

Summary Report

ESF Transnational Cooperation Platform Community of Practice on Social Inclusion

Virtual Study Visit: Scaling-up Housing First under the ESF+

7-8 June 2021, online event

The virtual study visit aimed at supporting the Community of Practice (CoP) - Social Inclusion members to scale up housing-led projects, in particular projects based on the Housing First (HF) approach, in the European Social Fund Plus (ESF+).

The virtual study visit, organised by the ICF Transnationality Team on behalf of the European Commission, in cooperation with the European Federation of National Organisations Working with the Homeless, FEANTSA, was attended by 29 participants who represented ministries, managing authorities (MA), intermediate bodies (IB) as well as national and EU-level stakeholders.

MAs and IBs from Austria, Belgium, Czech Republic, Finland, Germany, Greece, Hungary, Italy, Netherlands, Slovakia and Spain joined the meeting. The aim of the virtual study visit was to build knowledge and competencies for scaling up housing-led and, in particular, projects following the Housing First approach, in view of the upcoming programming period of the ESF+. Speakers from the Netherlands, Italy, Finland, Belgium, and Czechia were invited to share their experiences and knowledge on scaling-up Housing First. Housing First is based on the principle that any person in a situation of homelessness first needs to be rehoused, ensuring access to permanent housing without precondition, and then provided with social and any further support in a user-centred way.

The study visit was introduced by Matúš Tluščák, co-chair of the Community of Practice – Social Inclusion. Mr Tluščák introduced the main objectives of the Community of Practice (CoP) which are to promote social inclusion and combat poverty in a holistic manner, with a focus on person-centered services and user involvement and the practical implementation of policies and approaches via the ESF+. The CoP Social Inclusion looks at three issues: homelessness and how to tackle homelessness through Housing First based projects/programmes, child poverty, and deinstitutionalisation. Knowledge sharing and capacity building activities on the three subthemes have taken place and are planned until June 2022.

The first session of presentations on scaling-up HF started with a virtual study visit to the Netherlands (chaired by Ruth Kasper, FEANTSA). The session included presentations from Melanie Schmit, President of the national platform 'Housing First Netherlands'. Ms Schmit was a co-initiator and co-founder of this network organisation that acts as a collective representative for national HF practices. HF was rolled out in 2006 in the Netherlands and is today the leading policy to tackle homelessness in Amsterdam. The HF programme 'Urban Compass' started in 2006 with a strong support from the national government and the provision of adequate funding, in four major Dutch cities (Amsterdam, Rotterdam, De Hague, Utrecht) and was expanded to other large and medium-sized cities throughout the country. The programme ran until 2014 and rehoused approx. 10 000 people.

HF was initially developed in a partnership of municipalities, housing associations, service providers, health insurance companies and mental health care organisations. Although the decentralisation in the Netherlands, which started in 2015, has led to some changes,

municipalities, housing associations and service providers continue to be the key stakeholders for implementing HF. In terms of housing provision, most HF programmes rely on social housing supplied by housing corporations with whom municipalities sign annual agreements on the number of homes to be delivered. The rental contract is signed by the housing provider and the person who is rehoused or, in the case of reluctant landlords, with the HF programme (in any case, the aim is to set up a personal contract between landlord and tenant, usually after one year).

The current policy context is both promising and challenging: The 'Broad Approach on Homelessness' Strategy (2020-2021) and the 'Action Programme for Homeless Youth' (2019-2021), published by the Ministry of Health, will create 10 000 extra housing units for people experiencing homelessness before 2022, with funding of EUR 200 million. Although the political support had declined after the 'Urban Compass', the first HF programme in the Netherlands, substantial progress has been made in terms of establishing HF as the main strategy and policy to address homelessness in recent years: recent homelessness policies explicitly renounced the staircase model¹ and recognise that ending homelessness starts with providing a home. However, the lack of public housing, missing central management of the national homelessness strategy and the non-binding character of the housing objectives are the main challenges for a further scaling up of HF.

The second contribution on the Dutch case study came from Valerie Boogaard and Irma Baars from HVO-Querido, an expert support service for people who are rehoused through HF, with a focus on helping people with complex needs (such as people with mental health support needs and/or addiction issues). HVO currently supports 12 000 clients. In 2015 (as part of decentralisation), many former government tasks became responsibility of the municipalities, including decisions concerning the funding and access to homeless shelters and provision of support services. Decentralisation strategies also put more emphasis on self-reliance and economic participation (mainly through employment) from HF participants. Please find here videos on the local policy in Amsterdam, as well as here tips for scaling up HF from Amsterdam, working agreements of the local authority are presented featured in the video here.

A key success factor for scaling up HF in Amsterdam were regular meetings with housing providers and other key stakeholders to share successes. They strongly supported the further scaling up of HF ('Start first, make and share the results.'). Based on their long experience, HVO-Querido developed the '10 Work Agreements' Guide which today is best practice for HF programmes in the Netherlands, based on the following agreements: (1) coordinated offer of housing and support, (2) tailor-made client support (recognising that 'standard' support does not work for some clients), (3) ensure good neighbourhood relationships, (4) suitable housing with intermediary (leasing) rental contracts while (5) aiming for personal contracts (temporally limited leasing contracts) and, (6) ensuring support for after the end of the leasing contract, (7) early signalling and prevention, (8) prevention and addressing nuisance, (9) personal support for financial management, and (10) respect for the client's privacy. Furthermore, ensuring the timely payment of rents is key for a good long-term collaboration which supports the upscaling of HF.

The first session of presentations ended with the intervention from Francesca Disperati, HF project worker in the Municipality of Venice. Venice has made substantial use of the ESF and FEAD (Fund for European Aid to the Most Deprived) for to roll out and scale-up HF. ESF was used for employing additional support staff and psychologists, FEAD for the acquisition of furniture and household appliances.

The interventions were followed by a Q&A session. The following topics were discussed:

• Importance of training of support workers to change traditional approaches to service provision (e.g. the HF expertise and training centre which started in Czechia in 2017). In terms of an innovative support provision, Amsterdam has very good

¹ Before Housing First, permanent housing with support was only offered to homeless people after they had graduated from a series of steps. Each step on this 'staircase' was designed to prepare for independent living in their own home. When all the steps were complete, a formerly homeless person was meant to be 'housing ready'. These types of services are called 'staircase model'. Source: <u>Housing First Guide Europe</u>.

- experiences with employing peer workers (support workers who themselves have experienced homelessness at one point in their life).
- It is key to provide sufficient funding to support the transition back into housing, especially for target groups with high support needs. Insufficient funding for rehousing support bears the risk of having the rehoused person losing the apartment. This can also jeopardise future HF projects as housing providers might become reluctant to collaborations.
- Challenges in terms of upscaling: There is a need to involve more stakeholders (housing providers, services, municipalities), to broaden target groups (in its beginnings, HF mainly addressed long-term homeless persons and persons with multiple and complex support needs) and to include migrants, families, and other groups, depending on the local context. Collaboration with architects should also be strengthened to provide more sustainable and high-quality housing.

The first day of the virtual study visit continued with an exchange on the different aspects of scaling up HF through small group discussions between participants and the experts from the Netherlands. The following themes were discussed:

- What actors were involved in scaling up HF in the Netherlands?
 - Municipalities, HF providers and (non-profit) housing corporations, mental health services, health insurance responsible for health care (municipalities pay for people without income/on welfare benefit), and national government representatives.
- How do you approach people who can be rehoused through HF?
 - Social workers working with municipalities and mobile outreach teams are most important to get in touch with people who can be rehoused through HF.
- Are you considering the use of ESF+ for scaling up HF in the future?
 - Funding by the ESF has never been used for HF in the Netherlands. The ESF+ could however help steering and implementing HF in a centralised way throughout the Netherlands.
 - Experiences from other countries, for instance from Italy, show that the ESF can upscale HF, also at national level (together with the FEAD). Rolling out HF at national level is a big challenge, not only in terms of housing provision but also with regards to the establishment of effective and integrated local support networks. Here, the ESF can be very helpful to provide capacity in terms of cooperation.
- What is needed to further implement and scale up HF?
 - Access to more housing, as there is need for more social (and affordable) housing, especially for more small apartments. Collaboration with investors and private housing providers can be a potential way forward. Historically, the Netherlands had more social housing stock which changed in the 1990ies: buying homes was promoted and social housing was only offered to those with the lowest income. Social housing companies also pay high taxes. In terms of collaboration with private landlords, the Dutch experience shows that it might take some years to encourage them to make their housing stock available for HF programmes, so good practice sharing is very important here, such as the sublease contract with the HF programme (approx. signed for one year) before the rent contract is signed by the client.
 - A shift in attitudes by professionals from a staircase model towards the HF approach: while in Amsterdam this change in mindset has already taken place, which consequently led to the downscaling of shelters, more work needs to be done in other parts of the country to bring about this change.
 - Good training for those involved in the planning and implementation of HF (including government and municipalities staff) in order to understand HF as a rights-based approach, the need to build effective collaboration networks and to involve stakeholders.

 Until today, HF services have not been made available for EU mobile citizens as they are not entitled to welfare services.

The second day of the study visit started with a visit to Finland and Belgium (City of Gent). Senior Expert on HF Peter Fredriksson from the Y-Foundation explained how Finland succeeded in establishing HF as national homeless strategy and policy, and how HF was scaled up successfully. Political momentum was created with the engagement of national governments (across 2 legislative periods), who strongly supported the HF programme. This resulted in a centralised housing strategy and the attribution of sufficient funds: the government provided 50% of the overall funds for HF. Part of the funding was used for the recruitment of staff to accompany people during the rehousing process.

The national strategy ensured that municipalities focused on the most challenging target groups in their local implementation plans (such as long-term homeless persons or people with complex support needs). The regional HF implementation plans were drafted for each city/region and their implementation was closely monitored by the respective ministry. Helsinki, where most people experiencing homelessness lived (up until today), was also the biggest housing owner in Finland – a fact that contributed substantially to the implementation of HF. In addition, the Finnish Slot-Machine Associations provided funds to buy appartements. ARA, the Finnish public housing body (see also ARA presentation during the CoP 'Peer to Peer Training, February 2021) has a rental use obligation for 40 years (housing units can be sold if no need in region).

The initial HF period (2008-2015) led to a break-through of HF in Finland and allowed to further scale up HF projects. The number of people experiencing long-term homelessness, the main target group during this period of time, was effectively reduced from approx. 3 600 to 1 050 people (2008-2020). Research shows that ending homelessness has also led to a reduction of spending for health and mental health care services, social services and the police (reduction of 34% for 2008-2015). The experiences from this initial period inform current HF practices: more scattered housing, instead of conglomerate housing, is provided, hybrid models were developed which combine regular rented housing (social housing) with HF units in the same building, together with a day centre. Since 2016, the Finnish housing programme focuses on the prevention of homelessness and on the rehousing of specific groups. Experts by experience have become a well-established part of the work on homelessness. For the future, Finland aims to reduce homelessness by 50% by 2022.

The second presentation on HF in the City of Ghent was introduced by a short <u>video</u>. Steven Vanden Broucke, HF coordinator in Ghent, explained that HF started in 2002 in the city, based on collaboration between the municipality and social housing companies. The early years of HF evidenced the need to provide more support for persons who had experienced long-term homelessness. More intensive support was hence provided by local support services as of 2007, which led to a big improvement of the rehousing process and more people managed to stay in their new homes. The psychiatric support, however, is a bottleneck until today – some people still lose their home due to a lack of psychiatric support (services have long waiting lists which is also result of the deinstitutionalisation of psychiatric services in Belgium).

HF in Ghent grew organically and rather slowly (with rent agreements of about 40 to 50 apartments per year for people in homelessness). The main challenges for scaling up HF have remained the same: access to housing – the public/social housing stock is too small (currently, 15 000 people are on housing waiting lists). Further challenges are the lack of psychiatric support to allow successful rehousing of people with complex needs; insufficient support by the regional or national governments and a required shift in mindsets towards HF. Moreover, resources to train policy makers at regional and national levels need to be provided. Furthermore, access criteria to social housing in Ghent are currently being changed which will lead to a reduction of the 'fast entrance access' for long-term homeless people: HF Ghent will only be able to rehouse 80 of approx. 700 long-term homeless people over the coming ten years within the new legislative system.

However, a positive outcome in Ghent is the very good retention rate of 90-95% (percentage of persons who stay rehoused after two years). The caseload of 25 to 30 service users per

support worker is comparatively high in Ghent which is made possible through the dedicated support team which provides support at community level. Ghent is currently working on a strategy to end homelessness within 15 to 20 years but the regional or national governments have shown little support beyond verbal commitments.

The presentations on the Finnish ad Belgian examples were complimented by the presentation of Jakub Slavka from the Czech Ministry of Labour and Social affairs (MOLSA). Czechia had made substantial use of European funds (mainly of the ESF) to rehouse people in homelessness. MOLSA, who strongly supports the roll out of HF and adopted the HF approach at national level, ensured the involvement of other relevant ministries (the Ministry of Regional Development), municipalities and the Social Housing Platform and has collaborated with a large number of NGOs and other stakeholders in the housing area. 456 people have been rehoused through projects financed through previous calls under the ESF, of which 245 were adults and 211 children. MOLSA will continue the upscaling HF projects in the upcoming programming period. HF is also part of the inclusion strategy 2021-2030.

Day 2 continued with discussions in smaller groups. The main topics discussed together with the experts from Finland and Ghent were the following:

- Key component of the 'Finnish model of scaling up HF' is the strong political support and the adoption of HF as a national strategy to tackle (and eventually end) homelessness. The strong government support ensured sufficient funding and the involvement of local authorities through specific strategic implementation plans, which were monitored by the involved Ministries. However, the Finnish model is not the only successful model for scaling up HF. A more organic 'bottom-up' process, were smaller HF projects are scaled up, can work well if there is political support at regional and, ideally, national level, jointly with the allocation of the necessary funds.
- In all countries/cities that have been discussed so far, the quantity of housing units is a key challenge (Finland had a big public housing stock available for scaling up HF and also dedicated budget to build and acquire additional housing). Many cities in Europe have sold off their social housing stock in the past decades. Participants shared their experience that contrasting the numbers of people in homelessness and the available public/social housing units can be helpful to convince local and national authorities to become more proactive about tackling homelessness and acquiring housing units.
- Another example of collaboration is a <u>programme</u> by social housing providers and a commercial bank in Slovakia which supports Roma families. Families receive financial management support while the bank provides a loan to build a house. The loan is cofinanced through the ERDF.
- An important lesson learned from the Finnish case is the need for scattered housing. In the beginning, Finland mainly worked with congregate HF units (in the same building block/neighbouring blocks), later, Finland tried to rent apartments in different neighbourhoods. Ghent confirms the importance of scattered housing especially for rehoused persons who have a substance abuse or other 'specific' background and who should have the choice not to move into certain neighbourhoods to avoid themselves in context which could potentially jeopardise their recovery.
- Use of ESF: Czechia made substantial use of the ESF to cover rent, social support and supplementary administrative support for rehousing people as well as the evaluation of the first HF programme.
- Experiences from Ghent show the need for a regional or, even better, national strategy on homelessness: the city's efforts to be more proactive on tackling homelessness than other municipalities in Flanders/Belgium, led to a pull effect in a situation where housing is already insufficient in Ghent.
- Prioritisation / ranking of specific target groups: municipalities should set up the criteria as they know the local population best. However, some control to avoid 'creaming off', e.g. a focus on the group(s) who are easiest to re-house, might be helpful (in the Finnish case, this was part of the ministries' responsibilities).

• Several countries had moratoria regulating restrictions of evictions during the COVID19 pandemic. Many ended in the past months which, if no plan for rehousing is in place, will lead to a growing number of people in situation of homelessness.

The second day of the Virtual Study Visit was closed by Michele Calandrino, DG EMPL, unit F1 who coordinates the ESF+ and the FEAD. Mr Calandrino recalled the opportunities to address homelessness and housing exclusion through the ESF+ which supports the implementation of the principles of the European Pillar of Social Rights (whose Objective 19 explicitly refers to housing and assistance for the homeless). At the same time, the ERDF allows for social housing infrastructure investment. The next programming period is coming up and now is the moment for Member States to design integrated Housing First programmes to be supported by EU Funds and also, for stakeholders to reach out to the respective authorities and work together with them in line with the partnership principle.

In addition, the European Commission and the Portuguese Presidency launched the European Platform on Combatting Homelessness on 21 June 2021. The joint declaration will call to promote the use of EU funding to support inclusive policy measures aiming at combatting homelessness and now is the moment to shape this support in the operational programmes.

MAIN MESSAGES FROM THE EVENT

Scaling up HF in ESF+

- **Communication of success**: MA/IB should communicate more about the existing, very positive evidence of HF programmes in terms of retention rates, improvement of health and overall quality of life (including savings effects for social and health care services) to support the scaling up of HF. The ESF can be very helpful for providing training to stakeholders, including governmental stakeholders, on the benefits of the HF approach.
- MA/IB should make more and better use of EU funds (in particular ESF+ and ERDF) for improving the housing supply and providing integrated support.
 The lack of housing units is a challenge encountered by many countries who try to scale up HF programmes.
 - Collaborating with **private landlords**: Most HF programmes rely on public, municipal and social housing which, in many countries, are not sufficiently available. Therefore, collaboration with private landlords allows access to new housing. Temporally limited leasing contracts signed with the HF programme, which after a set period become a contract with the rehoused person, can help growing private landlords' confidence in the programme.

Challenges and lessons learnt

- HF programmes should **favour scattered housing** (instead of conglomerate housing) to allow HF participants to choose a neighborhood and to avoid the spatial concentration of HF tenant groups in an area.
- HF Projects should sit within a wider, comprehensive homelessness (and housing) strategy which foresees the continuous establishment of HF to replace temporary accommodation on the long-term.
 - A comprehensive homeless and housing strategy at national level is also important to avoid pull effects towards cities / regions with comparatively better housing programmes (see the example of Ghent).
 - Steering at national level can also help ensuring fidelity to the HF model during the scaling up process. Monitoring also helps to ensure that persons with complex needs are included in HF programmes as explicit target group(s) and that their support needs are met (which, by providing a best practice, will also contribute to further scaling up).
- To effectively scale up HF, high-quality and diverse support services need to

be provided to accompany people, who experienced homelessness, back into housing. This includes health and mental health services, including drug and alcohol specialist services, psychiatric services, social inclusion and employment services. Involving peer workers or 'experts by experience' can be very helpful to ensure services meet the needs of the clients.