

Chapter VI

Housing First & Homelessness Challenges: A Focus Group with international experts

Maria Vargas-Moniz*APPSYCI (Applied Psychology Research Center Capabilities and Inclusion), ISPA- Instituto Universitário***Abstract**

Homelessness is becoming an expressed concern on the political realm expressed by the different political sectors, governmental bodies in the European Union and across other territories. Critical events related with Homelessness (e.g. deaths, violence both as victims and perpetrators, children being born on the streets) with variations, receive some attention from some media. However, we are experiencing a somewhat contradictory situation, on one hand, governments express concern with the phenomenon, support the emergence and the consolidation of national strategies, allocate programmatic resources (budget) to provide relief responses and the general public is concerned with those affected by the fact that some people despite the age, gender, ethnical background, health or mental health status remain for variant periods on the streets of the cities with a larger incidence on larger metropolis; on the other hand effective change in societal response is low and the situation essentially prevails. Within the HOME_EU: Reversing Homelessness in Europe Project (H2020 GA/ 726997), we were able to gather experts from the United States Marybeth Shinn (University of Vanderbilt), Sam Tsemberis (Pathways to Housing), Ken Matton (University of Illinois at UrbanaChampaign), Paul Toro (Wayne State University), and Europe, Ronni Greenwood (University of Limerick), and José Ornelas, ISPA – Instituto Universitário in Padova (June, 2018) around the core questions: a) why is Homelessness is a prevailing condition; and b) Why are we not being able to solve the problem? (We know about solutions, and effective responses.)

The debate pointed that the major challenges include the variations of interest and the lack of consistent and continued efforts to address homelessness as a political priority; the shortage of Housing policies on availability and affordability; as a positive note the renovated national strategies may represent new opportunities, mostly advanced and pressed by civic and grass-roots movements, and some homeless in some specific cohorts (e.g. the Veterans in the United States have effectively reduced. Major research studies (e.g. At Home/ Chez Soi in Canada, Chez Soi d'Abord in France, and now the HOME_EU with eight European Countries) contribute to the advancement of Housing First as a privileged model to transform Homelessness into an exceptional social emergency.

Keywords

Homelessness; Transformative Change; Housing First Date:

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Overview and Purpose

Homelessness is currently a concern, it is an expressed concern by the political bodies, the EU organisms, and across other territories; it is a concern on the political realm, but has also received attention from some media. We are currently living a somewhat contradictory situation; the governments express concern with the phenomenon of homelessness, support the emergence and the consolidation of many national strategies and allocate programmatic resources (budget) to provide responses; it has caught the attention of the public, but it is a prevailing situation.

MJVM: Moving directly to our first question (open to all participants): Why do you think that homelessness is a prevailing condition; why are we not solving the problem?

P.T.: First of all, I think many of us, can talk about this question but focused on the US, and that's it! I have conducted a little number of studies in the Europe, but most of what I know is about the US. We have done a study on Media coverage, professional interest, political interest in terms of funding; I have tried to somewhat establish a kind of connection among these different trends in the last couple decades.

The real peak coverage in the US, was in the late 80's early 90's, and it has dropped since then; it kind of levelled off, we came from a time where you get a lot of coverage in the holiday time, and winter, and Christmas and Thanksgiving, but the overall trend is kind of flat.

Funding, on the other hand, we have had the McKinney Act¹, caused one big piece of funding, and just kept rising over time. And even today it seems that is becoming a heavy budget, and why is that? Media coverage is one thing; consistent media coverage, especially in the 80's and the 90's, but also have various advocacy groups in the US like the National Alliance on homelessness that have been pounding on the doors of Congress, pounding every day; and bringing more research data to support more funding, and they have been successful, because the funding keeps going up.

Of course, there are good data, like Housing First; we can say we know something, and the media takes that, and advocates even more so; why is there a political interest? A lot has to do with the constant pressure. In Europe you have got FEANTSA, and you have got each individual nation; it is a little more complicated. So I guess if you see it on the media, and people are concerned it is because there is at least some continuing pressure of important people and advocacy groups and also researchers.

J. O.: I could say something about the European Union; there are different national strategies, coming from different countries, and many things are happening at the national level, but I think that we are missing European Union strategy about homelessness, and about these alternatives. We don't have, until

¹ The United States National Affordable Housing Act (1990). <https://www.govtrack.us/congress/bills/101/hr1532/summary>

now, a clear European Union strategy, and the commission is interested. For example, very recently... a couple of months ago, they came out with what was designated the European Pillar of Social Rights², and is interesting, that besides the services to the children, the care for homeless are the two specifically mentioned social groups. That fact is meaningful, indicating that we need to resolve this situation in terms of Housing. So, this is like a Bill of Rights for social problems.

We also have a European Union program, designated "Europe 2020"³, and the next period is now being prepared (2020-2030), and these funding mechanisms are explicitly clear in two ideas: we have to deal with deinstitutionalization in general and homelessness and extreme poverty. So, the European Union is concerned but there is no clear political European Union decision on about how to do it. This is why we create these initiatives, to be able to influence our politicians.

S.T.: When I think about our national level, the difference between the US and Canada or the EU is that the conversation about homelessness in the United States does not receive very frequent coverage, but even this little money that's growing is nothing. Is nothing comparing to the money that was taken away. The United States from the Reagan Administration on stopped building public Housing. And now the money is going in is supportive Housing, a little homeless emergency Housing a few million a year. We are talking about they took away many hundreds of millions of dollars, and now they're putting in a little bit of change. So, it is not changing in the US, because there's no investments. And even the media coverage is about individual problems, or about these poor persons, you know, giving food for the Thanks Giving or for Christmas. The conversation in Canada and in the EU is about national affordable Housing strategies, the Canadians just committed to forty billion dollars a building affordable housing. Look at what's happening in Scandinavia, the Norwegian and Finnish, are pretty much near to ending the homelessness because they have invested in the Housing bank, and the Y-Foundation they have building a thousand of units of houses, affordable housing. So, the conversation is not about the poor homeless individual, is about national affordable national Housing strategies. So, in another countries, in the EU, e.g. Ireland, where there has been investments in Shelters vs. Housing and the consequences of that. In Portugal or Spain, and very modest in Italy, what you are doing in Housing First is very grass-roots. Greece that I know well, they are overwhelmed the refugee problem. So there are a kind of confounding phenomena in the EU about what the focus is. But when the focus is clearly about homelessness, especially in northern countries, they have their eye on the real intervention, which is about the affordable Housing strategy, and beneath that there are the people that need support services, like the people in Housing First programs. So, I don't know exactly the concerns but there are national differences, in all these different ways.

Mb.S.: I think we all agree with that. I think the attention in the United States, steady and also is sporadic, and it is not sufficiently focused on affordability. The affordability crisis, in some places is striking and young professionals; we are getting periodic stories now in the newspapers about the Housing and

² European Pillar of Social Rights (2017) https://ec.europa.eu/commission/priorities/deeper-and-fairer-economic-and-monetary-union/european-pillar-social-rights/european-pillar-social-rights-20-principles_en

³ Europe 2020 <http://www.europeanpublichealth.com/governance/european-union/europe-2020-an-overarching-eu-strategy/>

affordability for us, for middle class people. So, that is raising the level of dialogue a little bit. People are connecting that to the problem of homelessness particularly, and we continue to put much more money into subsidizing Housing for rich people either subsidizing Housing for poor people. We do it in different ways, the subsidies for rich people are through the tax structure, where the interest that you pay on your mortgage up to a certain level is deductible from your taxes. That means that a rich person gets a much bigger subsidy for Housing than a poor person. There is no subsidies for renters and they are not nearly enough subsidies to go around for poor people or more formal kinds of subsidies. And it is because the disinvestment in the affordable Housing over the last several decades.

The one bright note in the Unites States is that we had invested in reducing homelessness among veterans, and it shows that it is possible. I think it is important to show that it's possible, because as long as people feel that the poor are always with us, there is nothing we can do; they turn aside they don't want to invest. When you show that through a variety of different strategies, you can bring down the numbers for bad trends; they come down for about half, more than half, for street homelessness, seems we started paying attention to it; that shows we can do it, that's really important.

There has been other research that shows that we can do it for different populations. So, as wonderful as New York Housing study was, it was long ago, and one small study, with the investigator being also the person who developed the program.

At Home Chez Soi⁴, really showed on a massive scale independently five cities in Canada, that we could do it. About studies on family options, if you give family Housing vouchers, and no additional services, it pretty much ends homelessness for families. So, we now have the rigorous evidence that we can do it, and we have seen the investments for bad trends that we can bring rates for homelessness down. So I think were poised to change the argument, but I think we doing succeed in doing it, yet.

S.T.: I would add the French study to that too, that was a randomized control study⁵. That is right, we have the evidence the question is: how do we take the evidence and advocate? I guess that is the challenge.

R.G.: I think that the different national contexts it is importing to have an understanding when advocacy works. In Finland and Norway it worked in a way that it hasn't work as effectively in Ireland. Ireland probably is not as rich, or has the resources to allocate increasing that amount of social Housing, building social Housing. But I think that now Ireland has something that is maybe different, that is slightly different take or a more intense take focused on worth and deservingness of Housing among homeless. So, I think we have a default kind thought, ignoring the problem that being faced every day in Dublin on the streets. For example, we see people on the streets, and then if something happens, someone is burned to death in sleeping bag in Phoenix Park, or freezes to death, than public interest is spiked, pressure increases for a while, and it declines again.

Money is invested in the same systems that have been there for generations, congregate Housing,

⁴ At Home Chez Soi <https://www.mentalhealthcommission.ca/English/document/24376/national-homechez-soi-final-report>

⁵ Tinland A, Fortanier C, Girard V, et al. (2013) Evaluation of the Housing First program in patients with severe mental disorders in France: study protocol for a randomized controlled trial. *Trials*; 14:309. doi:10.1186/1745-6215-14-3

staircase model, and those programs are entrenched and supported by the system and so Housing First has come in, a bit top-down in a country, and is growing bottom-up across the country in smaller places. So, I think it is interesting we can champion; we have the evidence, we champion it, and we come up with different barriers that are normative culture barriers, and we have the figure it out the way to insert ourselves in those conversations in different kinds of ways.

MJVM: Taking on the media or the pressure in terms of advancing or even enforcing new social policies, or innovation on social policies, what would be your advice?

K.M.: I think it is always from the inside and the outside, simultaneously. It is from bottom-up and top-down, the advocacy organizations that we have in champions on the inside. From my awareness of policies in the United States, I would advise multiple approaches, partnerships both with the leading advocacy organizations and everything local, regional, national level, and I would advise partnering, making connections with the entrepreneurs, there is always transitions. With the policy entrepreneurs there are always transitions. You have to be always connecting with the new people taking on the responsibility roles.

I would advise that in addition to providing evidence to the advocacy organizations, they have the most recent useful evidence, they can affect, put pressure from the outside at all levels; I think one always needs to be using one's social networks, using one's time and energy. Finding who is going to champion this from the inside. In the United States we know who the key Senator is or who is the key chair of a committee at the local, state or national level. Also who has entree to them, who do you know that knows someone else, who has entree to them. What intermediary organizations, what professional groups have connections? This means finding all the time, continuously investing time and energy in making the connections on the inside, people who can champion your cause, and when they leave office, who are you connecting with next. And on the outside, who is providing the evidence to the advocacy organizations continually.

I think that on-going, proactive, continual work to connect both people from outside who can put pressure on the people on the inside, then you can champion your cause.

MJVM: The expression "Champion" is not very common, why is the word or this idea of champion important. Could any of you provide a very small definition of what would you understand what a "champion" is?

K.M.: Well, I use it as a verb. Is the person who champions their cause; so, it could just be called, someone with power, who is a policy-maker, who will champion your cause. So, influence your policy-makers who will say: "I am going to use my political capital for this cause. I am going to work across the aisle; I am going to work to what I need to do; that is what I say would be someone who champions the cause. And these people are always changing, so you need to always be finding new people over.

J.O.: I like to comment about the affordable Housing, because what is happening in the EU, and I think in the United States with veterans, and in Canada, e.g. in countries like France, Portugal, Spain, many others; What is happening is not about building affordable Housing, but a considerable amount of money being allocated to rent housing in the private market.

The money allocated is considerable, take the example of France, the President made a statement recently they have allocated a budget for about fifty thousand new houses, but that does not mean

building new houses;

In policy development there is something I find to be interesting, similar to what is happening to the Veterans in the United States, there are not more houses being built for them. In Portugal to provide responses to the homeless, the priority is not building social houses. We are changing the social Housing policy through Housing First.

This is very interesting, because we rent the normal private market and now we are observing a spill-over effect; the same idea is being used for refugees, for domestic violence situations, so Housing First is contributing for a new way of seeing social Housing policy, instead of building big areas concentrating a low coast, we are dispersing people in the cities and villages. I mention countries as Portugal, Spain, Italy and also, France, but probably many other countries, money is being given to local organizations, to pay rents, and not just for Municipalities to build new households. In Portugal we are influencing what was designated the “New Generation of Housing Policy”. There is a governmental investment in rehabilitating old houses, also we have had problems with social Housing in Portugal and in other countries in the European Union because they are concentrated, much degraded, with a lot of social problems, so Housing first is giving a new perspective.

MB.S.: That’s true in the United States too, that for a long time we have not been building Housing, We have been putting Housing into subsidy, whatever money we have into subsidies you can use in the private market, and the Housing economist tell us that’s more cost efficient than actually building. There is some “push back”, particularly in very high rent areas, and on the coast it is common to hear that there is not enough Housing in California. The Housing economists say, “Oh well! If you have the vouchers that will take care of it”. So, there’s some argument about that, but certainly the policy is very much on vouchers. There’s still public housing that’s nothing new is been built

P.T.: One thing I would like to talk about is the capitalization of Housing, this is something that is not just talking about decades but centuries. This has been on-going for a long time, and it has gotten to a point where Housing is not a place for people to live and be happy and have good lives, it’s a commodity; like oil and gold and anything else. It is a big business, real estate, and in the nations where we have perhaps the big capitalization Housing in the United States, United Kingdom, and Canada for example, those are the nations with the high rated lifetime homelessness and other nations of Europe have lower rates, because they haven’t got quite as far in this these countries.

S.T.: The point about the way rent to pay in the United States is calculated, for example, is they have something called the fair market value, right? So they do an assessment of what is the average rent, but there’s a trend now where a lot of small towns and cities where everybody is moving to the city, the demand for housing is very high, so for the same apartment, the rents are going up because it’s market driven, and the vouchers or the government subsidy cannot really compete with young people working in full time jobs and they are willing to pay more and the landlords find that more attractive.

I think that it depends on the Housing market, in any one place, and how much you can do that. You adopt a picture of Social Housing, which I used to have, you know, it’s almost like a cast system, the poor people go there. When look at the Netherlands or Sweden, their social housing is actually very much like their Rental Housing, because it is not managed by profit organizations, but by non-profits, and so

the difference of social housing and Rental Housing not so much, old people, young people, families are living in both types of Housing, so there's less of that feeling about it.

But you know there is also this idea in the social Housing on the plus side, there's a government commitment to build affordable Housing, and one of the things that happens in the United States with the fights over the little bit of money, many of the homeless providers insist, like in California, they just committed 10 billion dollars on this measure "Supportive Housing - Proposition HHH"⁶, and everybody wants to build supportive Housing. Housing that has thirty, fifty or a hundred units with the social workers living in the building. You know, like treatment Housing. And there's a big competition there for that little money, they are not building affordable Housing for everyone, they're building specialized Housing.

J.O.: About the market, for example, in Lisbon Portugal, we started the program with sixteen euros per diem per person, in the normal market, now with all the competitiveness of the Housing market it is twenty euros per person per diem. The Municipality is paying now this difference, because although increased is more affordable for them.

Take the example of deinstitutionalization, we have one of the worst histories of social Housing, we have millions of people concentrated in very poor areas, they are not going to the schools, or if they go they do not have academic success, it is a big problem. So now they are changing to this rehabilitation paradigm, we have about seventy thousand houses to be rehabilitated, to be rebuild, and I think we can influence this policy.

K.M.: I think that we are concentrated in bringing this up, it is a big issue in the United States is that poverty is concentrated, and particularly in urban areas where they have really concentrated poverty, social problems, and a lot of the middle class people have moved out of their cities, and I think that really exacerbates all of the problems of community integration and makes everything a thousand times harder, when you have concentrated poverty and homeless areas.

J.O.: Even in Oslo, in Norway, I went for a visit, and they said "now we are going to the area of the social Housing in Oslo" and they went to show me it was a really very socially segregated area, and I advised our colleague "Housing First (and this is not only in my opinion to resolve homelessness) is also a strategy for social change in many areas". For example, in domestic violence, now instead of going to shelters for women, they are using the idea of Housing first for women, in alternative, for refugees. The refugees are moving to individual Housing. So, because of Housing First, there is an ongoing social change process, very innovative, a paradigm shift.

S.T.: I think it's the other way around, I think we are doing Housing First for immigrants, refugees all the time, it's just that we were never doing it for the group that Housing first was originally designed for, we just are helping doing housing first for everybody else.

J.O: We are not dispersed for the other groups, so far!

MJVM: In terms of these national strategies, and we understand that homelessness is a multisector issue;

⁶ Supportive Housing Proposition HHH https://www.labavn.org/index.cfm?fuseaction=contract.opportunity_view&recordid=36769

to the best of your knowledge, in the context that you work in, are these sectors like welfare, Housing, justice are they working in convergent way? Or is still a mix-match of understandings about what should be done about homelessness.

S.T: You mean are they working independently without talking to each other? Or are they coordinated? Is that the question?

MJVM: Yes, that is the question. What do you think we should and how should we support them in terms of probing to converge?

S.T.: That's a huge challenge everywhere. You know, it's different in different places. One of the things about the veterans initiative, it was probably the first time in the United States that the Federal Government had two federal agencies collaborating. They had one that paid the rent the veteran's administration working together to pay the case management services. It worked tremendously well for the veterans. I think one of the problems that is why homelessness is still around, it's because it usually it falls to social services or to Housing, even in places where they have a strong healthcare system, the healthcare system is not a part of the Housing first programs, it's very difficult to get the healthcare system. The health care programs are not part of the Housing First programs, even when you have the universal healthcare, to have them make home visits to people, there is still a huge separation. I agree with you that the collaboration is still a problem.

J.O: I think that the problem here it's because historically, in my opinion, is that Housing first instead of creating the formal access to the regular settings like the health center, the justice system, promoted a parallel system to resolve health, mental health, completely separated. For example, in Portugal, we didn't create that parallel system, we use the normal system, when the homeless person comes to the house, they have to go to the regular health center, they have to go to the regular justice system, and they have to go to the regular psychiatric system. We didn't create alternatives, because of the historic process, so when that happens there is articulation, because that is no alternative. And also because of the National Strategy they create broad Commission and the NPISA (Community Board for Planning and Integration of Homeless People) at the local/ municipal level, where all the sectors are represented. The teams using the regular generate more articulation. When ACT (Assertive Community Treatment) is an example of a classic form of intervention, they have psychiatrist, and the health system; for example, in some countries of Europe they have nurses, so they are creating parallel channels, therefore the Users are never satisfied, when they go to the hospital, it's a new thing, they are not familiar with, but if we do this since the begging of the integration process, therefore we articulate more. This is my reflection about this.

S.T: I mean, we can debate that. I think that ACT was created, and I think that is still true today that most people, like 60% or more, who have severe mental illness, never go to treatment. So, you know, it's nice to have a system that you don't have to need to have a parallel system, but many people will not participate in treatment voluntarily, or will they acknowledge they have a problem. So, this ACT or intense case management teams are relevant. I don't think they are a parallel system, they are an innovation to the existing system, so you get the clinicians out of the office and they are making house calls, to engage people that ordinarily would never even think about going to the office, because they don't

think they have a problem, they're in a different stage of you know, pre-contemplation or denial, so you got to intervene, to move them along to where they would get support. Ultimately that's the goal, for everybody, to use the regular system.

MbS.: In the larger homelessness system in the United States, run through the Department for Housing and Urban Development there's a real push to try to use so called main stream services, being those that everybody has access to, and the HUD (Housing and Urban Development) should simply get people out of shelters and Housing, it should just be an emergency system that kind of rapidly rehouses people and then they should use the main stream systems. I think HUD is convinced, but I don't think the main stream systems are convinced, and so the Housing people are saying "this is your problem" and the main stream people are looking somewhere else, and not embracing that. And there's a problem, the sometimes called the "wrong packets" problem. A Housing program may save money for some other system, but that other system doesn't return that money back to the homeless system, and so, the fact that the criminal justice system might have saved some money, that's nice, it doesn't then feedback into housing more people. So, I don't think we've done in the United States a very good job of coordinating across systems, and it's still for us a real problem.

K.M.: It's terrible problem in the United States, and I am curious to know if in Europe it is different. But at least at a national level in the United States it's incredibly territorial, the different agencies that are near Washington DC, so everyday all you read about it's the different eight national agencies turf; it's a politicized system. At the local level I think you have the change for more integration across agencies, but at a national level in the United States it's terribly political. They are fighting for money, power and prestige. I don't know if it's different in Europe at a national level, but I think that at a local level in the US there's more human contact, sometimes people work on it.

J.O.: I think that is a big difference with the European Union, we have 28 countries, it's different. In the majority of the countries, we have for example a free health system meaning people can use the services and they don't have to pay. We bring a homeless person, already integrated in the Housing First Program, to the health system and they don't have to pay anything. It is not a parallel health system, the community team that go with the users to the health center. It is more complex for the judicial system, but not because of the homelessness, you see in general it is very slow, the solution, but for everybody, even for rich people. It's very slow, and that is the problem.

S.T.: Rich people go to jail in Europe? We don't have that in America!! (Laughter)

J.O.: They go to jail, but the process is very slow.

S.T.: I think that from what I saw that actually shifted, I think the French realized, because they were targeting people with severe mental illness, and they had the whole community health system, when they saved all that money from the hospitals, I think that motivated the investment, to have, you know, fifty thousand euros, they saved millions of dollars saved on the hospitalizations.

R.G.: But has to be how big it has to be before you can make that kind of change happen!!

P.T.: It must be noticed on a big scale; and there is another thing, with so many projects, like even herein Italy with so many tiny projects, it's hard to have an impact. But with national studies with huge data, I think that definitely helps.

Mb.S.: Deinstitutionalization in the United States happened a long time ago, and so there isn't a lot of savings to be had in the mental health system at this point, because people got moved out of mental hospitals quite some time ago.

S.T: Into jails!!

Mb.S.: Largely yes, many. But there is [Collaboration] on paper; there is the Interagency Council on homelessness at the federal level; it is supposed to coordinate the Federal Agencies, there have been repeated pushes. Phill Mangano did a bunch of policy academies where everybody from the states was supposed that had anything to do with homelessness to come together and talk to each other and develop a statewide plan. So, there are continual pushes to try to get people to coordinate, but that doesn't mean that works very well. I think you're right that it can work better at a local level.

MJVM: Now moving on to the specifics of Housing First, the models; there is debate about specificities of Housing First models, the single site, the scattered individualized and the mixed options. What is in your opinion the best way of promoting integration on the long run? Again, with the best of your knowledge and the results that you have been achieving in your research.

S.T.: Very important. I am not a big participant in the housing debate per se, because I mean, it's all about client choice, but can you legitimately give a choice? It doesn't matter if we really have many different types of Housing available ideally, and you say the person you want live in this place, or that place, you tell us. Because the goal is not about Housing really, the goal is about empowerment and just supporting that decision-making process. I think most people have very limited choices on their Housing site, so, if the program doesn't have the money for an apartment, and most people want a place of their own, you know. If everyday they've been hearing about all of these people having to share apartments here, there is not really enough money for the rent, and it's not working so well, there are a lot of arguments, two strangers from the street living in one place you know, their retention data is not going well.

I think if the program is operated with the right resources most people will choose the independent department, but we do have this 20% failure rate on apartments that aren't structured enough for some people, they keep failing, so we need some complementary. You know, what are we going to do with those people? And I think there single site with supports services, like somebody at the door it's a nice complement instead of having auctions after apartment number four or five or whoever is in at the program who helping the person.

R.G.: Right, so I think there's a couple of challenges with this single site and congregate. If the infrastructure is already there and available to programs means that Congregate Housing options are going to be more readily available to some programs than single site. So, if that is what you have to offer, that is what the person has to choose. Choice is constrained, yet people will fail out of apartments a certainty amount, seems to be around consistently around 20%, that is what Anna Stefanic and colleague's⁷ talks about. The reverse staircase model, the reverse continuum where you start out in independent Housing and

⁷ e.g. Yanos, P.; Stefanic, A.; Tsemberis, S. (2011) Psychological community integration among people with psychiatric disabilities and nondisabled community members. *Journal of Community Psychology* <https://doi.org/10.1002/jcop.20441>

when that doesn't work, then you might step it back to a different type of Housing, that is perhaps suited to their needs at that time and sometimes we talk about this as if its static you make this choice now or you're placed in a congregate Housing first, because that's what's there and available so you can choose the congregate.

What we really need is a longitudinal vision of this, I think, what about when that person says like: "I've done okay here, where's my flat?!" Will there be choice at that point in time? So I think that having a space available for people who repeatedly fail out of apartments, it's a small number of people to have that as the assumption as a starting point doesn't make me comfortable. I think you always going to come up again; it ends homelessness but that doesn't do the other side of Housing first, which is the recovery and the community integration. There is always going to be a false ceiling as long as you are promoting congregate Housing First witch in my mind is a paradox, a contradiction as an equal choice to an independent flat, so I worry about the recovery side beyond recovery of a home.

Mb.S.: Is is interesting, in the US more and more people are living in what we call "sub families" that is more and more young people and not so young people are staying with their parents. People having trouble, middle-class people affording Housing that's independent. I think we need to think about a variety of Housing models, not everybody needs or can have a white picket fence, and when we think about a variety of Housing models we need to think about integration so students going to schools within dormitories they could live in single room occupants, kind of hotels intermingled with people who might have a serious mental illness or some other kind of issue and as we think about multiple kinds of Housing models, we need to think about ways of integrating those models so that we don't have a kind of specialized Housing for folks with a particular kind of disability that becomes stigmatized and isolating.

J.O.: I think this is the main discussion, I am very concerned that we replicate the same problems that happen with the institutionalization; in Europe, it was very serious. I don't know what is going on now with Disabilities Act in the United States. In Italy, they closed down completely the Psychiatric Hospitals in the country and now the mentally ill are in big group homes, completely separated from the community, they created cooperatives with one hundred two hundred mentally ill people working together, so they are more segregate now than before. Sometimes in the Psychiatric Hospitals sometimes the doors are open; currently there are small group homes where people are closed in holes. I already went to visit there, so we are taking a risk in Housing First, if we don't discuss this to repeat the same segregated situations. I think, for example, the client choice, how can we talk about choice if they don't have the opportunity to choose the individualized solution. In some programs they are divided, for instance in Lisboa is all individualized, this also means families, when we say individualized, there are many families together or couples, and other countries are single site. Those options are segregated, they don't have this choice in terms of wanting to choose an individualized house or have the option for a group home.

The problems are completely separated, and I think that the fact that we are concentrating people in buildings with one hundred homeless people together and this is something that concerns me because, as I said, Housing First is a change process. It's not only about taking the people out of the streets; if the goal was just to take people out of the streets, we could repeat the concentration models, we have done

that. This model is also about diversity, helping them to come back to the streets again but as citizens, participating.

I have worked in group homes, because of the mentally, I have had this experience also when we created group homes; the studies are very clear, they don't propionate recovery and community integration. Recovery, for me is a full life in the community, it's not a psychiatric process. On the other way, if people get into the group, they stay there; this people that we are talking the people we contact on the streets, most of them are mentally ill or have drug dependencies, and the best results is when they are more individualized or in a couple than to be in large groups. When we ask them: Do you want to come to a house? When it's individualized, they are interested, they don't want to go to shelters, they don't want to go with big groups, they have to communicate, is complicated. We have fifty years of experience in segregate Housing it's not a new thing and if we do this mistake again, in a couple of years the European Union is very clear that the European problem is the deinstitutionalizing, we are going to have to deinstitutionalize the single site congregate homes.

S.T: That's already happening in the United States with the Olmstead Decision⁸.

J.O: Are you working in New Hampshire or Vermont, in the United States?

S.T.: New Hampshire, New York, Illinois because the Department of Justice. People can have the institutions, and they went to this large group homes but we are not talking about differences in architecture, we are going to have to build big buildings because that's the most efficient and cheapest way to do it, we are talking percentage of people who are living in these buildings, if it's 10%, 15% or less it's normal Housing, over 60% is saturation, 100% is ridiculous. But if we're only going to focus on the 80% that are going to be able to live in the community there is going to be a small group, especially as they get older and maybe there's something in between like a nursing home or assisted living, for people will need other services. So I think it's useful to have some sense of continuum with the vast majority being driven by choice, independence and integration.

J.O.: The other justification for congregate Housing that sometimes is used is the speed to resolve homelessness; and we don't agree with this theory, because for example in Portugal, that's only individualized Housing, we are in a very good speed, we are moving very fast. We used to have three thousand people in the streets in Lisbon five years ago and now we have three hundred and we plan to end it in two or three years, our President said 2023, let's try. It's not because of segregate Housing it's faster that is another justification, we are in a very good process.

K.M.: One thing that bothers me is often innovative programs that are developed and then when they get defused, the program loses the spirit, it loses the essence of what made it work, and I worry about the Housing First being used in congregate Housing just because they're original model was scattered Housing; so I just worry, and it makes me sad, when there's an innovative model that's really special at the local level an then it gets used to many different things. Secondly I'm a researcher so to me this

Supreme Court Decision (1998) OLMSTEAD, COMMISSIONER, GEORGIA DEPARTMENT OF HUMAN RESOURCES, ET AL. v. L. C., <https://www.law.cornell.edu/supct/pdf/98-536P.ZS> or <http://www.accessiblesociety.org/topics/ada/olmsteadoverview.htm>

is an empirical question: Where are the randomized controlled trials that randomly assigns people to scattered and congregate, what are the results of that? If the results of that are clear, then that would be helpful, so that's a different point. Ultimately, I would say that Housing First is what worked initially. We use the term for other things, but my scientist side says: - let's do the randomly controlled trials where we assign people in different conditions, let's do it with 80%, 50%, 20%, 8% of the people, I would love to see the science on that.

J.O.: We already did that for the mentally ill we have many studies comparing Congregate Housing and Individual Housing and it's very clear, the results are very different, there are many studies that we should use too, it's not about homelessness in general.

MJVM: We are almost at the end, just a final question: - What would you like to say if we had to send a message to whoever is out there, that is willing to do something to change Homelessness, what message could we send out for them, what is it that they have to do?

Mb.S.: Provide resources.

S.T.: We have to take it on scale.

J.O.: I think, in Portugal now they are putting a lot of money around poverty, they say the priority now is poverty, but I think we should say to the policy- makers that homelessness it's not only poverty, it's an emergency situation, it's a different situation, people are dying on the streets. There are many cities in Europe that count how many people die in the streets every year and it's very significant, for example in Milan it's sixty people during the winter that die every year on the streets, so it's more than poverty, it's an emergency.

We have to consider homelessness as priority, because if we put homelessness in the same package of poverty, they don't have money and have to resolve so we should say something to the policy-makers that it's poverty, and also emergency that we have to take immediately as an investment.

MJVM: There is a debate on some national contexts that whether homelessness is a social emergency or not and if people, even the person who manages to call to the services and says: I need something today! The answer is: You've been on the street for so many years, you're not an emergency. To get across this message of emergency, that homelessness it's a life threatening condition or situation is still to be attained.

J.O.: As a consequence of the research with the mentally ill that are 30%, 35% of the all people in homelessness situations, we see that a considerable number are not poor. People have studied in the University, some of them come from middle class, so it's not only a poverty problem, and it's an emergency particularly in the mentally ill group. I don't know with the other groups, but we have studied this group very well and some of them come from the middle class families.

MJVM: Would you like to give a final recommendation for us to build guidelines, and to do a good job with using this opportunity, and for us to ask other researchers and politicians and people who are key stakeholders on developing or implementing policies in homelessness?

K.M.: I would just like to say one small thing which is you mentioned that researchers and others see homeless people as part of the ones who are speaking in this stories. What is the role of the homeless people as the Housing First participants, in putting the documents together we want to raise that other

issue, what is their role if they have a role.

MJVM: Thank you all very much for consenting to be here with us and provide us the opportunity for this in-vivo contribution. The focus-group session was formally ended.

Methods Note

The focus group session was preceded with the signature of an invitation and consent form on the recording of session and a handout with the guiding questions, previously sent to the participants by email, and again distributed to facilitate the concrete contributions.

In Fig. 1 we provide the outline of the Focus Group Session inspired by literature review and on the HOME_EU Policy Guidelines.

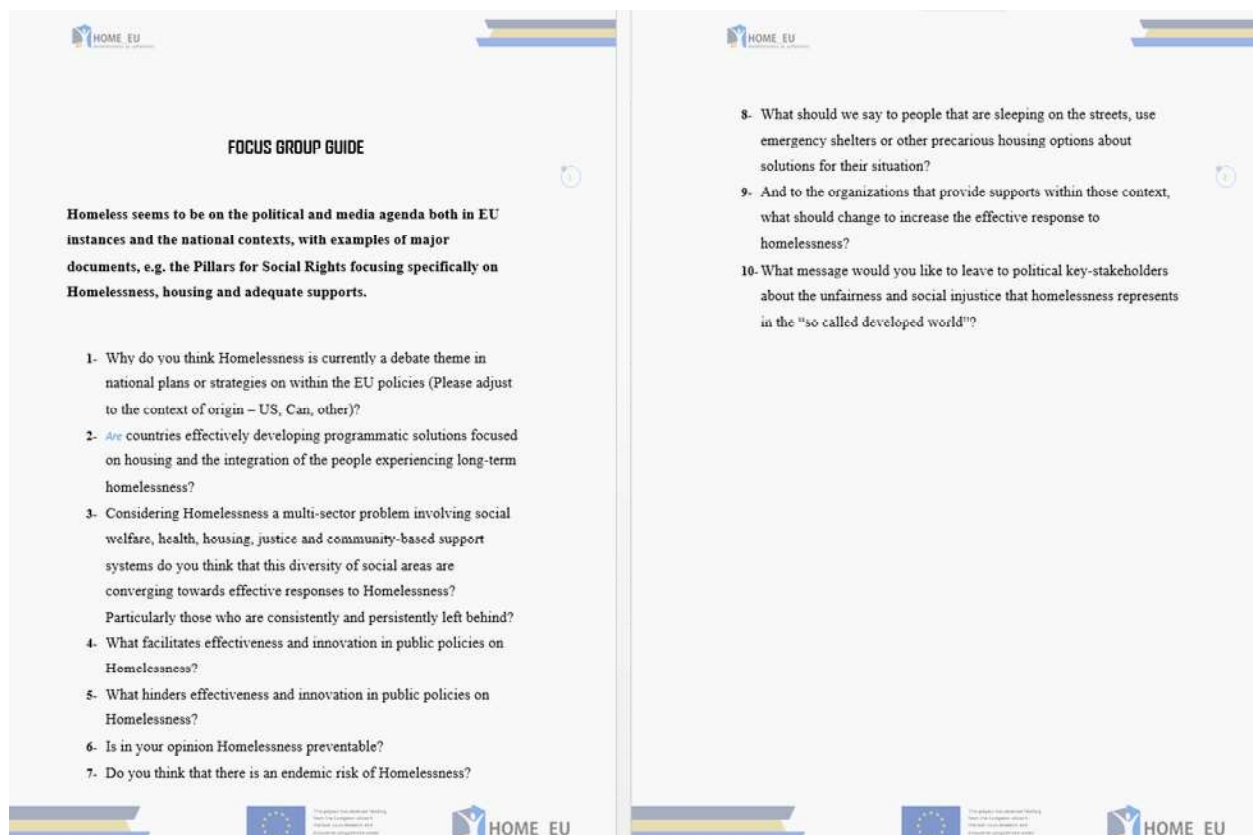


Fig. 1 – Focus Group Guide held in Padova (Italy) June 2018

Concluding Remarks

The focus group had the overall duration of 58.17 minutes, and content was substantive and insightful for future reflection on the directions to take for the implementation. The resulting text was composed of 7340 words of which through a word frequency analysis we were able to identify that the five core words were Housing (104), People (78), think (61), Homelessness (32); and Systems (30). In Fig. 2 we provide a word cloud display to illustrate how the focus group participants.

The central topic for the expert participants is that homelessness is first of all a Housing discussion, with direct focus to respond to people who do not have access to this basic human right, and it is still relevant

to address homelessness. On one hand, we have the shortage of housing policies on availability and affordability of housing options, solutions tend to be more effective at the local level, where “champions” (Key-Stakeholders) may make a difference. As a consequence the civic movements and organizations are required to combine their efforts, and their available data to advocate and advance more effective responses and support the governments on investments so that Homelessness becomes effectively a social emergency and not a mere poverty sector to be addressed at a certain point in an uncertain future.

The experts were quite inspiring in supporting political guidelines focusing Homelessness into a Housing policies and that systems need to be improved to provide accessible opportunities for those people who experience homelessness, and that governmental agencies need to further improve collaboration due to the multisector nature of this societal solvable challenge.

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