

Housing First at FEANTSA – September 2014 Warsaw, Poland

by Suzanne Barror (PHE)

In September 2014, I attended FEANTSA's Research Conference in Warsaw, Poland. FEANTSA, the European Federation of National Organisations Working with the Homeless is the only major European network that focuses exclusively on homelessness¹. The theme of its 9th Annual European Research Conference was "Homelessness in Times of Crisis". The conference brought together researchers from Europe and Canada to present recent and ongoing research on this theme and on homelessness and housing exclusion.

After a plenary session on "Changing Housing Systems and the Risks for Social Exclusion", and "Homeless Services Booming in Poland but Homeless People Still in Crisis" three seminar sessions were held. Having just recently completed a study on "Lived experiences of Homelessness and Mental Health", I was keen to attend the sessions relating to Housing First projects. The Housing First approach aims to house the most entrenched homeless people with mental health problems while using Assertive Community Treatment (for clients with particularly complex support needs) OR Intensive Case Management (for those with less complex needs) approaches to address other problems the person may have. It is client-led and is non-conditional i.e. it does not require a person to be drug/alcohol free in order to be housed. This differs from other approaches for example the Treatment First approach which requires certain conditions to be met i.e. detoxification from drugs/alcohol and treatment for mental health problems, before a person can be housed.

While at the conference I met with Volker Busch-Geertsema, Head of the European Observatory on Homelessness. Dr. Busch-Geertsema led the Homeless First Europe Project, a multi-site evaluation of Housing First in five European cities. He sees one of the most positive outcomes of this project as the high housing retention rates across four of the five sites. This Dr. Busch Geertsema attributes to the client-centred approach and the fact that their needs and choices are taken very seriously. There were varying reports of mental health outcomes from across the five sites but most were positive with the exception of the Copenhagen site where 25 % of those housed reported positive mental health changes and 29 % reported negative changes.

While there did not appear to be a clearly thought out role for Primary Care in the Housing First model Dr. Busch Geertsema did point out that all projects try to get their people in touch with mainstream services and community health services. Dr. Busch Geertsema also noted that there was an important need to ensure that primary care practitioners were educated about and sensitive to the needs of this vulnerable group. "The main thing is not to discriminate against these clients" says Busch-Geertsema, highlighting the importance of removing the stigma attached to those who in Germany are referred to as "not waiting-room-ready".

The FEANTSA conference provided much food for thought and highlighted the importance of client-led services. The positive results from different Housing First projects presented at the conference showed that, while not a panacea, Housing First is certainly an approach that can deliver meaningful outcomes for some of the most vulnerable people in society.

For further details on the 2014 conference, including abstracts and presentations, please click on the following link:

<http://www.feantsaresearch.org/spip.php?article222&lang=en>