

Portugal's National Homelessness Strategy

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Overview/Introduction

Thank you for the opportunity to comment on Portugal's National Homelessness Strategy (PNHS) from the perspective of the Eurocities' Working Group on Homelessness (WGH). The WGH's model strategy for cities can be found at: www.eurocities.eu/uploads/load.php?file=Homelessness_final-AGOU.pdf. We welcome the PNHS as a positive way forward in reducing homelessness. We recognise that the Strategy does not cover all aspects of homelessness but appreciate the need for a pragmatic and staged approach to build consensus. A more radical strategy may have achieved less if agreement could not be secured with cities and other stakeholders. I am not qualified to comment on the constraints and opportunities in the Portuguese context, so have assumed that PNHS is a product of the constraints of that context. Therefore, these comments will focus more on the generic aspects of what is in the PNHS than what has been omitted.

1. A brief assessment of the possible relevance of the policy under review to other countries in the EU

The development of a National Homelessness Strategy is relevant and desirable for adoption by all EU countries. It works on many levels, including:

- Creating national expectations and with that a culture change that requires cities to consider homelessness and its prevention in strategic way. This invariably helps to move cities and NGOs from crisis responses based primarily on increasing the supply of hostels to responses based on the prevention of homelessness.
- Promoting a national debate that builds consensus and the exploration of new solutions.
- This strategy creates an opportunity to review services that have evolved to resolve homelessness in an uncoordinated way.
- This strategy provides an opportunity to move towards the development of national performance measures, standards and a policy, commissioning and delivery framework.
- The scope of this strategy is wide as are the performance measures e.g. for employment related activity.

Any national strategy has to strike a balance between providing a national direction and sufficient local flexibility to allow cities to respond to local circumstances and budgets. This is a difficult balance because if too proscriptive it is probable that if local services are configured differently it will be disregarded. If the strategy is too flexible then cities may have the opportunity to disregard the aims of the strategy. The PNHS seems to have considered this dilemma and produced a reasonable compromise.

The PNHS could, perhaps be strengthened by:

- Providing more direction for non-housing related agencies e.g. a duty to cooperate.
- A greater emphasis on prevention. Some of the interventions (this assertion maybe unfair as it's based on the Executive Summary) could be interpreted as focusing more on crisis interventions than prevention.
- The transferability of the Strategy to local contexts maybe helped by positive examples and a Code of Guidance that clarifies expectations and standards e.g. of NGO accommodation and security of tenure.
- The Strategy may benefit from guidance on the development of a whole market approach and more recognition of the need to explicitly triangulate strategy, commissioning and delivery. The WGH have found this approach useful, it is a mechanism for securing strategic outcomes, see end of document.
- The Strategy may also benefit from a more explicit requirement to predict future needs.

Listed below are the key developments in the implementation of the English legislation that led to a strategic approach. As you can see this began with the establishment of basic rights to accommodation for priority groups, through to the requirement for cities to develop strategies, followed by commissioning powers and then wider requirements for the prevention of homelessness to be considered in all allocations.

- The 1977 Housing (Homeless Persons) Act, which was amended by the 1996 Housing Act and placed responsibility for accommodating or advising homeless people on housing departments.
- The 2002 Homelessness Act which sought to balance the housing focus by requiring local authorities to work strategically and in partnership with other agencies to prevent and tackle homelessness.
- The introduction of the Supporting People programme in 2003. Money which had previously been paid by central government in the form of Housing Benefit to meet the costs of accommodating homeless people was transferred to local authorities. This enabled authorities to commission housing and support services in line with their strategic aims.
- Guidance issued by the government in 2007 which placed an expectation on local authorities to 'address the wider causes of housing need' rather than to concentrate on intervening in a crisis. In 2008-2009, local authorities in England reported 130,000 cases of homelessness prevention or relief taking place outside the statutory homelessness framework (Department for Communities and Local Government, 2009). Nationally and internationally, appropriate prevention policies have been identified as likely causes of reduced homelessness (Busch-Geertsema and Fitzpatrick, 2008).

2. A brief assessment of the potential transferability of the policy under review to other EU countries

The Strategy appears to have a good degree of transferability in particular the governing principles for example:

- Common definitions;
- Identification of key risk factors e.g. discharge from institutions;
- Agreed monitoring and performance management;
- Common case management system.

What is less clear and therefore maybe an obstacle is the degree of authority a city will have in getting stakeholders to comply with the strategy. In addition to establishing a consensus of values and aims authority generally comes from either legislative / regulatory control or financial control. This becomes significant when a city is seeking to get agencies and particularly "rival" NGOs to cooperate to maximise the value of resources. It is also significant in creating a culture that seeks to promote prevention and supporting people to move to their optimum level of independence. At the end of this response is a copy of the "integrated chain" a tool developed by the WGH for illustrating how a city's resources can be coordinated to contribute to meeting this aim.

The monitoring e.g. methodology for counting rough sleeping and how this will be verified may benefit from greater clarity.

3. A brief assessment of the possible ways to measure the results or the impact of a National Homelessness Strategy

Key indicators

- Number of cases of homelessness prevented through casework interventions;
- Average number of rough sleepers;
- Number of households in hostels;
- Number of cases supported to independence;
- Number of cases sustained in independence.

Supplementary indicators

- Average length of time sleeping rough;
- Average length of stay in hostels;
- Number of evictions from hostels;
- Number of evictions from housing;
- Number of cases of repeat homelessness;
- Top 5 causes of homelessness acceptances;
- Top 5 homelessness prevention interventions.

4. A note of any important questions about the policy that are being raised and debated in your organisation

The WGH is focusing on the following issues:

- Developing sustainable and cost effective models for ending chronic exclusion within a whole housing market context. The cities' perspective being to both look at the value of a product but also of how it fits within a wider system.
- Value for money analysis on the prevention of homelessness. Both cashable efficiency savings and the non cashable savings for the benefit of the wider society.
- Analysis of the synergy between the strategic, commissioning and delivery functions – how can we improve the translation of aims into action and how can we evidence effectiveness.
- Better understanding of service user involvement as a means of improving outcomes.

5. Potential contribution of the policy under review to the content of the National Strategy Reports on Social Protection and Social Inclusion

The development of a new national strategy creates an opportunity to create a requirement to consider "Active Inclusion" in its widest sense. Developing a coordinated approach to the meeting of basic needs i.e. accommodation, income and access to work is an important issue that should be considered at the earliest opportunity.

This becomes more difficult if the agencies involved are located outside of the control of the city responsible for the strategy e.g. in the UK cities are responsible for the homelessness strategy but benefits sit with a separate national agency as does health care. The other complication is how to incorporate individual psychological issues that may stop an individual from participating. Therefore a staggered approach seems pragmatic.

6. Key issues and main questions proposed for debate at the review meeting

The WGH would be interested in discussing:

- Implementation of the strategy, specifically the relationship between the strategy, commissioning and delivery.
- Building in value for money calculations to the beginning of the process. This is to test the hypothesis behind the premise that preventing homelessness and creating stable lives is cost effective for society particularly with regard to health and criminal justice costs.

PREVENTION OF HOMELESSNESS SUPPORT 2010

Independent Living

48 Transitional Tenancies

Bevans Building (BBHA) (29 flats) YHN – (19 flats)

1064 floating support spaces

673 spaces which are made up of:
 115 spaces for generic support
 478 ASW outreach – across tenure
 18 spaces for RSL tenants only
 47 spaces specifically for substance misusers
 15 spaces specifically for offenders

204 (inc 2 LGBT specialist) spaces young people

49 spaces domestic violence

92 spaces specifically for refugees

20 spaces (RSL tenants only) specifically for mental health

26 spaces specifically for learning difficulties

457 non emergency access beds up to 2 years

320 beds which are made up of:
 237 beds generic support
 30 beds specifically for single men 16+
 35 beds specifically for single women 16+
 18 beds specifically for substance misusers

105 beds (inc 8 LGBT specialist, 10 for care leavers) young people under age 25

6 beds for women and children / domestic violence

20 beds specifically for refugees

6 beds specifically for mental health

160 emergency access beds

140 beds which are made up of:
 66 beds generic support
 56 beds specifically for men aged 18+
 18 beds specifically for women aged 16+

10 beds specifically for Young people aged 16 – 21

10 beds domestic violence, women 16+

5 day / night centres

Ron Eager Joseph Cowen Health Crisis Skylight Peoples Kitchen Byker Bridge

Statutory provision

47 mixed use self contained units plus 3 for 16 – 25yr olds