under bridges. The desperation and the resignation that we heard in the stories that we were told elucidated the extreme poverty that pushes people from Eastern Europe to other countries. One of the men that we talked to was a welder that had lost his job and his house in Rumania. Now he had come to Helsinki with his wife and two daughters trying to find a job and a new future. The work that is carried out at Hirundu is of great importance to the people visiting the centre. At the same time so-called *durable short-sighted solutions*, e.g. soup-kitchens, night shelters and day-centres cannot solve the structural causes that makes people move to another country as a last resort.[254]

The situation is the same in the other Nordic countries. At the time of writing the temperature in Sweden has dropped well below zero. There are no real housing alternatives for EU-migrants. In many municipalities there are no shelters or other acute housing for EU-migrants at all. There are night-shelters in the city of Stockholm and in Gothenburg. In Malmo a night shelter was temporarily opened for the EU-migrants the day after Christmas. Since a few years back an organization called Crossroads in Stockholm has been up and running.[255] It is a day-centre giving advice to EU-migrants. There is a shelter called "Winter night" that is connected to Crossroads. They can provide 32 beds and they are open between 9 pm to 7 am. The guests can sleep for a maximum of five nights then they have to leave their place for someone else in need. The shelter is always full. There are no good estimates of the total number of EU-migrants in Sweden. The National Board of Health and Welfare found 370 people that were homeless in a count in 2013.[256] Most of the NGOs disagree with this estimate.

In a Swedish context EU-migrants and other groups of immigrants/migrants (hidden migrants, undocumented immigrants and unaccompanied minors) are not counted as homeless. They all belong to the immigration services. Depending on the situation they are in, the social services might get involved. The total number of homeless people in Sweden that have another ethnic background is rather high. In 2002 Finland was one of the countries that had 15 percent or less of foreign born homeless people. In Sweden the total number was much higher.[257] In 2005, 26 percent of the total homelessness population in Sweden were born in another country. In 2011 34 percent were foreign born.[258]

In 2013 there were almost 2 000 homeless immigrants in Finland. In 2013 the group was more than 25 percent of the total homelessness population. The growth of homeless immigrants was especially evident in the city of Helsinki. More that 60 percent of the homeless families in Finland was born in another country.[259] There is still a big difference between Sweden and Finland. One explanation for this is that Sweden has a much larger immigration than Finland.

We can see a similar trend in relation to homeless families at a local level. The numbers of homeless families that are foreign born are very high in Sweden as well. This means that a lot of the families that live within the secondary housing market do not have any other problems than the lack of housing references that makes them eligible to sign their own lease. Many housing companies do not accept social assistance as an income - that also makes it difficult for many immigrants to sign their own lease. This is an unnecessary exclusionary mechanism that creates ethnic discrimination and also leads to the spatial concentration of poverty.

Conclusion

The aim of the second homelessness programme in Finland (Paavo II) was to end long-term homelessness. This goal has not been met. This is partly explained by the lack of affordable housing in the metropolitan areas and the increase of both internal migration and immigration. For a large share of the homeless immigrants their problem is the lack of housing. Some families have a multitude of problems with severe support needs. The language barrier can often become a problem in the service delivery. Some of the projects during Paavo II show good results and could be used in the design of new strategies (e.g. Voimanpesä 2).

The Nordic countries have dealt with migrant homelessness in different ways. In countries like Denmark it is illegal for organizations that receive governmental funding to provide shelter or other services to people that doesn't have a Danish personal identification number. There is however a general understanding that the EU need to put greater pressure on countries like Romania and Bulgaria to take care of their citizens and to minimize the exclusion of especially Roma people. This doesn't change the fact that we see a growing number of poor people in the streets in Finland and Sweden. The dilemma when designing a national homelessness programme is to design something that doesn't put different groups of homeless people against each other. At the same time citizenship is the clearest line for inclusion. The dilemma with EU-migrants is that they have the right to come to any EU-country and look for work during a three-month period, but they are not eligible of any services.[260] Some municipalities provide health care and schooling for children, but it varies a lot depending on where you live. This reflects a greater change in many Nordic countries where the privatisation of welfare services have created local welfare markets rather than services that are provided to all citizens according to the principle of the welfare state.[261] Kathleen Arnold summarises the challenges the homeless people in general are facing when it comes to upholding their civic rights:

> *When one can no longer inhabit public space, have one's possessions and shanty towns (home, by some definitions) burned or bulldozed, be arrested for one's status rather than a crime (hence signalling a loss of civil rights), and only exercise political power with extreme difficulty, one cannot be said to be a citizen.*[262]

One concern for politicians is the risk of services becoming a "magnet" for social problems. There is no real evidence that homeless people move to new cities or new areas because of the availability of certain types of homelessness services. Research often shows that most people who become homeless want to live in the proximity of their former home. There is however a phenomenon called the paradox of service-statistics. When a service is established people will start using it and the statistics will show that the group of people that are in need of the service has grown. On the other hand it is difficult to know if these people had the same needs before the service started. In comparison with other city districts the number of people with a certain need will be higher in the areas with more developed welfare institutions.

Homelessness Among Ex-offenders

Finland and Sweden: Similar Experiences

Ex-offenders have been one of the target groups within Long-term Homelessness Reduction programmes I and II. In Finland there are two organizations in the third sector which target ex-offenders. A nationwide NGO, Krits[263], operates mainly in the metropolitan area and the Silta-foundation[264] in Tampere. In addition, a number of Paavo municipalities have organizations giving housing services and a large part of their clientele are ex-offenders. Offenders are a group of long-term homeless for which the securing of housing and social integration seems to be particularly challenging because of problems with desistance and severe alcohol and drug problems.[265] Homelessness work with offenders is important to see as part of working against social exclusion and toward social empowerment.

In Sweden, during the last national homelessness strategy former offenders were prioritized and quite a few programmes were developed to aid the transition from prisons to housing.[266] Most of this support was given by different voluntary organizations and newly developed social enterprises. Several of the projects were small-scaled and they only reached a very small group of service users.[267] Approximately two per cent of the total homelessness population in the last national homelessness mapping in Sweden were staying in prisons at the time of the survey.[268] But 10 per cent of the acute homeless had had experiences of the prison system during the past year.

In Sweden the most common solution (for acute homeless people with addiction) from the social services is to refer the client to a night shelter. These shelters are often run by NGOs like the City Mission and other similar organizations. KRIS, Vägen ut! and Basta are all examples of organizations that have ex-prisoners as staff and can provide peer-support, temporary housing solutions when a prisoner is released; so that they will not fall back into abuse or criminal activities.[269] In Finland the Kris peer support organization functions in seven cities helping prisoners a few months before their release as well as after release for as long as he or she needs support. Kris-Finland has currently several local projects and it co-operates with NGOs responsible for supported housing. One of the core principles based on peer support, like Basta and Vägen ut!, is freedom from drugs and alcohol. This means they are not solutions for those ex-prisoners actively using alcohol or/and drugs.

Homelessness among Ex-Offenders in the UK

British research indicates there are two forms of homelessness among ex-offenders. The UK has an unusually high rate of imprisonment compared to other Northern EU member states and alongside imprisoning people more often, there is a tendency to also imprison people for longer. One group of former offenders at risk of homelessness are those people who have care and support needs, such as mental health problems or severe mental illness, who are at risk of homelessness on leaving prison and who have committed serious offences, usually violent crimes, for which they received long sentences. The other group are those ex-offenders, who tend to be male and aged under 30, who frequently commit low level crime, such as drug dealing, theft from shops and burglary and who are often caught and often imprisoned for short periods of time. In essence, it is this latter group of repeat, low level offenders serving multiple short-term sentences, that are at higher risk of sustained and recurrent homelessness.

More resources are focused on serious ex-offenders when they leave prison than is the case for lower level offenders. Most leave prison on probation, meaning there

is dedicated probation officer support[24] and support services including specialist supported housing and floating support services and a planned process of resettlement. For former offenders who might represent a risk to the public on release, multidisciplinary teams are in place to ensure they are housed and their behaviour is monitored. Research evidence indicates that there is often reliance on private rented sector housing to prevent and reduce homelessness, because there is often high demand for social housing and some social landlords may be reluctant to house ex-offenders, but that with sufficient resources in place and with private landlords having the reassurance that a former offender has ongoing support in place, suitable housing can be found[270].

Economic and social integration is also seen as integral to reducing rates of reoffending among serious ex-offenders and probation and support services actively seek to encourage and support this group into paid work, education, training and community life. Challenges exist in relation to employer and further education establishment's attitudes to former offenders, but again, with the reassurance that support is available both to an individual and to the organisations working with that individual, successes in these fields can be achieved. The core to success appears to be intensive, flexible support that offers both the necessary help to a serious ex-offender needed to avoid homelessness and which can also engage, reassure and support the services and opportunities that individual needs. In this sense, successful British practice with serious ex-offenders at risk of homelessness centres as much on supporting and reassuring the educational establishments, employers and landlords that an ex-offender needs to engage with, as it does on supporting that individual[271].

Support services are less established for repeat offenders committing low level crimes. Prison sentences are relatively short, but often of sufficient length to mean that existing housing is lost. Repeated conviction and imprisonment during the course of one year can make it problematic to establish sustainable housing, essentially because this group can often find themselves back in prison before a resettlement and tenancy sustainment process is fully underway. There is also less time to plan for counteracting homelessness while an individual is in prison, because they are serving relatively short sentences. Repeat offending can be closely associated with problematic drug use, sustained worklessness, high support needs and experience of homelessness[272]. Experiments have been conducted with low intensity support services that provide short-term interventions to prevent homelessness among repeat low level offenders, this involves engagement while still in prison, being 'met at the gate' on release and guided into suitable housing. However, research evidence suggests that the same multidisciplinary, flexible and individualised service models used for more serious offenders would probably be the more effective response to the housing and other support needs which this group have[273].

Key lessons for Finland centre on differential levels of support producing uneven outcomes for rates of homelessness among ex-offenders. Ex-offenders who have served longer sentences for more serious crimes can get access to more extensive support, which can deliver better outcomes. There seems to be no evidence to suggest that taking the same approach with low-level, repeat, offenders would not also have positive results. However, resources available for low level offenders have historically been restricted and this has produced a two-tier approach to potential homelessness among ex-offenders with different outcomes. All services for ex-offenders have been cut significantly since 2010 and this may in time produce worse outcomes in preventing homelessness ex-offenders than had previously been achieved.

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[24] In England, some probation services have been replaced with Community Rehabilitation Companies (CRCs), which are for-profit companies contracted to provide probation services, and probation services are now sometimes referred to as offender management services.

Homelessness Among Ex-Offenders in the USA

Single adults who experience homelessness come from a variety of prior living arrangements, but among those who are *not* coming from a domicile of their own, or with friends or family, fully 40% are coming a correctional facility (jail or prison).[274] This makes offenders the largest subpopulation of people entering homelessness from any institutional setting. Broadly conceived, there are two groups within the correctional population who intersect with homeless.[275] First, among people leaving relatively long-term confinement for felonies in state or federal prison (incarceration episodes of two years or more), there is a population which stays in shelter upon their immediate discharge. They tend to stay homeless relatively briefly, or for less than a month, as they make arrangements with friends or family, and with employers or other potential community supports. A second group cycles between local jails and homelessness, usually arrested for petty offenses associated with their homelessness status. This group is not likely to engage in serious crime, nor to face long-term incarceration. They are most typically thought of as homeless than as offenders, but they may be numerically greater than the aforementioned offender population, and pose greater costs to society. In either case, interventions targeting these populations are trying various approaches to critical time intervention (CTI)[276] and PSH,[277] especially among offenders with behavioural health disorders and whose CTI could be paid for by health insurance. Research in this area is on-going.

Conclusions

In Finland there are NGOs, especially the Krits and the Silta-foundations, with traditions of long-term development in work approaches and building networks both with prisons and social as well as health care services. They are both active Paavo- agents providing housing services for ex-offenders. Silta-foundation has been successfully leasing flats from private landlords and sub-letting them to their clients as well as giving support to the residents. After a successful housing period (about one year) residents will move permanently to social housing. The challenge is the continuity and flexibility of support after the fixed-time period.

Housing solutions for ex-prisoners are usually built as pathways from flats with intensive support into social housing with permanent tenancy. A network (VAT-network) to support housing for the released prisoners has been set up by 11 NGOs arranging support for people released from prison. The network is co-ordinated by NGO Krits (the only organization in Finland just for clients with criminal backgrounds). VAT-network[278] helps to model pathways to housing and the rehabilitation of released prisoners and shares good practices. The modelling is based on rehabilitation started in prison rehabilitative activities, together with the strengthening of housing skills and the concrete planning of housing. The most effective way is to start housing skills training, assessment of service needs and planning the release well before releasing with the network. The modelling includes supporting a living with cross-sectoral activities for ex-offenders who need support not only for housing but also for employment, income, education, and social relations. This means a comprehensive, intensive and long-term (several months or years) support for social inclusion. From the clients this requires the capability to receive services and to commit to co-operate with professionals and peer support representatives. These working models are very similar with activities which are in Sweden promoted as good practices.

For released prisoners who are committed to a substance free life, substance free supported housing is available in housing drug-free housing communities. This involves a continuum of progressive activities that support social integration and

prevents homelessness, such as courses that take place in the prison on 'everyday life skills' and the special co-operation with vocational schools. Rehabilitation started during imprisonment does not always carry on after the release. The ability to cope is better for those who are committed to abstinence, and for those who are in supported housing aimed at released prisoners. Individual support, flexible access and employees who are familiar with the criminal sanction sector, the clients' status in society and their way of life, contribute to overcoming the difficulties.[279]

During the recent years the Criminal Sanctions Agency has tried to ensure that fewer and fewer prisoners would be released directly from closed institutions. A gradual releasing process, which is currently being developed, means a transition from a closed prison to an open institution and probation with rehabilitative activities. This will offer potential for long-term housing social work as part of a planned releasing process aiming at social integration. The process is carried out by the Criminal Sanctions Agency, local authorities, third sector organizations, as well as peer organizations. Prisoners getting released without an opportunity to gradual release (open prison, probation) are those who are deeply drug addicted living in a vicious circle of drugs and crimes. As a result of the conversion of shelters ex-prisoners with multiple problems and severe substance abuse have an alternative of HF-housing units that function, but there could be long queues. Demanding challenge for HF -housing units is to manage with the elements of criminal subculture: some residents may be forced to drug dealing because of debts and intimidations.[280]

A topical task is to attach special expertise of substance abuse and mental health work as part of the work in the housing units and a professional network. Moreover, including the housing units in the application of a long-term rehabilitation models for released prisoners, also for the most underprivileged group of customers is part of the task. Long-term pathways to housing are urgently needed for the most underprivileged group released from prison. The pathways may take them back to prison, but in which the housing is secured and the opportunity for lifelong, continuous, low-threshold rehabilitative activities are available.

Released from prison, homeless women have been left marginalized in many areas. They are a small, negatively stigmatized subgroup of a small subgroup of the homeless. Housing social work with them requires expertise on traumatization, violence, substance abuse and mental health problems, and child protection. Women specific services for women in the margins of the society are undeveloped in Finland. The next Paavo-programme, developing the housing services for women, should be one of the core themes, not forgetting women who have criminal background.

9   Recommendations

This final chapter of the report presents a discussion of the findings and a range of recommendations. The chapter focuses on three main areas, beginning with housing markets and strategies for enhancing access to affordable housing supply as a means of counteracting homelessness. This section explores both how improving access to affordable housing can aid homelessness prevention and the ways in which homelessness associated with inadequate supply of affordable housing might be reduced. The following section explores the nature of support work, including social work, case management and practical, housing related, support that is required to both prevent and reduce homelessness and potential homelessness that is associated with high support needs. The final section of the chapter explores the enhancement of the evidence base on homelessness services and the scope for focused research to enhance service outcomes and the effectiveness of the homelessness strategy.

The Recommendations in Context

The achievements of Finland in reducing and preventing homelessness through Paavo 1 and Paavo 2 are considerable. In particular, the sustained reduction in long-term homelessness that has been achieved at national level has shown the results that can be delivered through a carefully planned, collaborative strategy and that even the most extreme and entrenched forms of homelessness can be successfully tackled.

Homelessness is a dynamic social problem. A homeless population can be greatly reduced and the risks of homelessness significantly lessened, but the mixtures of structural factors and individual needs, characteristics and experiences that can cause homelessness remain in any society. Economic and social factors, the operation of welfare, health and social work systems and individual needs, characteristics and experiences can and will continue to generate potential homelessness, which if it is not prevented, may become sustained for at least some individuals. Efforts to reduce and prevent homelessness cannot therefore be reduced or removed without the ultimate consequence of more homelessness being the result. Reductions in affordable housing supply, cuts or failures within health and care systems, for example in mental health and psychiatric services, the loss of some forms of employment due to structural changes in economies and limitations within drugs policy can, along with a wide range of other factors, all directly or indirectly influence homelessness levels.

Alongside this dynamism, there is a fluidity in homelessness, as social and economic change and alterations in mainstream culture over time create new contexts in which new forms of homelessness arise, or existing forms of homelessness become more common. Homelessness is never a fixed social problem, it is always, at least potentially, being added to as people are constantly exposed to the various combinations of risk factors that may result in homelessness, it is also never fixed because the nature of homelessness itself can change over time[281].

During 2013, homelessness among immigrants in Finland accounted for 23 per cent of total homelessness and more than 60 per cent of homeless families had an immigrant background. Youth homelessness is also strongly associated with the immigrant population. It is this kind of shift in the composition of the homeless population, in this case a relative reduction in native Finns becoming homeless and an increase in migrant homelessness, which can make homelessness a fluid social problem, requiring flexible and innovative policy responses.

There are some parallels between Paavo 1 and 2 and the USA's development of strategic responses to 'chronic' homelessness, US policy is less coordinated and the effects have been more uneven, while Sweden lacks a national strategy and UK strategies are fragmented. In many senses, the achievements of Paavo 1 and 2 surpass the efforts of Sweden, the UK and USA in tackling homelessness.

Not all forms of homelessness have been fully addressed in Finland and there is more work to be done. While the Housing First led strategy was highly successful in reducing long-term homelessness, a greater understanding of the reasons why it did not work for a minority of long-term homeless people and an exploration of alternative approaches, including scattered housing services, would be useful. There is also scope to further explore new and alternative service models in tackling youth homelessness and homelessness among people leaving institutions, such as former offenders leaving prison.

Access to Affordable Housing

The Relationships between Social Housing and Homelessness

The relationship between homelessness and social housing supply is not straightforward. Social housing has multiple functions, ranging from addressing general housing need, urban regeneration, providing housing for low income working households and for keyworkers, like nurses, who would otherwise struggle to afford to live in urban areas. Homelessness is often one demand of many made on social housing[282].

Finland, in contrast to some other countries, continues to build new social housing on a relatively large scale. Consideration of the use of the social rented sector to prevent and reduce homelessness remains important in the Finnish context. The Y-Foundation is a major provider of social housing, which it both purchases and develops, with a total of 6,789 apartments in 52 cities and municipalities, most of which are sub-let to municipalities or other partner agencies. Alongside providing ordinary housing for rent, the Y-Foundation also develops supported housing services.

Affordable Housing

Social Housing

Social housing can be used to prevent and reduce homelessness if it can be rapidly and easily accessed by people facing homelessness. Existing strategy and service delivery in Finland already closely reflects good practice from elsewhere, but there are some points that are worth emphasising.

- Support may be necessary for homeless households who are seeking social housing. Homeless and potentially homeless populations may have low levels of educational attainment and poor self-esteem and may find social housing allocation systems difficult to navigate. Web-based social housing allocation systems may be particularly challenging for some homeless populations[283]. Homelessness and prevention services already have a role in assisting potentially homeless people with these applications in Finland, but there may be scope to enhance and clarify allocation systems. Ensuring information about access to social housing is widely disseminated in highly accessible ways is equally important for homelessness prevention and reduction.
- Partnership working between social landlords and preventative services is essential. The concerns of a social landlord are quite simple, there is a need to ensure rent is paid, that damage to housing is avoided and that community relationships are positive, both within social housing itself and between social tenants and any surrounding owner-occupiers and private rented sector tenants. Both unfamiliarity in working with high need people at risk of homelessness and the lack of an appropriate skillset can be a deterrent for social landlords and they may not have the resources to recruit specialist support staff themselves. If preventative and support services can offer guarantees that any housing management issues and community relationship issues will be appropriately managed, this overcomes a potential barrier to social housing both as a means of preventing and reducing homelessness.
- Preventative services can also work alongside social landlords when existing social rented tenants start to be at risk of homelessness. Again, there is well-established existing Finnish practice in managing issues such as rent arrears or nuisance behaviour to prevent someone from being evicted from social housing. One area that is worth exploring is whether access to preventative services for social rented tenants can be enhanced, for example in automatically triggering involvement by preventative services as soon as a tenant goes into rent arrears or faces potential eviction for another reason. Joint working can potentially prevent homelessness when it is used in this way, with social landlords proactively stopping homelessness by bringing in preventative services.
- Interventions designed to enhance access to social housing cannot counteract the effects of overall shortages in social housing supply. Enhancements to access to social housing to prevent and reduce actual experiences of homelessness are ultimately limited in effectiveness if sufficient housing supply is not available.

The Private Rented Sector

The private rented sector is the main alternative to social housing in providing affordable housing to both prevent and reduce homelessness. It is attractive as part of a policy response to homelessness because there is no public subsidy required to build it. The use of the private rented sector is potentially less attractive in contexts where public subsidy may be required to encourage investment in the private rented sector because it is difficult for landlords to make a clear profit and it is also a less attractive policy option in situations of high housing market stress, where even the lower end of the private rented sector is expensive and potentially homeless households may often need significant housing subsidies if they are to afford the rent. In some contexts, relative insecurity of tenure compared to social housing and the relatively poorer standards of some private rented housing are also concerns in employing this tenure to prevent homelessness. Key lessons from elsewhere again often reflect existing Finnish practice, but can be described as follows:

- The key to involving private rented sector landlords in providing housing to potentially homeless people, particularly when those people have high support needs, is to offer support if any housing management issues arise. Some US Housing First services effectively offer a full housing management service, with the tenancy held by the Housing First service, which deals with any issues that may arise and guarantees that rent will be paid. The British local lettings agency model is another example, again offering a full housing management service to private landlords (for which a small fee is paid, making the agency self-financing) and guaranteeing their rent284. Similar services led by NGOs are, again, also operating in Finland, sometimes focusing on specific groups such as former offenders with some promising early results.
- Working with private landlords should involve ensuring that the housing they are providing is adequate and suitable for a potentially homeless person or household. Private sector Landlords should be expected to maintain a basic quality standard and rents at a level that is affordable. This can be negotiated as part of a package that guarantees rent and provides housing management services.
- Enhancing access to the private rented sector to prevent homelessness cannot overcome a context where insufficient, suitable private rented housing is available. In considering the use of the private rented sector, it is important to examine the submarkets within the sector, as only a small proportion of the tenure may be actually suitable for, and available to, potentially homeless people.
- Stopping evictions that could lead to homelessness is a key role of homelessness prevention services in Finland. It is important that awareness of these services is high; both among private rented sector tenants and landlords, and that they are available over as much of Finland as possible.

Alternative forms of Affordable Housing

There is a growing trend to employ forms of accommodation that are not actually housing as a 'solution' to homelessness. This can involve conversions of sites and re-use of material that was not originally intended to be used as a form of accommodation. There are many examples of this type of approach, ranging from the use of converted shipping containers[285], basic 'flat-pack' structures that can be cheaply made and quickly assembled[286], but also tents, self-build temporary structures and various other approaches that might otherwise be employed to accommodate refugees escaping natural disasters, war or famine[287]. There are some plans by the National Youth housing organisation to employ shipping containers as a form of accommodation for homelessness young people in Finland. There may also be scope to use this kind of approach to temporarily house undocumented migrants who have become homeless.

The advantages of these kinds of approaches centre on low costs and rapid deployment, assuming that land can be found on which to establish them. The disadvantages centre on not providing an actual housing solution for homeless people, but instead perpetuating a situation in which their living conditions are different from and also perhaps inferior to, the remainder of society. Residence in these forms of accommodation also potentially stigmatises homeless people, marking them as different from the rest of the population. This approach to meeting housing need, beyond providing short-term emergency accommodation, is therefore not recommended.

Other forms of affordable housing include models such as low cost home ownership, in which a partial share of a home is bought by the household living in it, while an affordable rent is also paid for the share of the home they have not bought. For example, someone might pay 40% of the equity value of a home and then effectively 'rent' the remaining 60%, gaining from any increase in the value of their share should they choose to move. This model may have some utility for formerly and potentially homeless people who are able to secure and sustained paid work at a sufficient income level to ensure this was an affordable option, but homeless and potentially people may face significant barriers to paid work, meaning it may not be a realistic option for many homeless people.

Support Services

Homelessness Prevention

The key messages around prevention of homelessness centre on flexibility and on comprehensiveness of service responses. What an individual person or household requires to prevent them from being homeless can range from basic housing advice through to a package of care and support that is specifically designed for their needs. Homelessness may also be prevented by mediation, positively intervening in situations where a young person might become homeless because of relationship breakdown with their family, when it is appropriate to do so. Homelessness prevention work in Finland is well advanced, reflecting the best practice found elsewhere, but some general points can be made:

- It is strategically essential to minimise the risk that a few of the people joining the homeless population each week will remain homeless and eventually form the core of a long-term, high need homeless population288. There is clear evidence from North America, and some evidence from elsewhere that the long-term homelessness damages the citizens who experience it and has disproportionately high financial costs for society. Identification of potentially long-term homeless people should be at the core of preventative strategy, including "at risk" groups such as young people with mental health problems and problematic drug use and socially marginalised migrant populations. There are arguments for exploring the use of Housing First and other models designed for resettlement, such as Critical Time Intervention, in modified forms as means of homelessness prevention. Some British mobile support services for vulnerable and high need homeless people, for example, work both with people who are homeless and with those who have been identified as potentially homeless.

- There is a clear case for providing an array of preventative services targeted on specific at-risk groups, including vulnerable young people, former offenders, people leaving institutional care with mental health problems, people with problematic drug/alcohol use and women at risk of gender based/domestic violence. However, generic services, providing advice and support in accessing affordable housing, help with threatened eviction and with rent arrears and debt can clearly benefit all potentially homeless households, including those without specific or high support needs.

- Experience within Finland is that support provided by 'experts by experience', i.e. individuals with similar lived experience to the people that they are supporting, can be particularly effective in homelessness prevention. Professional support can also be strengthened by peer support. Elsewhere, for example in British experience of providing support to potentially homeless people who are leaving prison, services using peer support have also been effective.

- Further explorations of risks to housing sustainment among homeless people could be beneficial. One key area in Sweden and also the UK is the emergence of high rates of debt and rent/housing costs that are unsustainable, even where a household contains one or more people in work. Indebtedness can be an issue in both countries, which have experienced a rise in short-term loans, in the UK at often extremely high interest, which can again represent a risk to housing sustainment. In Sweden, debt can prove a barrier to signing a lease for housing. Ensuring that debt, housing costs that are unsustainable relative to income and that people have sufficient budgeting skills is an important

component of homelessness prevention. Homelessness prevention in Finland recognises and manages these risks, but ensuring coordination with debt advice and support agencies could further enhance homelessness prevention and help households avoid arrears.

- Finnish practice in homelessness prevention, as noted, follows good practice and models of proven effectiveness that have been employed in other contexts. In many senses, the key challenges for Finland centre on ensuring that these services are as comprehensive and as widely available as is feasible. This said there might still be scope to enhance existing service responses, for example by emphasising the use of peer support.

Homelessness Reduction

Globally, the evidence base on what makes services effective in stopping long-term homelessness associated with high support needs is moving towards a common set of findings across a wide range of contexts and service models. These findings can be broadly summarised as follows:

- The evidence suggests that long-term homelessness cannot, in the majority of cases, be addressed through services that prioritise modification of individual behaviour, i.e. permanent abstinence from drugs and alcohol, compliance with treatment for mental health problems and passing a series of tests that are intended to make an individual 'housing ready' (able to live independently). The idea that most long-term homeless people can be trained to live independently in their own homes in an institutional setting appears to be fundamentally flawed. The successes of Finland in reducing long-term homelessness is one of the most important pieces of evidence showing that better alternatives exist to services that attempt to end long-term homelessness simply through behavioural modification.
- There is clear evidence that homelessness services that are housing-led and operate on the basis that having a home is a basic human right are more effective in ending long-term homelessness. These services start by ensuring that a long-term homeless person is housed in their own home, over which they exercise the same controls as any other citizen can over their own home and giving them the same housing rights as any other citizen. Support is then provided to enable that housing to be sustained, ensuring the formerly long-term homeless person has control over what happens to them, what support they receive and, within a harm reduction framework, whether or not they stop using drugs and alcohol. Housing First services, both within Finland and globally, fall within this category, but there are other approaches to ending long-term homelessness with the same features.
- Alongside these core features, there is evidence that services that are holistic and highly flexible, able to either directly respond to almost any practical, emotional or support need, or to arrange access to appropriate support via case management, are likely to be more effective. For some groups, where support needs may be ongoing or likely to reoccur, there is a case for services being open-ended, offering support for as long as is needed. Some service models have the option of becoming dormant, enabling formerly or potentially long-term homeless people to live entirely independently if they are able to, but capable of being reactivated if necessary. For some groups of long-term homeless people, support needs may not always be ongoing, in which case there may be scope to explore use of shorter-term service models.

- There is a case for continuing to explore use of lower intensity, housing-led support services, particularly for testing new approaches and also for looking at other service models, such as Critical Time Intervention, that may also be effective in ending long-term homelessness. Additionally, there is scope to explore using Housing First in alternative forms, building on ongoing developments in scattered housing versions of Housing First. Again, Finland already has advanced services for groups like homeless ex-offenders with high support needs, but there may be scope for further experimentation, for example in expanding the role of Housing First services into prevention.

- The successes of Finland in using a communal or congregate model of Housing First need to be acknowledged and the potential for this model and similar, congregate, approaches in tackling homelessness can be further explored. For example, the use of congregate models might be more appropriate and effective for very high need individuals than scattered housing based services, such as older men with long-term experience of homelessness. Equally, some individuals may prefer to live in communal settings because they may function as sources of social support based around shared experience and the reassurance of support being on-site. There is also the potential to develop hybrid service models, for example 'core and cluster' services in which supported, congregate, housing also acts as a hub from which mobile support services are delivered to formerly homeless people living in surrounding scattered housing.

- Individual choice in how someone lives their life, what support they receive and where they live, may be fundamental to sustaining and building upon the achievements of the Paavo 1 and 2. A key lesson from Housing First, both within Finland and elsewhere, is that, when presented with this level of choice and control, a clear majority of homeless people with high needs and sustained or repeated experience of homelessness do *not* make choices that cause further deterioration in their well-being or situation. Naturally, the choices available to formerly and potentially homeless people must be constrained by the resources that are available, but being able to opt between scattered and communal housing and between different types of support appears to be very important in preventing and reducing homelessness. Choices must also not be constrained in another sense, which is that while the evidence base raises major questions about the effectiveness of behavioural modification services, these services can and do provide lasting solutions to long-term homelessness. If someone wants to, for example, try to tackle their homelessness through an abstinence based service, there is a case for making that option available. It is also important not to stereotype behavioural modification services as necessarily being harsh, judgemental or as environments that homeless people would always wish to avoid, because they exist in many different forms289. A flexible strategy, incorporating existing achievements, reflecting the evidence on the effectiveness of housing-led and Housing First approaches, but which is prepared to experiment and provide a range of alternative services, may be the best way to continue the success achieved by Paavo 1 and 2.

- Awareness of, and preparedness for, changes in the nature of the population at risk of long-term and recurrent homelessness is also of central importance. One example of this is how the characteristics of long-term homeless people in Finland may already be changing, with a reduction in the numbers of older men presenting with problematic use of alcohol and increases in people with problematic use of drugs. Drug-using populations may be younger, more likely to be women, and may require different forms of support from those offered, for example, by the communal Housing First services that have been successful in reducing existing, long-term, homelessness.

Enhancing the Evidence Base

There is potential to enhance the existing evidence base on homelessness services and strategies in Finland. It is important to distinguish between *process evaluation*, i.e. whether or not the strategy was delivered as intended and *impact evaluation* that assesses whether or not the strategy has been effective. Alongside this, the extent to which a homelessness strategy has delivered unintended consequences, which might be either positive or negative, must also be assessed. Allowance for external contextual factors, which may have limited or enhanced the extent to which a strategy was effective is also important in conducting an evaluation. Reviews of impacts, context and processes all flow into an assessment of the costs and benefits of a homelessness strategy[290].

In some ways, the evaluations of Paavo 1 and Paavo 2, both conducted within Finland and via the 2010 Peer Review[291] are not entirely complete. At a basic level, it is clear that in terms of process, Paavo 1 and 2 delivered what they were supposed to and that the core objective, reduction of long-term homelessness, was achieved. However, there may be scope for some further analysis, for example systematic comparison of the different models of Housing First that are in existence, including scattered housing and the different examples of communal Housing First.

Moving Beyond Housing Sustainment

Alongside exploring issues of housing sustainment, in which Finnish Housing First services all appear to be successful, it would be interesting to assess whether and to what extent the potentially negative effects of long-term homelessness are being addressed. For example, two key areas of concern about what happens to homeless people with high support needs after they are rehoused are the extent to which they are able to achieve social integration and the extent to which they see improvements in health and well-being[292].

Social integration includes friendships, partners and family relationships, alongside being part of a community and, in a broad sense, politically engaged with wider society in the same way as other citizens. For some groups, such as young people who experience homelessness, social integration should in many cases mean entering education, training and eventually paid work.

Health and well-being should, at least in theory, often stabilize and possibly improve as a result of homelessness coming to an end, because of the positive effects of having one's own home on well-being and, also, as a result of becoming more socially integrated. In some cases, this will not be possible, because of life limiting illness, disability and degenerative conditions, but for many formerly homeless people, there should be an expectation that health and well-being will improve. Much of what Housing First, for example, is designed to achieve, centres on developing a sense of ontological security, a feeling that life is safe, secure and predictable which is fundamentally linked to having a home and which, in the Housing First model, is intended to act as a catalyst for enhancements to health, well-being and social integration. Housing sustainment, in itself, might not necessarily be a satisfactory as a sole outcome measure, because while housed, someone with experience of long-term homelessness might, for example, be socially marginalised. In this area, ethnographic and longitudinal qualitative research, which documents and explores the experiences of people who have been homeless in terms of their social integration and ontological security, may be particularly valuable[293].

If and when shortfalls are identified in areas such as social integration or health and well-being, there will be a need to test services designed to counteract any such prob-

lems. This might in some cases result in modifications to existing services, or to new approaches, both of which should be evaluated before they are used on a larger scale.

There is also scope to draw on lessons from related research and services, for example the literature on deinstitutionalisation, including resettlement from psychiatric hospitals and the management of severe mental illness in the community, which is relevant to some long-term and potentially long-term homeless people. Work related to recovery from problematic drug or alcohol use, on returning to society following imprisonment and, in relation to potentially homeless and homeless young people, management of the transition from the care system to adult life is all potentially useful in informing the wider homelessness strategy.

Exploring Alternative Approaches

As noted, there is scope to explore the use of different models of Housing First and also to contrast lower intensity housing-led service models with Housing First approaches in continuing to manage and reduce long-term homelessness. Research employing comparison or control groups (quasi-experimental and experimental studies), testing different models together, could be very useful.

There may also be opportunities to explore why services were not totally successful in ending long-term homelessness, locating long-term homeless people whose homelessness was not ended by Housing First services and determining why this was the case. Exploring these kinds of questions links into a wider analysis of whether some forms of service may better suit specific groups of homeless people more than others. For example, people who found communal Housing First to be a difficult environment might be better suited to scattered housing approaches. Beyond this, there is scope to explore modification of service models for particular forms of homelessness, such as youth homelessness and among people leaving institutions such as former offenders. For example, research might explore if scattered site Housing First can work effectively for young people experiencing homelessness, examining the form it should take and the range of services it should provide.

As noted above, there is scope to explore the possible use of Housing First and other housing-led approaches as preventative services. Such services may be particularly effective when someone faces a risk of long term or repeated homelessness associated with high and complex support needs, but will again need to be tested.

Piloting will be essential if any of the ideas or service models from Sweden, the UK and USA, or from other countries that are discussed in this report were to be considered for implementation. While in some cases the modifications to existing approaches might only be slight, it will still be important to test their applicability to the Finnish context.

Assessing Cost Effectiveness

Monitoring shifts in undesirable outcomes, both in the individual sense and in terms of the financial costs to society is important. It is, however, problematic to reduce this to considering whether, for example, the costs of long-term homelessness to the criminal justice system or to emergency medical services have reduced. This is because these services have fixed costs that are only very marginally influenced by long-term homelessness. Long-term homeless people might extensively over-use accident and emergency in a hospital, but even if they are moved into a situation where they no longer need to do that and cease to visit altogether, they only represent a tiny fraction of total activity, which means there is no actual cash saving for that accident and emergency service. There are not enough long-term homeless people over-using accident and emergency to mean that, if they stopped using it altogether, there could,

for example, be one less doctor or nurse. An alternative way of exploring costs and benefits is to look at and explore 'lifetime' costs, for example by looking at what an individual experiencing long-term homelessness has cost society (in financial terms) over time and looking at whether and to what extent homelessness services have reduced or stopped those costs. Where savings have been made, this can form the basis of an extrapolation, considering what the person would have cost if they were homeless for another five, ten or twenty years for example, tested against the costs of, for example, providing them with a Housing First service.

A very considerable amount can be achieved through merging of administrative datasets, combining for example health records, data on service outcomes from homelessness services, welfare system and tax records. This can be pursued more easily in some contexts, such as the USA, than in others, such as the UK, where data protection laws and requirements for consent prohibit merging of the major administrative data sets. It may even be possible, with standardised data collection by homelessness services modification of the questions covered by administrative data sets, to create mechanisms by which to monitor all or most of the outcomes that are of interest longitudinally. However, detailed evaluations may still sometimes be required to assess the effectiveness of services and strategies in detail, as well as when new service models are piloted.

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DOCUMENTATION PAGE

KUVAILULEHTI

Tiivistelmä	Arvioinnin kohteena oli vuosien 2008–2011 ja 2012–2015 aikana toteutettu pitkäaikaisasunnottomuuden vähentämisohjelmakokonaisuus, Paavo I ja Paavo II. Arvioinnissa keskityttiin ohjelmakokonaisuuteen ja sen eri osa-alueisiin näkökulmana asunto ensin -mallin toteuttaminen suomalaisessa yhteiskunnassa. Arviointiraportissa on kuvattu Iso-Britannian, Ruotsin ja USA:n asunnottomuustyötä keskittyen erityisesti toimintakäytäntöihin, joita voidaan mahdollisesti hyödyntää suomalaisessa asunnottomuustyössä. Arviointi perustuu arviointiryhmää varten koottuun taustaaineistoon sekä kahteen kenttävierailuun Helsingissä (28.–30.4. ja 15.–18.9.2014). Tämän lisäksi tutkijat ovat hyödyntäneet kukin oman maansa asunnottomuuteen liittyviä aineistoja sekä kansainvälistä asunnottomuustutkimusta
	Yleisarviona todetaan, että ohjelman päätavoite, pitkäaikaisasunnottomuuden pysyvä väheneminen kansallisella tasolla, on saavutettu huolellisesti suunnitellun ja kattavan yhteistyöstrategian avulla. Asunto ensin -periaatteen mukainen ohjelmatyö on osoitus siitä, että myös kaikkein vaikeimmassa asemassa oleville pitkäaikaisasunnottomille pystytään turvaamaan pysyvä asuminen riittävän ja oikein kohdennetun tuen avulla. Valtion, kuntien ja järjestöjen ohjelmaan kohdentama merkittävä taloudellinen panostus sekä valtakunnallisen ja paikallisen yhteistyön pitkäjänteisyys ja laajaalaisuus on mahdollistanut asumisen ja palvelujen kehittämisen integroinnin niin yleisellä tasolla kuin eri kohderyhmien tarpeet huomioon ottaen.
	Ohjelmatoiminnan onnistuneisuudesta huolimatta on syytä muistaa, että asunnottomuuden väheneminen tai lisääntyminen on sidoksissa paitsi asunnottomuuspolitiikkaan myös muihin yhteiskuntapolitiikassa tapahtuviin muutoksiin ja kehityskulkuihin. Lisäksi asunnottomuus on alati muuttuva ilmiö, mistä ajankohtaisena haasteena voi mainita maahanmuuttajataustaisten asunnottomien määrän huomattavan kasvun. Asunnottomuustyö, niin asuntojen tarjonnan kuin asumiseen ja asunnottomuuden ennalta ehkäisyyn kohdentuvan tuen osalta, on jatkuvaa kehittämistä vaativa yhteiskuntapolitiikan osa-alue.

As an overall assessment, it can be stated that the main goal of the programme, the permanent reduction of long-term homelessness on a national level, has been reached with the help of a carefully planned, comprehensive cooperation strategy. Programme work in accordance with the Housing First principle is proof of the fact that with sufficient and correctly allocated support, permanent housing can be guaranteed even for the long-term homeless in the most difficult position. The significant financial investment allocated to the programme by municipalities, organisations and the state as well as the extensive, long-term national and local cooperation have made it possible to integrate the development of housing and services both on a general level and also by taking the needs of different target groups into account. However, despite the success of the programme's activities, it should not be forgotten that any increase or decrease in homelessness is tied not only to homelessness policy, but also to other changes and developments in social policy.

Ympäristöministeriö
Miljöministeriet
Ministry of the Environment

ara
The Housing Finance and
Development Centre of Finland