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# National strategy to prevent and tackle homelessness

Bill Edgar



On behalf of  
**European Commission**  
DG Employment, Social Affairs and Equal Opportunities



## Table of Contents

### Introduction

#### **Part A The policy debate at European level**

- A.1 The policy framework at European level
- A.2 A summary of the related policy debate at European level
- A.3 European comparative aspects
- A.4 The contribution to the European policy debate
- A.5 Transferability to and learning value for other Member States

#### **Part B Description of the main elements of the policy**

- B.1 Background
- B.2 The goals and target groups of the policy
- B.3 The legal and financial provisions
- B.4 Institutional arrangements
- B.5 Future changes proposed to the policy

#### **Part C The results so far**

- C.1 The quantitative results of the policy
- C.2 An evaluation of the delivery system of the policy
- C.3 Other results and achievements of the policy
- C.4 Obstacles, constraints and factors of Success

#### **Part D The policy debate and questions**

- D.1 Questions for Discussion
- D.2 Main areas of debate / Issues related to transferability of the policy

## References

## Appendices

- Appendix 1 Definition of Homelessness used in the Norwegian Surveys of Homelessness  
Appendix 2 Summary of key findings from the 2005 Survey of Homelessness

## List of Acronyms

BOKART  
FAFO  
FAMI  
KOSTRA  
KRUS  
KS  
NBRI  
SINTEF

## List of Tables

- Table 1 The objectives and specific targets established by the strategy  
Table 2 Goals, Target Groups, Targets and Baseline Situation  
Table 3 Financial Provisions relevant to the Strategy  
Table 4 Institutional Responsibility for the Homeless Strategy  
Table 5 Results: Targets compared to 2004 baseline

## List of Figures

- Figure 1 The Role of Supporting People in the UK Homelessness Strategy

## List of Boxes

- Box 1 Policy Approaches to Homelessness in the UK and Denmark

## Introduction

*The aim of the Peer Reviews is to implement a mutual voluntary learning process through which Member States and the Commission develop a systematic exchange of experiences and evaluation of systems, policies and programmes or institutional arrangements that can be considered as good practice in the framework of the European social inclusion process.*

The purpose of this discussion paper is to identify and set in a European context some of the key components of the Norwegian Strategy to prevent and combat homelessness in order to facilitate this process of mutual learning and exchange. The paper presents the strategy and comments upon its effects and operating conditions while drawing upon European comparative aspects. Finally, the paper raises the main questions to be addressed during the seminar to be held in Oslo on 7<sup>th</sup> and 8<sup>th</sup> September 2006.

In brief the Norwegian strategy to combat homelessness was launched, as a national strategy, in 2004 and is presented in a booklet under the name "the pathway to a permanent home" (web address). The strategy is established for the period 2005-2007 and identifies three primary objectives and five specific targets (see Table 1). In 2007 the strategy is to be evaluated and a more developed strategy will be presented to Parliament.

**Table 1      The objectives and specific targets established by the strategy**

Primary objective	Target
Preventing people from becoming homeless.	Number of eviction petitions shall be reduced by 50 %, and the number of evictions by 30 %. No one shall have to spend time in temporary housing upon release from prison. No one shall have to seek temporary housing upon discharge from an institution.
Contribute to improve the quality of overnight shelters.	No one shall be offered overnight shelters without a quality agreement.
Help ensure that homeless people receive offers of permanent housing without undue delay.	No one shall stay more than three months in temporary housing.

*Source: The Pathway to a Permanent Home, 2006*

The key components of the strategy to be considered in this discussion paper include issues of output and issues of process.

Output Issues include:

- Prevention of homelessness;
- Quality of Shelter accommodation;
- Access to permanent housing.

Process Issues include:

- Co-ordination Arrangements;
- Collaboration Agreements / Protocols;
- Evidence base and monitoring procedures.

## Part A The policy debate at European level

### A.1 The policy framework at European level

In many countries (in North America and Australia as well as in Europe) approaches to tackling homelessness have moved from dealing with the immediate crisis, to a focus on rehabilitation and re-settlement and thence to more recent approaches aimed at prevention. To some degree these changes have occurred in response to a change in the perception of homelessness as a socio-structural issue rather than an issue of personal crisis or individual pathology. Change has also occurred as a result of the way service providers operate in deploying, challenging and transforming resources, rules and ideas as they frame and pursue their own strategies. Importantly this change has also reflected a perception of homelessness as a manifestation of processes of social exclusion. This shift in perception has resulted in strategic approaches using co-ordinated action rather than policies relying solely upon individualised social work intervention. In crude summary the catchwords of the new policy paradigm are prevention, support and co-ordination which subsume rather than replace the catchwords of previous paradigms focussed on treatment and re-integration.

Evidence of this shift in approach can be found in the two countries whose homelessness policies have been the subject of Peer Review in previous years (see Box 1).

### Box 1 Policy Approaches to Homelessness in the UK and Denmark

In March 2002 the UK Government published "More Than A Roof" (ODPM; England only), which established the need for a new and more coordinated approach to tackling homelessness. It declared that homelessness was closely associated with social exclusion, and highlighted the need for coordinated action over a period of years. It also urged the development of services that would help people before they find themselves in a crisis situation. A new department was created in 2003 (the Homelessness and Housing Support Directorate) whose role is to:

- promote homelessness prevention;
- reduce the inappropriate use of temporary accommodation for homeless families with children;
- reduce the numbers of people sleeping rough;
- develop approaches to tackling homelessness which result from constructive working across departments;
- deliver housing related support for vulnerable groups (known as "Supporting People").

In 1998, the Danish Government undertook an initiative to ensure better living conditions for socially excluded and marginalised population groups. This resulted in the Danish Government deciding that a special effort must be made to secure housing for the homeless and other socially excluded population groups. The objective of the legislation is to

- establish new housing  
end the overload of re-establishment centres and shelters,  
establish better treatment programmes for substance abusers and the mentally ill
- implement a programme for improving the standards of such institutions  
ensure better housing allocation

Differences in approach between countries can be understood to revolve around the extent to which structural causes of homelessness are perceived to lie in housing market failures or in the inability of welfare structures to enable the poorest groups to compete. However, these conceptual differences resolve, in policy terms, into a growing recognition of the need to combine both housing oriented solutions with support provision (where this is needed) to enable people to live independently in the community or to sustain a tenancy.

In addition to the growing recognition of socio-structural as well as individual causes of homelessness, it has been understood that institutional or organisational factors also play a role in the pathway to homelessness especially for the most vulnerable groups (e.g. the young, the old, people leaving institutions). For example, research into homelessness among older people in three countries (Crane, Fu and Warnes, 2004) identifies six distinct pathways into homelessness resulting from a combination of policy or welfare-state support gaps and service delivery deficiencies as well as personal problems and poor living skills. For some subjects in the research, their behaviour rather than external factors triggered homelessness. For others, homelessness occurred because they could not manage when their circumstances changed, and there was a failure on the part of professional workers to recognise their difficulties and intervene. Other cases involved problems with the administration of services and poor collaboration or information co-ordination among different agencies.

## A.2 A summary of the related policy debate at European level

This section briefly considers European policy issues related to the three main elements of the Norwegian homelessness strategy – prevention, quality of shelter accommodation and access to permanent housing.

### *Prevention*

The European Union's Strategy to Combat Poverty and Social Exclusion includes a list of common objectives in which the prevention of social exclusion and homelessness feature prominently. However, a recent review (Feantsa, 2004) suggests that very few countries in Europe have developed specific policy programmes dedicated to the prevention of homelessness.

There appear to be two types of government approach to prevention (Feantsa, 2004). Some countries hold that a well-structured social protection system that ensures citizens' access to rights is essential to the prevention of social exclusion and homelessness (Spain, France and Denmark are particular examples). On the other hand, some countries emphasise the development of integrated strategies in which co-ordination of action is focused on particular homeless groups (the UK and Ireland are particular examples).

There are varied concepts of prevention of homelessness. Whilst the concepts have not been formally described in a typology there are different dimensions which need to be taken into account. One approach (Aldridge, 2004) suggests that there are three main domains of prevention:

- a. prevention aimed at key causal domains;
- b. prevention aimed at vulnerable groups/individuals;
- c. prevention aimed at pre-empting a personal crisis.

The first issue, related to the causal domain, is to consider at what stage preventative measures are introduced. There are many examples of interventions at the point of crisis to try to prevent homelessness (e.g. mortgage rescue schemes, intervention with private landlords to prevent eviction, intervention with money advice when eviction is threatened.). However there are also preventative measures which are less easy to measure which happen upstream (e.g. training professional staff in a range of disciplines to direct people at risk to the right support services, good quality housing support services to enable people to maintain their homes). Of course, the provision of an adequate level of affordable (rented) housing is also a prevention measure.

The second dimension is that of general preventative measures versus measures targeted at specific groups who are at a high risk of becoming homeless. Information and advice strategies encompass both of these. For example there may be specialist services aimed at people about to leave prison, or young people who have been in the care of the local authority. However there may also be general awareness-raising so that (for example) women experiencing domestic abuse are equipped to move without first becoming homeless.

The third dimension is the availability of preventative measures at critical points in a person's life, such as the initial transition to independent living (e.g. young people), the breakdown of a relationship (e.g. middle aged people) or the onset of illness (e.g. older people), where appropriate interventions can prevent homelessness.

Linked to these three key elements is the extent to which the approach is proactive or reactive. For example, there is a clear difference in approach between having information available for young people and ensuring that elements of how to leave home successfully are taught in schools.

A recent evaluation of prevention strategies in the UK (Department of Communities and Local Government, 2006) indicates that the most widely adopted approaches to homelessness prevention are:

- enhanced housing advice
- schemes to enhance access to private tenancies
- family mediation
- domestic violence victim support
- prison based homelessness services
- sustaining tenancies.

In Ireland, on the other hand, the main objective of prevention is to ensure that people leaving institutions do not become homeless. The strategy's main theme is: "the need to ensure that no one is released or discharged from state care without the appropriate measures in place to ensure that they have a suitable place to live with the necessary supports".

#### *Quality of Shelter Provision*

The issues associated with the regulation of the quality of accommodation or of services provided in emergency or temporary facilities for homeless people are not well documented in research across Europe. While some local or national studies have been undertaken these are not accessible outside the national language. It is therefore difficult, at this time, to provide a coherent European perspective on this issue.

However, it is our perception that the regulation of accommodation provision is not strongly developed in legislation in many countries. Regulation or control of the quality of hostel or shelter accommodation provided for the homeless occurs under different approaches (where it is regulated at all). One clear approach to regulation occurs under purchaser-provider arrangements where public sector agencies (central government or municipalities) commission services provided by NGOs or private sector bodies. Even here, however, regulation is more focussed upon issues of health and safety rather than standards of provision (e.g. self-contained accommodation, respect for privacy). Where some form of care or support is provided then services (including accommodation) may be regulated but here the main areas of concern relate primarily to the standards of care and issues concerned with protection of vulnerable groups from exploitation, and issues of accommodation are not a central concern. There remains, in a number of countries, some vagueness whether care in homeless hostels falls within the scope of regulation. In the UK (Scotland), for example, the Care Commission regulates the services provided in defined services including hostels for the homeless

(providing housing support) and accommodation for ex-offenders but does not include services providing overnight accommodation (Scottish Care Commission, 2004). In Denmark, regulation applies to §94 institutions but these do not include overnight shelter accommodation. Finally, regulation occurs in some countries where dwellings in multiple-occupancy are registered under housing legislation. However, such regulation does not always cover hostel accommodation and where it does it tends to focus on health and safety issues rather than normative standards of quality of provision.

#### *Access to permanent housing*

The policy debate in relation to this aspect of homelessness policies can be understood to revolve around three related issues – the ability to exercise or guarantee the right to housing, the role of temporary or transitional housing as a stepping stone to permanent housing and the role of support services or of supported housing in enabling vulnerable people to sustain a tenancy.

The debate surrounding the issue of the right to housing requires discussion of the nature of housing rights, the supply of affordable housing and the effectiveness of housing allocation mechanisms. For example, in France, the Besson Act (1990) guarantees the right to housing and obliges authorities to adopt schemes to house disadvantaged people and to create a fund to help people who have difficulties in obtaining a dwelling or keeping it. However, the *Haut Comité* have argued for the need for this right to become justiciable because of the complex division of competences between the different levels of government and the strength of local protectionism, sometimes strengthened by a perversion of the concept of social mix in the context of a shortage of social housing (Lacharme, 2006). In Scotland, while recent legislation ensures that (by 2012) all homeless households (and not just those deemed to be in priority need) will have the right to accommodation, there is concern at the impact this will have on the allocation of social housing (Ministerial Statement, 2005).

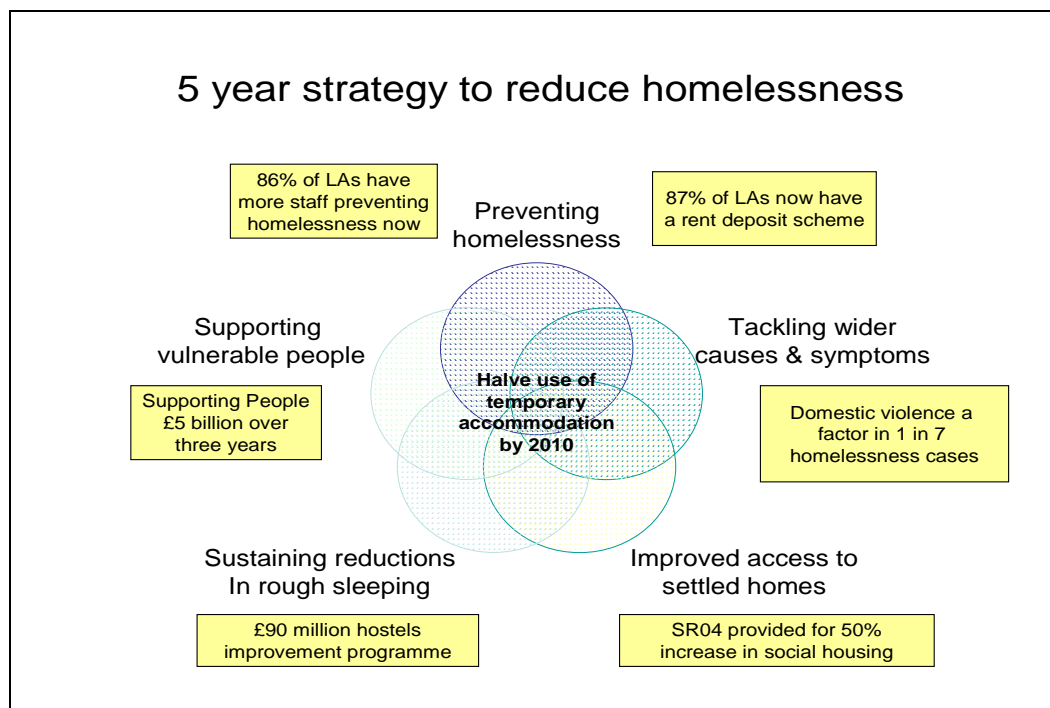
The Norwegian objective to reduce reliance on temporary accommodation, and to eventually phase it out, finds echoes in other countries. In England policy aims to reduce by half the use of temporary accommodation by 2010 while, in Scotland, recent regulations require accommodation for families and pregnant women to meet certain standards. An inter-departmental policy study<sup>7</sup> undertaken in the Netherlands (IBO MO, 2003) identified bottlenecks in the current shelter and support system and formulated policy variants aimed at a more efficient and effective range of services. Proposals approved by the government aim to reduce the length of time spent in temporary shelters by (inter alia) providing better prison aftercare, improving the use and effectiveness of support services and improving the distribution of housing and the allocation of accommodation.

In most of these countries, the policy debate centres on the role of temporary or transitional housing in the routes out of homelessness and the negative impact that prolonged stays can have on developing independence and reducing the risk of repeat homelessness. Criticisms of the use of temporary accommodation include the disruption to families, the inefficiency involved in delivering appropriate services, difficulties in coordinating services and the poor quality of much of the accommodation. The 'Housing First' strategies, developed in the USA (National Alliance to End Homelessness, 2000), aim to remove the need for temporary accommodation by providing permanent housing (with support where necessary). Research in Ireland has argued that investing in

permanent rented housing for people who are homeless is much more cost effective than supporting the same households in supported temporary accommodation (Courtney, 2005). However, critique is also associated with the gatekeeper or control aspects associated with the concept of the 'staircase of transition' or 'continuum of care' models with which temporary accommodation is associated (Sahlin, 2000).

In the context of policies aimed at the prevention of homelessness, access to permanent housing frequently involves the provision of support in order to ensure the sustainability of the housing outcome. This can involve the provision of supported accommodation (normally for a transitional period) or the provision of (floating or ambulatory) support to people in permanent housing. Detailed discussion of the role of support in housing for homeless people in Europe can be found elsewhere (Edgar et al, 2000). There is also evidence of the emergence of alternative residential care provision for older homeless people in a number of countries (e.g. Denmark, the Netherlands and the UK in particular; see Edgar and Meert, 2005). Good practice suggests the need to separate provision of housing from the provision of support services and the de-coupling of tenancy rights from support obligations (Edgar et al, 2000). The UK (England) has arguably developed the concept of supporting people in relation to homeless strategies more than other countries and linked this to the overall prevention focus of their strategy to reduce homelessness (see Figure 1).

Figure 1 The Role of Supporting People in the English Homelessness Strategy



Source: Gale A (2006)

### A.3 European comparative aspects

It has been argued that the Esping-Anderson typology of welfare regimes (Esping-Andersen, 1990) does not apply well to the housing and homelessness policy arenas (Edgar et al, 2004). Nevertheless, it is possible to identify clusters of countries in Europe which share similar experiences in relation to the scale and nature of homelessness and the nature of government intervention to deal with it (Edgar et al, 2004).

First, it is possible to distinguish countries with a federal or devolved government structure (Austria, Belgium, Germany, Spain, the UK). In all these countries, the autonomous regional governments have responsibility for homeless strategies. Other countries can be distinguished on the basis of those that have a strong central government or state role from those with more devolved responsibilities for housing and homelessness (France among the former and Italy among the latter for example). Third, the countries of the new member states exemplify situations where homelessness is linked more strongly to structural housing issues and to relatively weak welfare provisions for vulnerable groups (e.g. lack of state pension arrangements for older people). Intervention in these countries is characterised by recent legislation (post 2000), a lack of clear responsibilities at central government level for homeless policies and a lack of institutional capacity (both in relation to the professional skill at municipal level and to the development of NGO capacity). Finally, there appear to be a group of countries where the increase in homelessness is relatively recent and is associated with a rise in immigration (e.g. Spain, Portugal, Greece).

In this context, relatively few countries have developed National Homeless Strategies, though a larger number have regional or municipal strategies. Where national strategies have emerged these have not always involved all the relevant Ministries. A wider range of countries address homelessness through more general policies on social exclusion. Throughout Europe the issues associated with homelessness in rural areas and approaches to dealing with it are under-researched and seldom explicitly tackled in intervention strategies (Cloke et al, 2002).

### A.4 The contribution to the European policy debate

The Norwegian experience highlights many of the current underpinnings of the European debate on homelessness strategies including:

- the need to develop national strategic policies on homelessness that involve all relevant Ministries;
- the need to identify mechanisms for local delivery of policy – in the Norwegian case this is achieved by collaboration rather than regulation and enforcement mechanisms;
- the need to have clear responsibility for co-ordination and implementation (in the Norwegian case this is achieved through the agency of the *Husbanken*);
- the need for clear targets and mechanisms for measuring outcomes against a baseline of reliable information;
- the need for evidence based policies.

In addition, the Norwegian strategy identifies some specific issues that are emerging as key issues or where there is still insufficient evidence or debate. These include:

- Quality agreements in relation to the standards of hostel accommodation;
- Collaboration protocols between institutions and service providers / local authorities;
- Development of 'housing first' policies and phasing out of temporary accommodation.

## A.5 Transferability to and learning value for other Member States

The Norwegian strategy demonstrates many of the features of good practice that we may associate with the development of strategies to combat homelessness including clear and achievable objectives, baseline information from which to measure progress, clear targets by which to measure outcomes, co-ordination at central government level involving all relevant Ministries and regular review of the policies.

Taking these good practice issues as a sine qua non of policy development in any country intent on solving the problems of homelessness, what then are the issues that the Norwegian experience throws up from which other countries can learn?

These issues, which are identified more fully in Section D, can be summarised here to include:

- Institutional release and collaboration agreements (between central government and local government agencies and between public and voluntary sector agencies).
- The role of a national co-ordinating agency (in this case the *Husbanken*).
- Quality standards for hostel accommodation.
- The role of and need for temporary accommodation.
- Access to permanent housing.

## Part B The main elements of the policy

### B.1 Background

A paradigm shift occurred in Norwegian housing and homelessness policy following the presentation to Parliament, in 1999, of the "Equalisation" white paper on the distribution of income and living conditions. One outcome of that white paper was the establishment of a national project to combat homelessness entitled "Project Homelessness". This project helped to establish a political consensus on the importance of combating homelessness and was the pre-cursor of the national strategy presented to Parliament in a housing policy white paper in February 2004 and which is the subject of this Peer Review.

A significant feature of the national strategy to combat homelessness is that it is presented under the umbrella of a national housing policy whose aim is to ensure an efficiently functioning housing market. This indicates a structural analysis in which the aim is to provide housing for groups who are disadvantaged in the housing market and to provide measures to enable these groups to continue to live in their own homes. Homelessness is thus targeted as a housing issue and a problem of access to adequate and secure housing, in which the support needs of individual homeless people are one route to achieving and sustaining this goal. This is in contrast to policies in some countries which perceive homelessness primarily as a problem of social policy. Thus, while four Ministries have collaborated in the preparation of the strategy, it is the Ministry of Local Government and Regional Development that is the lead ministry rather than the Ministry of Social Affairs (as was formerly the case).

In order to properly appreciate or evaluate the policy it is necessary to understand the housing market context and governance context in Norway. Norwegian housing policies have consistently promoted home ownership and hence the overwhelming majority of homes are privately owned (77%) or privately rented (21%) with, in consequence, a very modest public housing sector. To appreciate the governance context of this strategy it is necessary to understand the role of the Norwegian Housing Bank (*Husbanken*) and the autonomous role of municipalities in delivering policies.

From an initial concern to deal with an absolute shortage of houses at its inception in 1946 the "State Housing Bank has gradually been transformed from being a tool to facilitate houses at reasonable prices for ordinary people, to becoming a tool for implementing the Government's policy on securing vulnerable groups in the housing market" (Hansen, 2006). Since the launch of Project Homelessness in 2000 the *Husbanken* has been the responsible agency for co-ordinating the strategy on homelessness.

While the strategy under discussion is a national strategy approved by Parliament, the responsibility for its implementation lies with the municipalities. As a relatively small country (population 4.6 million) with a dominant capital city and a dispersed predominantly rural population, Norway has 431 municipalities which are, by definition, predominantly small; only eight have more than 50,000 inhabitants. Despite this, the principle of local governance is strong and decision-making functions have continued to be devolved to this smallest executive tier of government so that the municipalities are responsible for most of the welfare services provided to the public. This does, however, raise issues of institutional capacity and may account for the fact that the three tiers of government (national, county and municipality) have evolved a collaborative approach to the implementation of the homeless strategy.

These governance issues – the overall political consensus, the collaboration between the ministries involved, the role of the *Husbanken* and the enabling approach adopted to implementation operating through the municipalities – are significant factors which will emerge in the description and evaluation of the strategy components. They are also significant factors in our discussion of the transferability of the strategy components.

## B.2 The goals and target groups of the policy

Within the overall aim of ensuring that everyone has access to adequate and secure housing, the strategy document establishes a number of clear strategic objectives and establishes performance targets in relation to each objective. Table 2 summarises these goals and targets and identifies the target groups and baseline information in relation to each performance target using information provided in the strategy document and related sources. These strategic objectives stress the twin outcomes to which the strategy is directed namely – the prevention of homelessness and access to secure permanent housing.

**Table 2. Goals, Target Groups, Targets and Baseline Situation**

Goal	Target Group	Performance Target	Baseline
Combat Homelessness	Evicted / threatened by eviction	Reduce - Notices by 50% Evictions by 30%	2004 (1) 14,829 3,326
	Prisoners	Should not need Temporary housing	2004 (2) 3% of stays in temporary housing are ex-prisoners
	Institutional Population	Should not need Temporary housing	2003 (3) 34% of homeless (1,800) 5% of stays in temporary housing
Shelter Accommodation	Shelter users	Should have a - Quality Agreement	2004 (4) 13.2% of stays had no quality agreement
Permanent housing	Homeless	3 months stay maximum	2004 (5) 35% were more than 3 months

Source: 1. Strategy document 2006; 2. KOSTRA (2004); 3. NBRI (2003); 4. Strategy document (2006); 5. Strategy document (2006)

This brief summary of the strategic objectives illustrates that the policy is evidence based. Three surveys of homelessness have been undertaken (in 1996, 2003, 2005) and the survey planned in 2007 will allow the baseline data to be monitored. Specific research based evidence (funded under the strategy as well as by individual Ministries) can also be drawn upon. While there is a concern about the completeness and quality of data provided by the municipalities, the *Husbanken* is addressing this capacity issue by funding a data collection system called 'Bokart' which is currently used in 67 (of the 431) municipalities (Kristensen, 2004). In this context 'evidence-based' means the attempt to develop policies based on available evidence and research; this does not imply that this evidence is accurate, reliable or sufficient.

Since two key performance targets are to limit the time homeless people spend in temporary accommodation and to ensure the quality of overnight shelter accommodation, it is important that there is a clear and consistent definition of these aspects. The definition of homeless accommodation and of temporary accommodation is a difficult issue in many countries which complicates comparative measurement of homelessness (Edgar et al, 2005). However, the issue of the minimum standards and quality of shelter accommodation is not universally addressed across Europe. To the author's knowledge only one other country has a legislative basis guaranteeing the quality of shelter accommodation for homeless people. In Scotland, since December 2004, any accommodation used as temporary accommodation for families with children must meet certain basic standards. The definition of temporary accommodation in Norway is being reviewed as part of the implementation of the strategy (Strategy document 2006; p26).

The homelessness survey undertaken in 2005 indicates that a quarter of homeless people came formerly from either prison (12%) or an institution (14%) and that 8 % had been released from prison and 16 % discharged from an institution within six months of registration. This evidence underpins the purpose of that strategic target. However, the survey also indicates that older people and men are more likely than younger people and women to be among this discharged group (National Building Research Institute, 2006; pp91ff). While this is consistent with research elsewhere (e.g. Seymour and Costello, 2005; Social Exclusion Unit, 2001), it does indicate that the prevention of homelessness needs to address the issue of repeat homelessness among more vulnerable groups. This is not a feature of the current strategy.

### **B.3 The legal and financial provisions**

#### **B.3.1 Legal and Governance Context**

Although the strategy has been developed within the framework of a national housing policy, the legal basis for action against homelessness remains the Social Services Act (1991). This legislation provides the legal framework relevant to support to manage independent living (Act No 81/1991; Act No 66/1982; Act No 66/1982, Municipal Health Service Act). It is this legislation that requires local authorities to provide temporary housing for those people who are unable to house themselves. Hence while this provides a right to temporary housing there is no equivalent right to permanent housing and attempts to introduce this have been eschewed by Parliament. The legislation also provides, to a degree, a right to support for people with housing problems.

Within the framework of the strategy municipalities are encouraged to prepare plans of action or strategies for the provision of housing support. By September 2005, half (228) of the 431 local authorities had received grants from the *Husbanken* to prepare these plans and 40% (178) had completed their plans.

The governance context has been described briefly above. The development of this as a national strategy has involved collaboration between four ministries (see Table 4). However, the coordination of the strategy implementation has been devolved to the *Husbanken* in collaboration with the

Directorate for Health and Social Affairs. The Directorate is a 'competence body' (organised under the Ministry for Health and Care and the Ministry of Labour and Social Inclusion) which plays an important advisory and implementation role. Related aspects of the legal and governance context are described below in the section on institutional arrangements.

### B.3.2 Financial Provisions

The Husbanken and the Directorate for Health and Social Affairs (DHSA) provide the main funding for initiatives associated with the homeless strategy. These financial measures include grants to municipal authorities and NGOs (system measures) and grants and loans to individuals (individual measures). Although a range of disadvantaged people qualify for individual assistance the *Husbanken* states that homeless people are the top priority for loans and grants. Table 3 summarises these financial measures and the budgets associated with them.

A number of system grants are directed specifically to projects to assist the homeless or prevent homelessness. The DHSA grant to improve or develop social support services for homeless people and substance abusers amounted, in 2006, to €6 million. A proportion of the grants for mental health, substance abuse and resource intensive users is also directed to the prevention of homelessness under the strategy. The *Husbanken* competence grant is aimed at the development of new projects, innovative projects and inter-agency working. Almost 40% of the total budget of €8.3 million is targeted at homeless initiatives within the strategy related to housing support and prevention. The rental flats grant, which amounts to €25 million in the current year, provides one-fifth of the capital cost of rental housing projects where homeless people are the target group. This grant can be topped up with a (low interest - *check?*) loan from *Husbanken* for the remaining finance.

**Table 3** Financial Provisions relevant to the Strategy

Agency	Level (2)	Grant	Budget (3)	Details
State Housing Bank (1)	System	Competence grant	NOK 65.8 m (€8.3m) NOK 26.3 m (€3.3m)	Development project grant To national strategy initiatives in 2005
		Rental dwellings	NOK 202 m (€25 m)	20% of investment costs of rented housing for homeless
	Individual	Home Purchase		Individual grant often combined with start-up loan and housing allowance
		Adaptations / Design	NOK 372 m (€47 m)	Low income households; disabled, elderly, disadvantaged
		Housing Allowance		Target groups named (p11) Being reviewed (autumn 2007)
		Start-up loan		People with equity problems
Setting up home	NOK 576 m (€72.6m)			

Agency	Level (2)	Grant	Budget (3)	Details
Health and Social Affairs	System	Mental health in municipalities	NOK 2.4 b (€0.3 b)	'Strengthen home based services'
		Substance abuse	NOK 120 m (€15m)	Emphasis on holistic services
		Support Services in housing	NOK 48 m (€6 m)	Homeless and substance abusers 80 municipalities
		Resource intensive users	NOK 1.85 b (€0.23) 2005	

*Note: 1 - Homeless are top priority for loans and grants*

*Note: 2 - System level are given to municipalities and / or NGOs; Individual level given to qualifying persons*

*Note: 3 - 2006 unless otherwise stated*

## B.4 Institutional arrangements

Although this is a national strategy developed by central government ministries and approved by Parliament, its implementation relies upon the large number (431) of relatively small municipalities (only 8 have populations over 50,000). The approach adopted by central government to facilitate this implementation has been an enabling strategy rather than one of legislative diktat and enforcement. Because of the large number of small rural authorities, the KS and the County Governors are key bodies for central government in the effective implementation of the strategy.

Table 4 summarises institutional responsibilities in relation to the phases of development, implementation and monitoring of the strategy. This highlights the role of central government in the development of the strategy. Implementation of the strategy is co-ordinated by two executive agencies - the *Husbanken* (which has co-ordinating responsibility for implementation) and the Directorate for Health and Social Affairs (which has an important advisory and funding role). Regional government offices (County Governors, Enforcement and Correctional Services) also play important implementation roles. The review and monitoring of the policy lies again with central government but the *Husbanken* and DHSA provide much of the evidence base on which that will depend.

Collaboration Agreements have been employed as the basis for action importantly between the Norwegian Association of Local and Regional Authorities (KS) and the four key ministries. However, collaboration agreements have also been used as the basis for action between municipalities and the Correctional Services in relation to prisoner release protocols and housing.

In addition to using collaboration agreements and protocols, networks and forums have been established. Contact forums involving the largest cities have arranged two peer reviews of elements of the strategy. Regional contact forums have been employed to facilitate coordination and feedback between regional offices of state bodies and the municipalities. In addition, the *Husbanken* coordinates 19 networks of municipalities in which around a quarter of municipalities participate. The

intended role and perceived effectiveness of these networks is discussed more fully in section C below.

**Table 4 Institutional Responsibility for the Homeless Strategy**

Stage	Responsibility	Comments
Development	<p>The Ministry of Labour and Social Inclusion</p> <p>The Ministry of Health and Care Services</p> <p>The Ministry of Justice and Police</p> <p>The Ministry of Local Government and Regional Development</p>	<p>Section 5 §4-5 Social Services Act</p> <p>Substance abuse, mental health, Section 4 and §3-4 Social Services Act</p> <p>Controls correctional services budget Execution and enforcement commissioners</p> <p>Housing Policy and legislation and budgets administered by Husbanken</p>
Implementation	<p>Husbanken</p> <p>Regional Contact Forums</p> <p>County Governors</p> <p>Municipalities</p> <p>Execution and Enforcement Authority</p> <p>Correctional Services</p> <p>Health Authorities</p> <p>The Directorate for Health and Social Affairs</p>	<p>Co-ordinating responsibility System and individual grants and loans</p> <p>Local Collaboration model</p> <p>Government representative in the County</p> <p>Main players in implementation</p> <p>Evictions and debt management</p> <p>Released prisoners housing</p> <p>Discharged patients housing</p> <p>Municipality funding, research funding, advisory role</p>
Monitoring	<p>The Directorate for Health and Social Affairs</p> <p>Ministries</p> <p>Husbanken</p>	<p>Monitoring and implementation responsibility</p> <p>Specific research initiatives</p> <p>Strategy report Bokart Information System Research Homeless Survey</p>

## B.5 Future changes proposed to the policy

Future changes planned for the strategy are understood to include:

- Post 2007 Strategy Review ;
- Inter-ministerial working group on repeat homelessness to report in January 2007;
- Phasing out temporary housing;
- Focus on target of reducing the length of stay in temporary housing.

## Part C The results so far

### C.1 The quantitative results of the policy

An estimated 5,500 people were identified as homeless in November 2005. Overall the level of homelessness in Norway reduced between the first survey in 1996 and the second survey in 2003 and has shown a small increase since that date. This apparent increase could be due in part to the survey methodology and in part to the fact that hidden homelessness has been made more visible (e.g. there has been a significant increase in the proportion identified as living temporarily with family and friends).

The scale and nature of homelessness is described in the report of the most recent survey on homelessness (Norwegian Building Research Institute, 2006). A summary of some key findings (selected by the author) is presented in Appendix 1. The demographic profile is similar to most European member states (at least among the EU-15) and conforms well to other countries of similar size and degree of urbanisation.

A number of these findings have relevance to this evaluation which has implications for the focus of the strategy or its future development. These include the fact that:

- Homelessness has increased among the small to medium size municipalities (under 40,000 people). This may point to the need for greater targeting of the forums and of competence grants.

Use of temporary accommodation increased to 2003 and remained stable since then. This may indicate the need to review the role of temporary accommodation and carefully examine the intention of phasing it out.

One third experience homelessness as a recurring problem. Yet repeat homelessness is not a target of the current strategy and there appears to be little research on the issue.

Older people are more reliant on overnight shelters. Are quality agreements adequate to meet their specific needs or is there a requirement for specific provision?

Young people are more reliant on family and friends for temporary stays. Is there a need for more prevention focussed on the education sector and targeted information / advice?

### *Meeting the Targets Set*

The strategy identified a number of key performance targets (see Table 1). Since a quarter of the homeless were identified in the 2005 survey as being subject to eviction (and findings indicate that, for these people, eviction was the main cause of their homelessness) the target to reduce this figure by half (if achieved) will make a significant impact on the prevention of homelessness and of recurring homelessness. The survey also shows that a quarter of the homeless has been released from prison or discharged from an institution and hence the target to ensure that these people do not need to rely on temporary accommodation is also significant in the prevention of homelessness. A quarter of the homeless live in overnight shelters and the strategy aims to ensure that these shelters meet an adequate standard of provision; though the definition of adequate standard is under discussion.

Monitoring information provided by *Husbanken* in relation to these performance targets compared to the 2004 baseline is summarised in Table 5. This shows some significant results in the first year of operation of the strategy. The eviction target of reducing the number of eviction notices and actual evictions resulted in a 20% reduction compared to 2004 against an aim of halving these indicators. This represents a significant achievement in a short time. The proportion of people spending time in temporary accommodation on release from prison or institution also shows some reduction. No statistical information is available (at the time of writing) on the proportion of people spending more than three months in temporary accommodation in 2005 but the indications are that municipalities are finding it difficult to achieve this goal and that, overall, the use of temporary accommodation has been increasing (see Drøpping, 2005). This is consistent, however, with trends in other EU-15 countries (e.g. the UK – ODPM, 2006; Netherlands – IBO MO, 2003; France - Zidi, 2005). It is arguable that, to make sense of these statistics for the future development of the strategy a distinction needs to be made between ‘halfway housing’ or interim accommodation, which forms part of a planned and agreed programme of integration, and temporary accommodation which is employed for people awaiting re-housing. Furthermore the target of not spending more than a certain time in temporary accommodation is also worthy of further consideration (and perhaps more sensitive measures). While there are good reasons to reduce the time spent in temporary accommodation (especially for families with children), this needs to be balanced against the need to ensure that the permanent housing is suitable and sustainable (i.e. adequate support in place) in order to prevent repeat homelessness, family breakdown or abandonment.

This brief overview indicates significant achievements. However, there is an indication from the survey results and from the municipalities reporting on these indicators that there may be a need to target the small to medium size local authorities (population 10,000 to 40,000) to make significant further progress in reducing these targets. For example, the 2005 survey indicates that half of homeless people in these smaller authorities had experienced eviction.

The increase in the use of temporary accommodation may, in itself, be an indication of the success of the strategy in revealing levels of hidden homelessness or in preventing homelessness among some vulnerable groups (e.g. former prisoners and patients). While the aim to reduce dependence upon temporary accommodation is laudable, this form of accommodation has an important role to play in managing the re-settlement of some vulnerable groups (e.g. young people leaving care, prisoners and patients leaving long term incarceration, people with dual diagnosis whose support needs require time to assess) into independent permanent housing. Hence there is a need to review the definition and role of temporary and interim accommodation in this context.

However, the increase in (or recognition of) the numbers living temporarily with family and friends (especially among the younger age groups) raises issues in relation to the acceptability of shelter accommodation and the adequacy of the level of provision of temporary or supported accommodation. This is also significant since this younger age group are also over-represented in the eviction statistics. The strategy does not set a performance target in relation to this indicator.

Furthermore, the 2005 survey suggests that one-third of people experience homelessness as a recurring problem but the strategy does not establish a specific approach to this issue. The extent to which some of these prevention targets will address this question is unclear from the evidence.

**Table 5 Results – Targets compared to 2004 baseline**

	Performance Target	2004	2005
1	Number of eviction notices (Husbanken)	14,809	11,773
2	Number of evictions (Husbanken)	3,326	2,703
3	No one shall spend time in temporary accommodation upon release from prison (SSB/KOSTRA)	3 %	2.8 %
4	No one shall spend time in temporary accommodation upon discharge from institutions (SSB/KOSTRA)	4.8 %	4.5 %
5	No one shall be offered overnight shelter without a quality agreement (SSB/KOSTRA)	13.2 %	12.9 %
6	No one shall stay more than 3 months in temporary accommodation provisions (SSB/KOSTRA)	35 %	
	<i>Stays in total</i>	3,663	4,351
	<i>% of stays lasting longer than 3 months</i>	35 %	
	<i>% of households with children under 18</i>	2.5 %	2.2 %

*Source: Norwegian State Housing Bank (7 July 2006)*

## C.2 An evaluation of the delivery system of the policy

### *Municipalities Involvement*

As a national strategy formulated by central government and approved by Parliament, effective implementation relies upon the action of autonomous municipalities. Effective delivery requires that action takes place where it is needed and that national goals are achieved with some degree of uniformity across the country. However, the “government has chosen an enabling strategy, providing various kinds of measures to enable and motivate the municipalities” (Hansen, 2006; p29) rather than using other agencies to provide the services or mechanisms of enforcement and regulation.

Delivery of a national strategy in the Norwegian context raises two challenges for government. First, there is the need to increase the institutional capacity of small rural authorities to deliver appropriate or new services. Second, there is the difficulty of providing services in rural communities in an economical and sustainable manner (especially for people with intensive support needs).

The strategy has stressed the inclusion of smaller municipalities and specific budgets (e.g. the Competence Grant) as well as action (e.g. the 19 Municipal Networks) have been used for that purpose. The evidence indicates that only a small percentage of authorities apply for the grants and that only one-third have participated in the municipal networks (by June 2006) although the number of participants has been increasing. This is not to imply that the enabling strategy is flawed. Rather, it stresses the difficulty of delivery in a predominantly rural community. Issues of rural homelessness and service delivery in rural areas are under-researched in Europe (Cloke et al, 2000; Cloke et al, 2002). The rural homelessness issue, in Norway, can be evidenced by the fact that one-third of municipalities had no petitions for eviction in 2005 and a larger proportion had less than five petitions. This dilemma could be addressed in a number of ways:

- develop primary-secondary (or city-region) relationships between larger authorities and their smaller neighbours (e.g. using collaborative bids for grants);
- develop purchaser–provider models with service providers operating across several authorities (e.g. using NGOs or other public sector bodies);
- develop national umbrella organisations to work with smaller authorities (e.g. on the model of the Y-Foundation in Finland).

### *Co-ordination of National Strategy and Local Delivery*

The *Husbanken* and the Directorate for Health and Social Affairs play critical roles in the co-ordination and local delivery of the strategy.

The *Husbanken*, operating in the manner of an executive agency carrying out government policies but at arms length from it, has co-ordinating responsibility for executing the strategy. This co-ordinating role is, arguably, made effective because of the financing role it plays in implementing housing policies. The administration of the Competence Grant to municipalities as well as the grants to individual households, among whom the homeless are given highest priority, allows co-ordination and enabling actions to be backed by influence.

Established as a Directorate in 2002, Health and Social Affairs plays a key role in implementation which, in the homelessness arena, focuses particularly on the municipalities and other co-operating bodies. Their resource base in relation both to general social services (crucially including services in mental health and drug addiction) and to the provision of grants to increase capacity and competence in services, provides an important locus in relation to implementation, monitoring and co-ordination. Homeless policies are often impeded because of the difficulty of marrying up mainstream policies and budgets with specialist services for homeless people. For example, policies in the UK have been criticised for the lack of joined up action between mental health and drug addiction services and homeless strategies (Edgar and Williams, 2006; Quilgars and Pleace, 2003; Stephens, 2002). The position of the DHSA allows, on the face of it, homelessness initiatives to be mainstreamed more effectively (e.g. in relation to substance abuse, mental health and homelessness).

Ensuring that national objectives are understood and that local action addresses these needs (and does so in a relatively uniform manner across the country), in the absence of regulatory action, requires a system of mutual learning, feedback and support to municipalities charged with their implementation. The collaboration agreement between the Association of Local and Regional Authorities (KS) and the relevant Ministries has been stated to be a key feature in securing municipal participation in the strategy. Because of the large number of municipal authorities the County Governors have a key role in ensuring uniformity in implementing the national policies. Regional contact forums have been established to ensure co-ordination of government offices at regional level. The four main cities have organised liaison committees involving political leaders as well as officials and have conducted peer reviews on aspects of the strategy. Finally the 19 municipal networks, linked to the *Husbanken* regional offices, provide a framework for information, training and exchange. The role of the forums is one of mutual learning and exchange and, within the overall approach of an enabling strategy, participation is voluntary. Although this is an impressive range of initiatives, participation has taken time to develop and evidence for ensuring uniformity of action is limited. Given the evidence from the 2005 homelessness survey, targeted action directed particularly to medium sized municipalities may be required.

#### *Inter-agency Working - Collaboration Agreements and Protocols*

Since the strategy is focussed on prevention the intention, driven by the performance targets, is to change structures and practices that could produce homelessness. Hence improved inter-agency working has been a feature of the strategy objectives especially in relation to institutional and prison release. This has been achieved mainly through the use of collaboration agreements and standard protocols for municipalities to use with the regional offices of government bodies in relation to the provision of housing and support. The KS and the Ministry of Justice and Police signed a collaboration agreement in relation to the allocation of housing and support for inmates released from prison which included a standard protocol or agreement for municipalities to use with the Correctional Services. This has been employed by a number of (mainly larger urban) municipalities and the Trondheim agreement has been the subject of a national peer review which identified areas for improvement. A number of collaboration agreements have also been drawn up between municipalities and enforcement offices to prevent eviction and improve the system of handling eviction, debt and re-housing.

Although a number of supported housing projects have been established for people discharged from institutions, there has not been a similar 'template agreement' developed between the regional health authorities and municipalities.

### C.3 Other results and achievements of the policy

In contrast to homeless strategies in other countries (e.g. see the Danish Peer Review 2005), this national strategy does not focus on specific target groups. Rather, the intention is to focus on people in vulnerable situations in the housing market. In this context, the prevention principles of the strategy together with the philosophy of providing permanent long-term housing with normal tenancies has resulted in improvements in organisational practice and in inter-agency working.

The policies in the strategy are clearly evidence based and considerable investment has been made in research and in information and monitoring systems (e.g. the homelessness surveys and the Bokart information system).

The strategy document lists a wide range of NGOs who are participating in the project and it is stated that the Government "will prolong an exception from the Act on public procurement to make it easier for municipalities to collaborate with non-governmental organisations in building, facilitating and running houses for homeless people" (Hansen, 2006; p24).

### C.4 Obstacles, Constraints and Factors of Success

#### *The obstacles and constraints*

Structural constraints affecting the strategy include the lack of social housing and of supported accommodation. This constraint is manifest in findings from the homelessness surveys which indicate an increase in the number of homeless people whose only problem is lack of permanent (affordable) housing as well as the reported increase in the use of temporary accommodation.

Institutional constraints revolve around the difficulty, in a national strategy developed by central government ministries, in engaging a large number of small mainly rural authorities. Implementation at local level requires training and investment in organisational competence which will take time to operate. This is evidenced in the number of municipalities yet to participate in the networks and the lack of applications for available grants reported by *Husbanken* and the Directorate for Health and Social Affairs.

Constraints related to specific strategic targets revolve around the time-scale needed to phase out temporary accommodation and to improve the quality of shelter accommodation. The homeless surveys found that one-third of people in temporary accommodation remain for longer than the three month maximum target. Hansen (2006) refers to a study which argues that (according to the professional staff interviewed) these people are unable to live in permanent housing indicating that, in

order to phase out temporary accommodation, there is a need for more follow-up and support services and more flexible alternatives such as the 'freak houses' initiative (Drøpping, 2005).

#### *The factors determining success*

On the basis of the information provided and discussions with staff from the relevant agencies involved a number of aspects influencing the success of the strategy may include:

- Political consensus
- Clear targets
- Adequate Financing
- Co-ordinating agency (Husbanken)
- Improved inter-agency co-ordination
- Model collaboration protocols leading to changes in administrative practices
- Targeting vulnerable housing situations not target groups.

## Part D The policy debate

The Norwegian strategy represents a shift to develop a national strategy, involving all relevant ministries with clear goals and targets and mechanisms of co-ordination, implementation and review. This is being achieved through an enabling strategy, the success of which will depend upon the actions of a large number of relatively small rural authorities. Nevertheless, there is evidence that the mainstreaming of prevention policies on homelessness have resulted in real achievements. Some aspects of the policy are still being debated nationally (e.g. the role of temporary accommodation, the definition of adequate or quality standards). This section identifies some questions for discussion arising from this brief review of the Norwegian strategy and makes a tentative initial suggestion of areas that could be examined in relation to policy transfer.

### D.1 Questions for Discussion

#### *Prevention*

- Focus on institutional goals – clear targets
- Upstream issues – information /advice, need for more supported or social housing
- Improved co-ordination between Health Authorities and Municipalities (especially related to substance abuse and mental health)

#### *Quality of shelters*

- Size of hostels and need for privacy (self-contained rooms) even in emergency hostels;
- Service based standards (rules, access to services etc).

*Sustainable rural services*

- Difficulty of providing a full range of services in rural areas

*Local delivery and institutional competence*

- Need for training and support as well as additional funding for staff development and competence – competence grants are example of good practice

*Sustainable support*

- Homeless support needs to be mainstreamed in supporting people frameworks
- Need recognition that support requirements need to be more than short term (six months) and need to be reviewed in relation to individual care plan and in relation to research evidence of need for support in medium term for some vulnerable groups (especially young and old)

*Settlement first and settlement plus*

- Role of temporary accommodation (distinction between emergency, interim and temporary or transitional accommodation)

*Collaboration agreements (and institutional release protocols)*

- The usefulness of template protocols for issues related to institutional release and eviction.

## **D.2 Main areas of debate / Issues related to transferability of the policy**

The seminar discussion will develop these issues more fully and these will be considered in the synthesis report. However, some issues of transferability are highlighted here in order to focus discussion during the seminar and to suggest aspects for reaction in the national Peer Review reports.

One important caveat when considering issues of transferability of policy is to ensure that the strategy adopted is relevant to the profile of the homeless population. Since the profile, and the causes of homelessness, varies between countries the strategies adopted can also be expected to vary in substance or in emphasis.

*Governance Issues/Process Issues*

While governance aspects are distinct between countries, the Norwegian experience may offer some examples of practice that could be of value to countries with devolved systems of government and/or rural populations. These include:

1. the role of the Husbanken as an arms length agency in co-ordinating the strategy is worthy of consideration.
2. the use of the 'forums' to improve practice and develop competence especially of smaller rural authorities could have use elsewhere. However, the ability to support this approach with

adequate funding especially, for example, in the form of competence grants targeted appropriately would seem to be necessary.

3. the use of standard template collaboration agreements to assist inter-agency working between different tiers of government or public and NGO sectors is a transferable idea.

#### *Output Issues*

Output issues and measures depend, of course, on the substance of the strategy objectives. For example, the issues of eviction and prison/institutional release are manifest in many member states but approaches can be expected to vary depending (inter alia) on tenure structure and the availability of homeless services in each country. The output issue of reducing the reliance on temporary accommodation and aiming to move people straight into permanent housing is an important feature of the strategy but requires debate and is not referred to here as a transferable policy for that reason. However, one significant feature can be considered to be applicable elsewhere:

4. Quality standards for hostel accommodation and the use of quality agreements.

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## Appendix 1 Definition of Homelessness used in the Homeless Surveys

*Extract from the Homeless Survey 2005*

### Definition

*Homelessness* is one of a number of terms describing a situation in which a person or household has no residence, or nowhere to live in the sense we normally associate with this. Another term used is "of no fixed abode". It describes a situation which, in extreme cases, means living rough, out on the street, but which, in most cases, means being provided with accommodation in one way or another, but not such that they *reside* there. It is difficult to draw a clear line between residing and being homeless. You need to determine the circumstances under which it can be said that someone is residing or not residing, i.e. is homeless.

This study uses the same definition as in 1996 and 2003 with a few clarifications:

*Homeless people are defined as people not owning or renting their own place of residence, but who are referred to casual or temporary accommodation, who live temporarily with relatives, friends or acquaintances, or who are held in custody or in an institution and are due to be released or discharged within two months and do not have a place of residence.*

*Homeless people are also people who do not have an arranged place to stay for the coming night.*

*People who live in a sublet place of residence or who live permanently with their next of kin or close relative are not classed as homeless.*

## Appendix 2 Summary of 2005 Survey of Homelessness in Norway

5,500 people homeless in the last week of November 2005.

The slight increase compared to 2003 is found in the smaller municipalities, especially municipalities with populations of between 10,000 and 39,000.

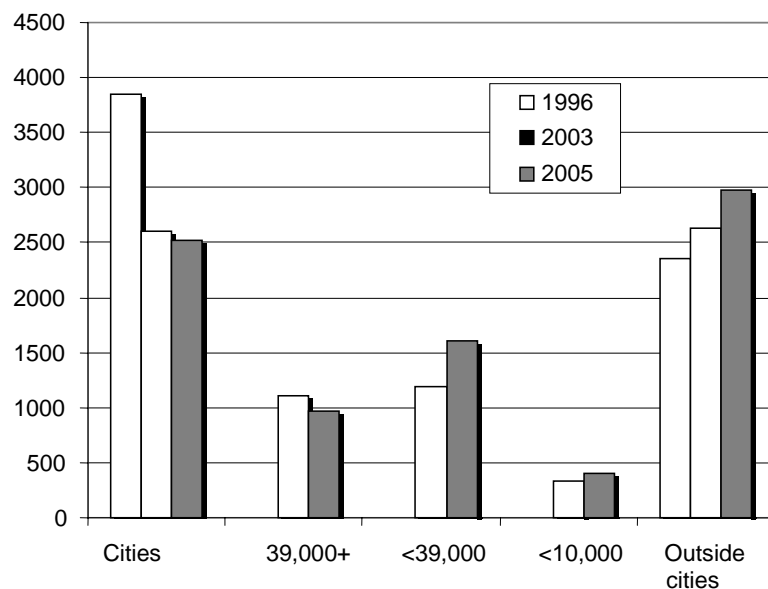


Fig. 0.1. Number of homeless divided between cities and municipalities

### Demographic profile

75% of the homeless are men

Homeless people are younger people. The average age is 35.

People born overseas are overrepresented among the homeless

The level of education is significantly lower than in the rest of the population

70% are registered as single

### Places of residence

- 42 % live temporarily with relatives, friends or acquaintances.
- 25% live in 24-hour shelters
- 15 % are in an institution
- 10 % under correctional services.

The proportion living with relatives, friends or acquaintances has increased significantly from 2003 to 2005.

The proportion under correctional services or in an institution has reduced: 33% to 25% (1996/2005).

The proportion without organised overnight accommodation for the coming night has reduced (4% - 1% 96/05).

The proportion of homeless people staying at temporary facilities was lowest in 1996 (19%) and highest in 2003 (27%); in 2005 (25%).

#### **Duration of homelessness**

- A third experience homelessness as a recurring problem.
- A significant reduction (10%) is evident in the proportion experiencing homelessness as a long-term persistent problem from 2003 to 2005.
- A larger proportion is acutely homeless in 2005 than in 2003.
- 30% in municipalities of less than 10,000 inhabitants are acutely homeless and 25% have been recurrently homeless over several years.
- In the four biggest cities, there is a lower proportion of acute homelessness than in the other municipalities and consequently more who experience homelessness over a longer period.

#### **Evictions**

- 25% were evicted in the period.
- In the smallest group of municipalities, almost half of all homeless people were evicted. Oslo and Bergen have the lowest proportion evicted (less than 20%).
- Younger homeless people are more often evicted than older people.
- There are no differences between men and women in the proportion evicted.
- There is almost no difference between families with children and others in rates of eviction
- For nine out of ten of those evicted, their homelessness is explained by the eviction.

#### **Intoxicating substances and health**

- 40% of homeless people are dependent on intoxicating substances in 2005.
- The smallest group of municipalities has the lowest proportion dependent on intoxicating substances.
- The largest group of intoxicating substances is narcotics, including pills.
- Less than 10% of the homeless <45 and fewer than 2% of the very youngest abuse alcohol.
- 15% of the homeless have been reported as having a mental illness or disability.
- The proportion assessed as having a physical illness has been increasing since 1996.
- Mental illness increased from 24% in 1996 to 32% in 2003 and to 38% in 2005.
- 25% of homeless people have a dual diagnosis of substance abuse/psychiatry.
- 75% have either mental illness, substance dependency or both elements.
- 57% were not discharged from an institution in the six months prior to the registration.
- 8% were released from a sentence and 16% were discharged from an institution.

### Special groups

- There appears to be a movement towards the oldest homeless people staying to a lesser extent in institutions and to a greater extent in 24-hour shelters.
- Homeless people < 20 are characterised by a high proportion being women and a high proportion having a non-Western native country. The majority live temporarily with family, friends or acquaintances.
- 1% of the homeless have no organised overnight accommodation for the next night. More than half of them have a history of homelessness over several years.
- 7% do not abuse intoxicating substances, do not have a noticeable mental illness and do not stay in or have not recently been discharged from institutions. This is now significantly larger than in 2003.