Including person-centred approaches and user involvement in Integrated Housing & Support

A Report on Promising Practices in Europe
This is a report by the TOPHOUSE partnership, coordinated by the European Association of Service providers for Persons with Disabilities (EASPD).

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Foreword

TOPHOUSE (Towards Person Centred Housing Services in Europe) is an EU funded project that aims to define, refine and formally establish the competences of professionals in the processes of assessment, housing and support/care provision.

Effectively assessing someone’s need for housing & support, allocating appropriate housing & ensuring appropriate support from a range of agencies has never been more difficult. TOPHOUSE provides updated, dedicated staff training to do this job better, along with the means to promote improved inter-agency working to deliver related non-housing support on a person-centred basis. At the same time, the training helps individuals in developing competences that support social diversity and inclusiveness, which is nowadays an increasingly valuable and transversal skill.

The study

This document, coordinated by the European Association of Service providers for Persons with Disabilities (EASPD), is intended to serve as an overview at European level of existing promising practices on integrated housing & support, with a particular focus in four EU countries (Austria, Finland, Ireland and Spain).

To offer an understanding of the situation, this report analyses firstly the concept of Integrated Housing and Support (IHS) and gives a general overview of social housing in Europe.

Following, partners of the TOPHOUSE project have produced country reports that picture the current legal and policy framework on IHS, explain how the assessment of need & housing allocation is undertaking in their country and highlight some promising practices covering person-centred and user involvement approaches.

Finally, the present document collects a list of promising practices that can inspire others to improve the access to affordable housing schemes for persons with disabilities, homeless people and the elderly.

This study aims at serving as a reference and supporting document not only for the development and implementation of the TOPHOUSE project but also for other upcoming projects committed to the promotion of the Integrated Housing & Support principles. That is why some findings and a conclusions chapter are included, outlining a possible way forward on how to develop adequate housing assessment & allocation processes and how to do this specialist job more consistently.

Enjoy reading!

Carmen Arroyo de Sande
EASPD Development Manager
Introduction

Integrated Housing and Support

Housing with support may be known by different names such as supported housing or special needs housing. There is no universally agreed definition and many countries have their own term and description. “Housing with support” can be described as a package of support related to a person’s housing that allows them to live independently. This can include accommodation and non-accommodation-based services. Characteristically, housing with support has more staff than other forms of social housing and is usually organised between different organisations. This includes both government funded and voluntary sector organisations. Housing with support can cater for a wide range of service-user groups with different levels of support in a variety of accommodation, therefore finding a common definition can be difficult.

Housing with support provision helps many people stay active and be independent. The principles behind the concept is that services are best provided in community settings as opposed to those found in an institution. There principles are strengthened by the growth of community care and reinforced by the acknowledgment that housing with support can be provided for people with support needs in mainstream, self-contained housing as well as in specialised provision.

“Integrated Housing” is when supportive housing units are integrated or blended into developments that also provide affordable and/or market-rate housing units. Theoretically a project with less than 100 % supportive housing is integrated, however “Integrated Housing” typically refers to projects that have been developed through the partnership of mainstream housing developers and a service provider.

Integrated housing and support focuses on enabling social integration in order to improve well-being, health and quality of life. It also focuses on enabling independent living through promoting personalisation of services. Social integration is intended to take people with care and support needs out of institution-based services such as long stay hospital wards and dedicated residential care and allow them to live in housing and housing like settings in the community.

Integrated housing and support also works to promote independent living through enhancing service user choice and control. Persons with support needs must be given the opportunity to integrate within wider society and be able to exercise choice in their lives just as other citizens can. To be integrated in society, a person must be able to exercise as much personal independence as possible.

According to a report by the University of York, the existing research on the situation of integrated housing and support services is not very extensive and does not provide a map of the provision of services in Europe. However, they write that these services tend to be more concentrated in European societies that have more extensive welfare and health care systems. These countries tend to be those in Northern and North-Western Europe, including Scandinavia, Germany, France, Belgium, the Netherlands, the UK and Ireland. In Southern and Eastern Europe integrated housing and support services are present but service provision is more likely to involve institution-based care and the use of large, basic accommodation.
services that do not offer many support services. An example of this is emergency shelters for homeless people.

Social Housing in Europe

According to a recent report elaborated by Housing Europe, the growth recovery in the last few years in the EU has produced an increase in housing prices. Housing has become the highest expenditure of Europeans and the income gap between tenants and owners is widening in several countries, and people trying to enter the housing market face increasing difficulties.

In most cases policy responses at Member States level have been to decrease public expenditure for housing and relying on measures to increase the supply in the private sector or access to homeownership. Furthermore, housing exclusion has been exacerbated by the crisis and policies are failing to provide an adequate response in most countries. This is reflected in increasing levels of homelessness. Local authorities are creating some innovative solutions but, generally speaking, a lack of affordable housing and resulting exclusion are among the key risks faced by our cities, regions and societies at large.

Despite the existence of a large social housing sector in several Western European countries, in general the relative size has been decreasing over the past two to three decades. On the other hand, most Eastern European countries -like Mediterranean ones- have extremely low shares of social rental housing.

Many social housing providers across Europe face similar issues. Decreasing public investment into the sector is making it increasingly difficult to provide the affordable homes needed.

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1 Mitchell & Pleace, 2014
2 The State of Housing in the EU, Housing Europe, 2017
Integrated Housing & Support in Austria

STATE OF PLAY

1. Legal and policy framework

A report by the Austrian Disability Council (former ÖAR)\(^3\) in 2013 shows that “the Austrian government regarding people with disabilities states that the paradigm shift has already taken place in Austria. Furthermore, according to the report, the Austrian government assumes that the rights of people with disabilities laid down in the (UN) Convention are already enshrined in the Austrian legal system by this time.

However, the Austrian Disability Council does not yet see the UN Convention implemented in many areas in Austria.

As can be concluded from the above-quoted statement and furthermore from political reactions (or non-reactions) since the ratification of the Convention in October 2008, it seems that the CRPD has been underestimated in its meaning and impact on Austria’s legal situation and on the rights and quality of life of people with disabilities in Austria”.

Furthermore the report states that “according to the introductory statements in its state report, the government apparently assumes that the obligations of the CRPD have already been implemented to large extent through the previously existing laws concerning the equal treatment and equality of persons with disabilities (such as the prohibition of discrimination according to Article 7 of the Federal Constitutional Act or the Disability Equality Package 2005) as well as through various measures and grants for persons with disabilities (e.g. the Disability Concept of 1992).

At federal level, the National Action Plan on Disability (NAP)\(^4\) has brought a change in the level of awareness. The 250 measures foreseen in the plan to implement the CRPD demonstrate that there is still much to be done to enable persons with disabilities to live in a society in compliance with the CRPD. For all measures, it will be crucial to consider how they are implemented and whether persons with disabilities and their organisations will participate from the outset in all programmes and measures that affect them.

The NAP refers exclusively to the responsibilities of the Federal State and not those of the regions (Laender). Hence, it is to be feared that the implementation of the CRPD within the responsibility of the regions (also regarding the entire social sector) is still very distant.

Contrary to the Government's opinion stated in the introduction of its report, it is not just a matter of “further improving the situation of people with disabilities in Austria”. What is required is the full implementation of the CRPD within all legal and political systems of the country to achieve full inclusion and comprehensive participation of persons with disabilities in the community.

Even though there is a multitude of regulations and service offerings for persons with disabilities in Austria, the distribution of competences between the federal Government

\(^3\) http://www.sozialarbeit.at/files/austria_crpd_alternative_report_final_1-1.pdf
\(^4\) https://broschuerenservice.sozialministerium.at/Home/Download?publicationId=225
and the regions (Laender), as well as the strongly pronounced federalism in terms of disability-related legal matters, have led to enormous uncertainties and inequalities.

The paradigm shift from the medical model to the social model of disability has been implemented just as little as the shift from the welfare concept to the human rights-based approach."

(Figure 1. National Action Plan on Disability 2012-2020), Federal Ministry of Labour, Social Affairs and Consumer Protection (BMASK).

The NAP set the way for the Austrian government to implement the UN CPDR between 2012 and 2020.

The NAP states on the subject of "independent living" that,

"Many monetary and in-kind benefits introduced in Austria over the last 20 years are intended to enable people with disabilities to lead independent lives (care benefits, personal care, and various social services). However, around 13,000 people with disabilities still live in residential and care facilities in Austria (data from the "Vertretungsnetz" a national guardianship organisation, July 2010) and do not always have the opportunity to represent themselves. There is often a connection between the form of housing and the benefits and services that contradict the idea of independent living. People with learning difficulties are often not free to choose how they live and in what form they want to live."
It is the responsibility of the Länder to support people with disabilities to live independently. On the one hand, this includes personal support, which is offered in various forms depending on the region. On the other hand, there are people with disabilities for whom the organisation of their support services is too complex or who for other reasons do not want personal support. For these people other (support) offers are necessary.

Objectives:

- In the sense of empowerment, people with disabilities of all kinds must be enabled to live as independently as possible and to participate in all areas of society.

An independent life also includes the possibility of partnering with someone, getting married or starting a family - all based on one's own decisions.

- Different support and services must be available for the different needs and life phases of people with disabilities. Only a suitable offer enables those affected to really lead an independent life.

- In the area of housing, a comprehensive deinstitutionalisation programme is required in all nine federal states. At the same time, large institutions must be dissolved, and support services created that enable people with a high need for support to lead an independent life in their own homes. The principle must be that those affected can choose the form of housing and support they need.

- People with learning difficulties must have a right to a say and self-representation within and outside institutions. In this context, this self-representation must be supported by financial and organisational measures (e.g. flexible schedules in day care centres or occupational therapy).

- Peer counselling for people with disabilities is to be supported and expanded.

- For some forms of disability, independent living is a special challenge (e.g. people with autism, people with certain psychiatric illnesses or elderly people with disabilities). Together with their interest groups, the possibilities of an independent life for these target groups needs to be considered and developed further .

According to the joint report of the Austrian Disability Council and ÖAR in 2017 on the topic of independent living, the "principle of independent living as such [...] is neither in the Constitution nor in any other Austrian law."

Due to a lack of financial support, persons with severe disabilities as well as persons with intellectual disabilities usually do not have the chance to decide independently where and with whom they would like to live. Demands for community-based forms of living and short-term care are much higher than the availability of offers. Often, the only option is accommodation in homes (even in homes for elderly people and nursing homes). At present, partially and fully supported residential communities are exclusively occupied by residents with different disabilities who are accompanied by two care/support staff.

According to this report, there have been no official studies or consultations on the situation and state of satisfaction of people with disabilities living in homes and shared flats.5

5 [http://www.sozialarbeit.at/files/austria_crd_alternativereport_final_1-1.pdf](http://www.sozialarbeit.at/files/austria_crd_alternativereport_final_1-1.pdf)
Despite this, a customer survey on the quality of life of people with disabilities in Vienna commissioned by the Viennese Social Services (Fonds Soziales Wien)⁶ in 2015 shows that 94% of the customers of partially and fully assisted living are very or rather satisfied with the care they receive.

“Persons with disabilities are granted care-allowances as a subsidy for the compensation of care-related additional expenditures. The care-allowance is based upon a purely medical orientation and considers primarily basic needs such as personal hygiene.

Because persons with a high need for assistance cannot even cover their most basic needs with this amount, many are constrained to live with their families.

For persons with learning or intellectual disabilities, it is often difficult to receive the required amount of care allowances because the conditions are predominantly tailored to persons with physical or sensory impairments.”⁷

Regarding the entitlement of personal assistance for persons disabilities “depends on the aspect of life for which it is required. Personal assistance at work is subject to the Federal Government; personal assistance in other aspects of life (e.g. living at home), on the other hand, lies in the competence of the regional federal states (Laender). Neither at federal governmental nor at regional (Laender) level, are there consistent standards or legal entitlement to comprehensive personal assistance in all aspects of life to support independent living.

This leads to great uncertainties and legal uncertainties among the concerned persons and often to random decisions on the approval of the required benefits.

The approval of personal assistance in other aspects of life is only regulated in a few regions (Laender) - such as Tyrol, Upper Austria and Vienna - but very differently. Even here, there is no legal entitlement for comprehensive personal assistance. Anyhow, the existing offers for personal assistance beyond the workplace cannot sufficiently cover the urgent demand for persons with physical limitations, chronic illnesses, sensory and perceptual impairments and for persons with intellectual disabilities.”⁸

2. Assessment of needs & housing allocation process

Each federal state (Länder) has its own Equal Opportunities Act (EQA) (Chancen-Gleichheits-Gesetz). This law enhances the daily lives of people with disabilities - privately, in education and in working life. Equal opportunities and autonomy are here the core values.

People with disabilities sometimes need certain services, so that they can live in independently. Such a service is “assisted living”.

There are grants for these services. The grants enable people with disabilities to lead an independent life and have the same chances as people without disabilities.

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⁷http://www.sozialarbeit.at/files/austria_crpd_alternativereport_final_1-1.pdf
⁸http://www.sozialarbeit.at/files/austria_crpd_alternativereport_final_1-1.pdf
The EQA regulates:

- the benefits for which there is a right to funding. For example, if there is a legal right to fulltime assisted living. There are also services, for which the federal state issues funding grants. Personal assistance is one of these services;

- who can receive the services? For example, people who have significant disadvantages in development, in training and at work, in social life, in private life and in leisure time due to: physical impairments, Intellectual impairments, psychological impairments and sensory impairment;

- Which group of people are entitled, for example people with Austrian or EU citizenship;

- Which area the services are required, such as housing, day structures, vocational qualifications, employment support, mobility, personal assistance, etc.

Application Process:

People with disabilities requiring funding for housing and support need to apply for these at their local social services department. There are two possibilities to be supported financially in the residential area, which are similar throughout Austria.

- Full-time support: either in residential homes (up to 60 residents in groups of 8-10 people in smaller units within the home) or more usually in communal apartments, where 8 -12 residents have their own room but share communal spaces and sanitary areas and are supported by a team of two staff on duty (including a night shift).

- Part-time support: usually in the form of floating support, where people live in their own apartments (council/social apartments or cooperative housing) and are supported by staff at a nearby office or centre, possibly with supported telephone contact out of office hours.

Once the person requiring housing and support themselves or (if applicable) their legal representative have applied to the local social services to gain funding for housing support, the “needs coordinator” at the social services checks whether the request is valid.

The “needs coordinator” invites the person and the legal representative to the assistance conference, where an assistance plan will be made, depending on the support required and applied for by the applicant.
There are now two possibilities:

- There are no support placements available, in which case the person is put on a waiting list.

- There’s a vacancy within a support organisation. The “needs coordinator” decides whether the person can take up the vacancy. The support organisation will also decide whether the person can be supported. This is usually assessed at a meeting at the residence or at the organisation’s offices.

The people attending this meeting depends on which federal state you live in and how the support organisations work.

For example, in Vienna the person will usually be invited to an organisations head office, where a regional manager will meet with the applicant and explain the support available as well as again assessing what support they want. They are informed about any vacancies within the organisation, which may be suitable for them. The person can view the vacancies within the organisation.

The viewing takes place at the residential home or support office (depending on whether full- or part-time support is required) where there is a vacancy. At this meeting the regional manager, members of the support staff and the person requiring housing and support and (if applicable) their legal representative are present. At the meeting, the person is informed about life in the home/area and the types of support available in the home or mobile support in the region are explained. The applicant has the possibility to ask questions and raise any concerns regarding the support they may need.

If both sides agree that the required support can be given, a support contract is completed, and the person can move in to the residential home/apartment or a council apartment. If the latter is not already available, this needs to be applied for by the person usually assisted by the support organisation. Details of support required (special conditions) and a request to live in a certain area or even a certain social housing estate can be made but is not always considered due to availability. In Vienna, social housing through this route usually takes around 6-8 weeks until an apartment is made available. The support user can then view the apartment and has only this one choice. If they decide not to take the apartment without a good reason (usually due to mobility issues) then they cannot apply for social housing via this route for another 3 years.

In Upper Austria the support meeting a resident from the residential home or social housing, a lobbyist from a peer support group and a member of staff from the home as well as the manager of the home are present at the meeting.

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PROMISING PRACTICES

1. Person-centred approach

Since the introduction of the UN CRPD, nearly every organisation and authority, offering housing and support state their positive intentions regarding the UN CRPD and occasionally will refer to working with a person-centred approach. Despite these good intentions the outcome for the support user is still a rather inflexible based choice of full- or part-time support in a home, communal living or own apartment based upon established systems already in place.

The development towards person-centred support has therefore been slow and follows the initiative of the organisations to create new forms of support. At the same time, person-centred care often requires more resources, consequently more money, and flexible financing models, which needs the backing of the local authority.

Despite this most support organisations have created a method in the form of a “Goal and Life Plan” which together with the support user is based upon finding out what is important for the person and what the person wants to achieve. Supporting steps are discussed to achieve this goal and a timeline is set. The support staff help the person to achieve their goal and document the process accordingly.

Additionally, there are some organisations that create an individual support contract with the support user, allowing the user themselves to state when and where they require help. This contract is reflected upon on regular intervals between support user and staff.

**Vorarlberg**

The Lebenshilfe organisation in Vorarlberg have created a method called “ZIELWÄRTS (Towards a goal)”, working together with other organisations and authorities assisting support users formulate their needs and goals.

In their promotional material they explain that “everyone wants to shape their own future. However, this often requires the involvement of others who support the person in doing so. Lebenshilfe Vorarlberg helps people with disabilities to help themselves achieve their dreams, interests, abilities and goals. They call this assistance in dealing with one’s own life perspectives "ZIELWÄRTS and "Personal Future Planning" (ZW-PZP).

The service "ZIELWÄRTS und Persönliche Zukunftsplanung" is offered by the same named team and consists of three areas:

- Firstly, the Lebenshilfe Vorarlberg begin with the "Target Support." Here, the appropriate form of support for the support user is selected and developed together with the person, the relatives, relevant participants of the Lebenshilfe Vorarlberg and are discussed with the representatives of the local authorities of Vorarlberg in the so-called “Helper-Plan-Conference” (HPK).

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10 [http://www.lebenshilfevorarlberg.at/content/download/7377/52666/version/1/file/ZIELWAERTS_Handbuch.pdf](http://www.lebenshilfevorarlberg.at/content/download/7377/52666/version/1/file/ZIELWAERTS_Handbuch.pdf)
The "ZIELWÄRTS und Personal Goal Plan" team supports the user on their "journey". Together with the accompanied person, their relatives, friends and any other parties involved, goals and perspectives and their implementation are worked out.

Personal Future Planning" (PZP) helps to support the user how they want to be accompanied towards their goal, but also discusses what worries or fears they may have. It can be important that parents bring other relatives or friends on board, who can also support the person. This is called a "circle of supporters".

The focus is always on the life plan of the person being supported. Staff support the user side by side and strive to improve the personal quality of life according to their needs. Sometimes only a few small steps can be taken, but these are becoming more and more concrete and become more conscious, opening up new avenues."

**Styria**

In Knittelfeld, the organisation Jugend am Werk Styria\(^{11}\) has implemented a successful project for 11 people with disabilities and a high need for support, who previously lived in institutions have defined themselves how they want to live in the future with the support of the approach of personal future planning.

The result is an inclusive house in which the persons live in their own apartments together with other families and persons without disabilities in the middle of the village. The residents have a very good and close relationship with their neighbours. Their lifestyle has improved considerably, and a high degree of self-determination is now possible. The living conditions is also continuously evaluated during the implementation using the method of personal future planning.

2. User involvement

**Vienna**

"Wiener Wege zur Inklusion" (Vienna Pathways towards Inclusion) was a project started up by the Viennese City Council Social Services Department together with the umbrella organisation of Viennese Support Providers and the consulting agency Wonderwerk.

The project worked on the principle that people with disabilities are experts on their own behalf. This knowledge and experience is very important. Participation was free of charge.

Together the participants and the supporters and representatives of the Vienna Social Services worked on new support offers.

There were personal discussions, workshops, working groups and a website for online cooperation.\(^{12}\)

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\(^{11}\) [https://jaw.or.at/unterstuetzung-angebote/menschen-mit-behinderung/](https://jaw.or.at/unterstuetzung-angebote/menschen-mit-behinderung/)

\(^{12}\) [http://www.wiener-wege-zur-inklusion.at/](http://www.wiener-wege-zur-inklusion.at/)
The project had 4 stages.

Stage 1: Identify problems. Discussions took place with people with disabilities, to find out more about their lives. What areas are causing problems? Ideas, wishes and opinions were collected. Solutions needed to be found.

Stage 2: Finding solutions. How can the problems be solved? The participants searched together for solutions and found many new ideas. Some of the ideas were selected and new offers are to be created from these ideas.

Stage 3: Introducing ideas. How can the ideas be improved? Prototypes were tried out.

Stage 4: Testing the ideas. The ideas were tested out together and questions asked whether the ideas can work out in everyday life? Can support offers be made from these ideas?

The results of this project were:

- to create a communal living area for people with and without disabilities (Lebe Bunt),
- a mobile application to help disabled people better use the public transport systems (Buddy System),
- Peer Counselling/Mediation vocational training for peer counsellors with learning disabilities concerning the issues of violence and quarrels towards people with disabilities
- and a working group to create ideas towards better forms of day structures.

Tyrol

The Tyrolean Monitoring Committee (Monitoringausschuss) in Tyrol which was set up to monitor how the Tyrol federal state implements the UN CRPD invited young people with disabilities to discuss and put forward their causes regarding living independently. The BIZEPS online blog reported about this venture:

"Children and young people with disabilities should be involved in decisions which affect their lives. This right to participation is enshrined in both the UN Convention on the Rights of the Child as well as in the UN Convention on the Rights of Persons with Disabilities", emphasises Christine Baur, State Councillor for Social Affairs. In practice, however, decisions are very often decided by adult people without disabilities concerning the living situation of children and young people with disabilities.

"For the Tyrolean Monitoring Committee, it is important that they collect the opinions of children and young people with disabilities and take these into account", Isolde Kafka, Chairwoman of the Tyrol Monitoring Committee. In the past school year in cooperation with the State School Board for Tyrol and the Children's and Youth Attorney of Tyrol carried out a pilot project - with success.

A total of twelve young people - seven girls and five boys - between the ages of 13 and 20 years took part in it. There were three workshops, in which the participants discussed the following questions and discussed them:

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- How would I like to live when I’m an adult?
- What do I need to live the way I want to?
- What do I need specifically because of my disability?

Based on the results, the young men and women submitted their ideas about housing and voted on what to do about it and how to make it happen. Accordingly, these young people made a statement at the public meeting of the Tyrolean Monitoring Committee held on 28.11.2017 and was published on the internet.

Isolde Kafka who was involved in the planning, organisation and implementation of the pilot project said: “The young people are very motivated and have achieved exciting results. If there are good framework conditions and sufficient support, then children and young people with disabilities can share their experiences and their perspectives very well. “

The project will be continued in the current school year: The participants of the pilot project will produce a video in which the young disabled people have their say.”
Integrated Housing & Support in Finland

STATE OF PLAY

1. Legal and policy framework

The legal framework for service housing is based on three pieces of legislation:

- The Social Welfare Act (710/1982)
- Services and Assistance for the Disabled Act (380/1987 renewed 2008)
- Law of intellectual disabilities special services (580/1977)

Already 1984 the municipalities’ influence increased to the social welfare for persons with disabilities, when the State Subsidy reform (VALTAVA) came into force and the Governmental financial support was transferred over from municipality associations (regions) to the municipalities. The aim was to give a better position for decision making in the local authorities.

The right to decide of yourself and your actions is wide secured in the Finnish legislation. The special laws guarantee the users position and rights. In Finland, the focus of disability policy is to promote the inclusion for persons with disability in mainstream housing, education, work and social and health care. And secondly if this does not correspond to the persons with disabilities needs, the three above mentioned laws are used to provide special services.

The purpose of The Social Welfare Act (710/1982) is 'social welfare’ which means social services, social assistance, social allowance, social loans and related measures intended to promote and maintain the social security and functional capacity of the individual, the family and the community. The municipalities shall see to the planning and implementation of social welfare and promote user participation (Act of the Status and Rights of the costumer of Social Welfare 812/2000). It is the local authorities’ responsibility to secure, that the human value is not offended, and that user’s conviction and privacy is respected. The users (beneficious) wishes, opinion, benefit and individual needs is included in the Individual service- and care-plan. A joint understanding and self-determination, as well as, participation is crucial in the plan, which guarantee to the person with disability the financial and special service from the municipality. Act on Social Welfare prescribing general social services and income security (710/82). A personal disability or illness can often pose special problems in the handling of everyday affairs for a long period of time. The purpose of the Services and Assistance for the disabled Act14 (1987/380) is to improve the ability of a disabled person to live and act as a member of society in equality with others and to prevent and eliminate the disadvantages and obstacles caused by disability. Decisions concerning services and assistance under this Act shall be made without undue delay and absolutely within a time limit of three months from the time of the client or their representative presenting an application. Section 6 in the Act point specific out that the social welfare board and other municipal authorities shall follow and work to improve the living conditions of disabled persons and try to prevent detrimental situations from arising and to eliminate the disadvantages restricting the potential and participation of a disabled person. The act includes several services. Based on these the social worker in the

municipal social office allocate and provide in relation to the possibilities in cooperation with private, public or organisational service provision.

The Act (section 12) also include housing alterations if they are necessary in view of the disability or illness of the person in question such as the broadening of doors, the construction of ramps, the installation of a bathroom, toilet and water pipe, the alteration of fixtures as well as of construction work carried out in the permanent residence of the disabled person. This is added with compensable housing equipment and facilities include lifts, alarms or other equipment and facilities installed in the housing on a permanent basis. The municipality may also provide housing equipment and facilities free of charge for the use of a severely disabled person. The Act has been and is important to be included in the society.

As an example, Helsinki City allocate accommodation based on social appropriation and financial need. The so-called ARA-apartments (owned by Helsinki City and financed by the State, which are available, is allocated on the resident selection laws (see above) and Helsinki City Board decisions. Special attention is taken to the need out from social, health or disability aspects. Just now the difficulties to allocate is the high demands of apartments. 21000 applications and ca 3600 social apartments available 2017. (Merja Liski, Head of Apartment Services in Helsinki City).

For persons with disabilities the situation is better, because many service providers are available in the field of persons with disabilities Persons with intellectual disabilities are still separated with own laws, but some changing are upcoming in the nearest future:

- The Services and Assistance for Disabled ACT and the Law of intellectual disabled special services will be reconciliated in the near future.

- The goal of the reform is to get rid of the severability of persons with disabilities and persons with intellectual disabilities in the service system.

- Concurrently the Council of State did 2010 the principle decision to decrease institutional living and 2012 to break down the institutions for persons with intellectual disabilities.

- Connected to the so called KEHAS-program (National program for housing for persons with intellectual disabilities, 2010-2015) KVANK (The Council of Intellectual Disability Housing) created Quality Criteria’s for Housing.

- In line with the deinstitutionalisation (2012-2020) every region needed to make an allocation and transfer plan to community-based housing and housing services.

- In the same time in the Law of special services for persons with intellectual disabilities (519/1977) the persons position was strengthened by regulations of self-determination (2016). This was important for the ratification of UNCRPD (June 2016).

- Because of all these changes in laws, regulations and the ratification of UNCRPD a strong positive development in housing services and housing quality is ongoing for persons with intellectual disability and other persons with disability
See the figure below statistical information of housing for persons with intellectual disabilities and how the laws have changed the structure of the housing and service situation:

<table>
<thead>
<tr>
<th>Housing</th>
<th>2005</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Living in Institutions</td>
<td>2346</td>
<td>1241</td>
</tr>
<tr>
<td>Community based Housing: Service 24/7</td>
<td>4552</td>
<td>7145</td>
</tr>
<tr>
<td>Community based Housing: Services evenings and weekends</td>
<td>2061</td>
<td>1987</td>
</tr>
<tr>
<td>Community based Housing: Services needed hours /week</td>
<td>796</td>
<td>1274</td>
</tr>
</tbody>
</table>

The Finnish services for persons with disabilities is strongly supported by the new “The National Action Plan on the UN Convention on the Rights of Persons with Disabilities (2018)” determines the measures that will be taken to promote the implementation of the Convention in different administrative sectors during the first action plan period 2018–2019.

The Action Plan has been drawn up by VANE (Advisory Board for the Rights of Persons with Disabilities), which has representatives from disabled people's organisations, labour market organisations and the key ministries regarding the rights of persons with disabilities. The Action Plan comprises 82 measures, to the implementation of which the different ministries have committed themselves. The realisation of the measures will be assessed at the end of the action plan period. The Action Plan emphasises the importance of social inclusion of persons with disabilities in the changing operational environment and the importance of accessibility as a precondition for the realisation of the other rights. One of the main objectives of the Action Plan is increasing awareness of the rights of persons with disabilities and mainstreaming these rights in different administrative sectors and more widely in society. (Publisher Ministry of Social Affairs and Health, VANE 2018). The Action Plan point out that it is important to create varied housing solution, increase the supporting services and connect the housing into the ordinary housing plans. The solutions for housing should always be based on individual participation.

And at last to mention the importance for all sectors of the society in Finland is the Non-Discrimination Act (1325/2014). The importance is based on to secure persons with disabilities position as an equal citizen in an inclusive housing situation. The law concerns both the public and private service providing. The Act enlarged the equality and prevention of discrimination from services also to other organisers of education, employers and other service providers. All citizens have the right to personal development, get an education, get services and make a career.
2. Assessment of needs & housing allocation process

Service accommodation comprises housing and related services, which are necessary for the resident in daily life. Services referred to accommodation include assistance in functions pertaining to housing, such as moving, dressing, personal hygiene, food management and cleaning the housing, as well as services which are needed for promoting the health, rehabilitation and well-being of the resident.

The municipality's duty is to organise housing services to persons with disabilities and cannot appeal to lack of resources. Municipality can use public, private or other service providers. The housing services is based on the application and the agreed individual plan, which contents also other needed services (for example personal assistance).

The individual service plan is developed often together with relatives, the person themselves, staff members and the social worker. The service housing should be organised in a way that the person can apart of the limited functions, perform independent living as good as possible. The agreement of individual plan is decided ultimately by the municipal local government. Sometimes the allocation process can be problematic because of disagreements of the person’s needs, the available housing services or lack of quality support. Social workers have pointed out the problems in the allocation in three different topics:

1. to understand the persons disability and what it means for the persons daily life situation
2. the wide disciplined of needed expertise (legislation, functional assessment, respect for equality and human value etc.) and
3. the fairness and the user’s participation

(National Institute for Health and Welfare =THL, Guide of disability services)

To the allocation of housing services for persons with disabilities influence the social official’s consideration power. The consideration power of the social officials is intertwined to the costumer process phases, the operating environment and the social officials (social workers) expertise. This is complicated. The Social official needs to use consideration power connected to the own level of professionality and connected to the bureaucracy in the municipality (Maija Herajärvi, the university of Jyväskylä spring 2017). These are some of the reasons, why the variation of approved services to persons with disabilities, between in municipalities (331 municipalities 2018) in Finland differs.

In the services and social local authorities is needed measurements to assess the need of services. These are often focusing on physical and/or functional needs. But also, psychological and social needs are noticed. In general, the assessment systems are chosen by the municipality. The assessment systems are nearly always measuring the level of functions of persons with disability. The assessment starts often from the medical point of view, the diagnosis and psychosocial assessment tools which are based on research and constantly updated. These assessment tools are also needed.

The National Institute for Health and Welfare has developed a data base of assessment tools. This is covering ca 95 different assessment tools. These are mostly focused on the disability
and the need of services connected to the functional disabilities. In connection to the data base, Finland have an expert network for assessment indicators /measurements\(^\text{15}\).

Below some other examples of assessment tools to assess psychosocial functions, developed by Kehitysvammaliitto:

- **TOIMI** to assess the psychosocial functions and recognise the persons strengths and weaknesses. The user is an active person in the assessment process.

- **KETO** – an assessment tool for the functional level of the person with intellectual disabilities. This tool is to get an overall picture of the persons functions for example moving, hygiene, level of ability to make task at home.

- **PSYTO** – assessment tool of psychosocial functioning level. This tool is connected to assess mental challenges and give the opportunity to consider the mental welfare aspects or conflict between the person and the environment and the challenging behaviours influence to the persons daily life.

Another aspect in the assessment is the persons, personal support needs, not directly connected to the practical support, but connected to personal grow, development of self-determination, participation and independency. This form of assessment tool is needed for the enlarging inclusion in the society and to increase the quality of support to support the UNCRPD.

**PROMISING PRACTICES**

1. **Person-centred approach**

Finland supports the Person-centred approach on a national base in different ways and here below you can find some good practices on this:

*The service of Personal Assistance*

One of the most important service forms supporting the person-centred approach is the Personal Assistance, which gives the empowerment to the person with disabilities themselves and can be combined in several ways to the housing services.

Personal Assistance (Services and Assistance for the Disabled Act 380/1987 renewed 2008) mean necessary assistance of a severely disabled person at home and outside of the home:

1) in activities of daily life;
2) in work and studies;
3) in hobbies;
4) in social participation; and/or
5) in maintenance of social interaction.

The Act supported mainly the severely disabled person to implement his own choices in activities. In a renewed version also, the persons with intellectual disabilities are included. To support the personal assistants in Finland, Finland have created a national wide network for personal assistance. The goal of the network is to affect in a way that personal assistance,

\(^{15}\) [http://www.thl.fi/toimia/tietokanta](http://www.thl.fi/toimia/tietokanta)
will be put into good practice, by additional information and increased knowledge. A dedicated network exists to strengthen awareness and knowledge of personal assistance and its possibilities and challenges by informing, giving advice, organising training courses and producing material.\(^\text{16}\)

\[\text{Figure 2. The figure shows the number of users of personal assistance service between the years 2006-2016 in three age groups (0-17 years old, 18-64 years old and over 65 years old).}\]

In terms of promising practice this means that an increasing amount of persons with disabilities have the opportunity to participate and govern their own lives and participate in the society. The number of hours vary between under 25 hours to over 70 hours a week. The personal assistance is, what we call a «Subjective Rights» for persons with severe disabilities and is giving for persons with disability an opportunity to create their own lives for example of leisure time, studying or work. In the relation between the personal assistant and the person with disability is constantly in governed by the person with disability. They are also often the employer for the personal assistant.

\(^{16}\) \url{http://www.assistentti.info/}
The KEHAS programme

The Council of State (Government) launched a decision on principle and a program 2010-2015 of housing and service provision for persons with intellectual disability. The programme (KEHAS – programme of Intellectual Disabled Persons Housing 2010-2015) aimed to move out the persons with disabilities from the institutions to community-based services. The plan was to take in consideration the user’s needs and wishes in housing services and offer individual services and support. Highly preferred quality criteria were to create individual housing solutions, strengthen the participation and their equality and implement the fundamental and human rights (ARA, KEHAS and UNCRPD). The program combined users housing wishes and needs, the society needs and promote the sustainable development. It was a program which connected the national and international rights of equality. It became a strong part for the person-centred planning for persons with intellectual disabilities. The six quality themes are the following:

1. Individual housing amongst ordinary housing stock
2. The program has a clear responsibility division
3. The regional plans create the base for the implementation of quality criteria
4. Focus on the contents of the implementation in the program
5. The municipalities responsibility of arrangements of apartments/housing and connected services and
6. of the monitoring of the housing and services.

For other persons with disabilities (not for persons with intellectual disabilities), NGOs have been early active to build housing services. Already 1970th for example the Association for persons with physical disability started the development of housing services and built all over Finland service houses. The aim was to offer individual and independent housing.

The promising practice in person centeredness is the possibility to participate and opportunity to live where everyone else live. Via deinstitutionalisation, this opportunity is now systematically provided in Finland (supported by the political decision), also for persons with intellectual disabilities, the once, who have earlier lived in institutions. The six quality themes of housing have been disseminated and implemented in all regions of Finland through the inspiration of the open network of service providers, organisations and experts (called KVANK). The network is now working of a renewal of the housing quality criteria, focusing deeper in the person-centred approach – a right based personal approach.
**Staff training on person centred approaches**

Training on person centred approaches had been realised for years systematically in social vocational schools, disability organisations and by service providers. Many organisations and/or service providers have their own training section, which continuously educate staff in person centred planning, educate relatives to persons with disabilities and persons with disabilities themselves.

One promising practise of Aspa Foundation is the education of “Personal Daily life – concept” (2016-2017). The person-centred way of work enlarged the support quality into four different support aspects and to influence in three different levels in the Aspa Housing services. All staff (350) was educated and 200 daily life topics chosen by the users themselves, was evaluated.

**Peer review-system**

Peer review-activities started as a project in Aspa Foundation but is now used on national bases. Every year the housing quality is assessed by Peer review-system, in several housing services (private or public) in different parts of Finland. Experts by experience interview users in housing services. This is described in a report, which afterwards is presented to the participants, to staff and leaders of the housing service. The aim is to open the mindsets of the service provider of what users think of the housing services and to make changes and listen to the users’ “voice”. It is also common that the service providers ask for training on this. The training is delivered to both staff and users together, which has been shown to be a very effective way of delivering training.

2. **User involvement**

As already explained in the earlier chapters, different projects, programmes or training activities in the disability field take into account user involvement. The organisations for the disabled persons themselves are active and often accepted to be included in development and planning of changes in the sector. This had not always been like this, but this is the result of active cooperation between the disability organisations and to get the users voice heard. The large national acceptance of participation of experts by experience, have resulted in direct user involvement at many levels.

In housing services for persons with disabilities, it is important to keep the level of user involvement on the agenda all the time. Still it is a struggle against power use, old traditional attitudes and institutional culture.

**The “Digi in my hand” project**

“Digi in my hand” is a project developed by Aspa Foundation to inspire different actors to educate and provide courses for users in housing services to learn and improve their digital skills to do online shopping or be active in social media. One of the results of the project is the DIGI-experience-tutors from the inhabitants in housing services.
Integrated Housing & Support in Catalonia (Spain)

STATE OF PLAY

1. Legal and policy framework

Article 47 of the Spanish Constitution determines that every Spanish individual has the Right to decent housing and stipulates that public authorities will promote the necessary conditions and establish the relevant regulations to enforce this Right.

At the State level, the competent Ministry promotes, executes and manages a comprehensive State Housing Plan. The actual one is regulated through the Royal Decree 106/2018, of March 9. The State plan contains a specific programme for the promotion of housing for elderly people and people with disabilities which ensures the creation of building or the rehabilitation of existing ones to assign them (with a formula of rental or cession for a minimum of 40 years) to senior individuals or disabled people).

At Catalan Level, article 26 of the Catalan Statute of Autonomy proclaims the Rights in the field of housing and the Parliament of Catalonia, using the competences contained in the article 137 of the Catalan Statute, passed Law 18/2007, of December 28, on the Right to Housing.

In more recent times, intending to provide an extra layer of concretion the Catalan Plan for the Right to Housing, regulated in the Decree 75/2014, of May 27, was passed and in its article 73 establishes a regulatory framework for the Economic and Social Emergencies Situations Assessment Roundtable (explained later).

Due to the economic crisis, the Catalan government approved Law 24/2015, of July 29, of urgent measures to tackle emergency situations in the field of housing and fuel poverty.

The State Housing Plan is executed through the Catalan Secretariat of Urban Habitat and Territory through the Catalan Housing Agency which has the direct responsibility of executing it. The State Housing Plan is the legal instrument for coordinating state and autonomic and regional housing policies and establishing mutual commitments to guarantee its application.

A Bilateral Commission was created to monitor the implementation of the State Housing Plan in order to adjust the amounts allocated through the budget to each of the programmes, providing the total amount doesn’t surpass the original annual budget. The commission is composed by representatives of the Spanish Ministry of Development and the Secretariat of Urban Habitat and Territory of the Department of Territory and Sustainability of the Generalitat de Catalunya. The Catalan Housing Plan 2018-2021 maintains the structure and content of the previous one (2013-2017), promotes the financing of policies focused on the promotion of

20 http://portaljuridic.gencat.cat/ca/pjur_ocults/pjur_resultats_fitxa/?documentid=473076&action=fitxa
rent and benefits aimed to pay the rent, extends benefits and aid lines, but the financing remains the same as previous plans.

Generalitat de Catalunya manages its own housing policies and competencies are attributed to the Department of Territory and Sustainability from Generalitat de Catalunya and further delegated to the Catalan Housing Agency, which has several delegations in the territory (Barcelona, Girona, Lleida, Tarragona and Terres de l’Ebre). This organism has distinctive functions related to housing. Further detailed in the Catalan Decree 29/2018, of June 7, on restructuring of the Department of Territory and Sustainability.

Adding another layer of concretion, if we research the current situation about housing, social housing or programmes related to access and maintain a household we find that different social policies apply depending on the typology or category of the household and can be divided into three blocks:

1. Public property housing
2. Private property housing included in public programs
3. Private property housing not included in public programs

Regarding the first, public property housing, the Public Ombudsman determines that the different administrations involved should collaborate in order to increase the efficiency and effectiveness of allocation of social housing and urged the public administration to create a unique inventory of public housing available. In an effort to increase inter-departmental collaboration between the government, public bodies and local entities, social policies tackling the housing issue several initiatives are being implemented at a local level that can be categorised as good practices. Throughout the year 2016 the Catalan Department through the General Directorate of Social Protection (DGPS) has been actively collaborating in different interdepartmental bodies or groups that deal with various sectoral or concrete areas related to the fight against poverty and for social inclusion. Among the most relevant for the TOPHOUSE Project and related to Social Housing allocation are:

- Economic and Social Emergencies Situations Assessment Roundtable: It depends on the Catalan Housing Agency and it was created with the objective to evaluate the applications presented by the municipal social services for granting social housing to individuals who have lost the house or who are at an imminent risk of losing it.

However, people with disabilities and particularly people with psychosocial disabilities, depend on Housing services offered through Specialised Social Services in practice but accessed via Basic Social Services (detailed later). The Portfolio of Social Services is deployed in each region as specified in Territorial Programming of Specialised Social Services 2015-2018 and housing services may be categorised in two main services (concretely addressed to people with psychosocial disabilities; for other type of disabilities a more in-depth categorisation is detailed later).

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1. Residential home services: offer a flexible, temporary or permanent residential framework for people with severe psychosocial disabilities with social problems. The service intends to provide a home-based substitute environment with the support of a multidisciplinary team of professionals who work conjointly to enhance their personal and social autonomy, favouring their community integration.

2. Homes with Support are another typology of service with a house located in a community environment which offers accommodation, supervision and support for people with severe psychosocial disabilities with the objective to enhance their personal and social autonomy and their community integration.

**Structure of basic and specialised public social services**

Public Social Services are financed with the mixed contributions of the public budget from Generalitat de Catalunya (autonomic public government), local corporations and municipalities’ budgets and other local entities and the final contributions on social services from the State budget and ultimately, in some cases, co-payment from final users. Coordination with the other welfare sectors should focus on people’s needs and should allow the design of transversal programs, such as socio-sanitary, socio-educational and social employment.

Social Services follow the normalisation principle in which services must be provided through the usual means, avoiding services that separate individuals from their community and or their family units. Also, Social Services must ensure personalised attention through an integral assessment of personal, family and community situation of the end user and must always respect the dignity of the person and their Rights to facilitate people having the right conditions to develop their vital projects.

Social services are structured in two levels: basic social services and specialised social services. The basic level is a powerful device to provide diagnosis, guidance, support, intervention and individual and community assessment that, apart from being the usual gateway for the majority of individuals to the social services system, it is the backbone of the entire service network and takes advantage of the experience of city councils and county councils. Benefits are articulated from the basic system and include home care benefits, which aim to make it easier for the person to remain at home in difficult situations; it also includes the provision of telecare and technical aids to facilitate the autonomy of the people; day services/centres and residential services. To complement these services, economic benefits can be approved, which, whenever possible, have to be conditioned to the use of a concrete service.

**Basic Social Services**

To assess individual situations Basic Social Services, have these functions (between others, cited the most relevant for the Country Report purposes): (1) Detect situations of personal, family and community need in their territorial area. (2) Offer information, guidance and advice to people regarding the rights and social resources available that they can access. (3) Diagnose and elaborate social reports on personal, familiar and community situations by request of the user, their families or other services from the Public Social Service Network. (4)
Establish an individual program of care for dependency and the promotion of personal autonomy (PIA in Spanish; depending on Dependency Laws) except in those situations in which the person is permanently admitted to a public residential centre. In these last cases, the social worker of the centre must elaborate this PIA. (5) Provide home care services, telecare and support to the family unit or coexistence unit, without interfering the functions of in-home health services (depending from the Health-Care System). (6) Orientate to access specialised social services, especially day care, technological and residential services. (7) Manage social urgency benefits.

**Specialised Social Services**

1. Specialised social services are organised according to the typology of needs. Specialised Social Services are provided through centres, services, programs and resources aimed at people and groups that require specific and more technical attention and its deployment in the territory – with a decentralised point of view – is variable depending on demographics, characteristics and incidence on a specific area from the needs they are intended to cover. Specialised Social Services include technical assessment teams whose main function is to assess and diagnose situations that cannot be addressed from Basic Social Services and professionals from Specialised Social Services manage centres, facilities, programs, projects and specific services on a coordinated manner Basic Social Services professionals, professional teams from other welfare systems, or professionals from the third sector who offer specialised services.

There are several types of benefits available from Social Services articulated through the Portfolio of Social Services:

**Service Benefits**

Information on available resources and its access, orientation on the most appropriate means to address situations, advice and support to individuals and groups who need social intervention and individualised assessment and diagnosis of personal and family situations according to concrete demands are service benefits. Alongside with these services, residential care, day care, an in-home care is configured as service benefits depending on Social Services.

**Economic benefits**

Monetary contributions are economic benefits and have the purpose of addressing certain situations of need in which people who do not have enough financial resources to meet their needs and are unable receive financial help from other sources. Economic benefits can be granted as a subjective right, in terms of concurrence (limited by budget availability and subject to prioritisation of situations of greatest need) or granted to cover social urgencies.

**Technological benefits**

Technological benefits are those that by means of a product address social needs of an individual and can be associated / mixed with other benefits. Telecare, instrumental aids aimed at maintaining or improving personal autonomy and those of a similar nature have this consideration.

The Portfolio of Social Services – approved by the Government decree (Gencat) – is the instrument that determines the set of benefits available through the Social Services Network
and includes all service, economic and technological benefits of the public system, defining each type of benefit, the population to which it is intended, the professional team in charge of managing it, the profiles and ratios of professionals, and the quality standards. In all cases, it must guarantee access to the benefits with the prior need of an objective test to accredit the need in case of guaranteed benefits (subjective rights). Access to unguaranteed benefits is made in accordance with the provisions of the Social Services Portfolio and in accordance with the assigned budget by the Generalitat de Catalunya – approved yearly – and applying the principles of priority and concurrence. The user may have to participate in the payment of the cost of the benefits that involve replacement of the home, food, clothing, cleaning of the home and accommodation. The Portfolio of Social Services has four years validity and it can be reviewed in advance in accordance with the budget laws approved.25

**Modes of private initiative**

Private initiative in the field of Social Services may be exercised by social initiative entities and mercantile initiative entities (i.e. foundations, associations, cooperatives, volunteer organisations and other non-profit organisations). Private-initiative entities may be part of the Public Social Services Network although must be accredited by the competent administration.

**About cross-sectorial Cooperation**

More often than not, compartmentalisation of welfare systems entails difficulties sharing information. To solve that problem, Catalan Social Services Law explicitly provides that the exchange of information between the Public System of Social Services and the Public Health System is fostered since the competent public administrations in both areas are enabled to access, without prior consent of the interested parties, the identification data and the personal identification code (CIP-AUT) assigned by the Catalan Health Service, in order to exchange information between systems. This allows attending to people in a comprehensive manner, coordinating their social, health and professional needs.26

The evaluation of the 2015-2018 Territorial Programming of Specialised Social Services has analysed, to further address situations, different sectors and the resources allocated to them. This analysis considers an estimation of people with social needs, the offer and demand of services and the associated financial expenses. Deriving from this analysis priority action areas for each one of the services has been identified and further action is oriented to create new places (it doesn’t specify services) in accordance with the budgetary framework and the territorial balance when distributing resources. The areas of preferential action are specified for each service in the following sectors: elderly people, people with disabilities, people with

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25 Although the Portfolio is conceived as a dynamic instrument, it has not been renewed or modified substantally since its approval in 2008.

26 This is not the case for NGO and NPO who don’t have the right to Access the same data as the Social Service System or Healthcare System, which creates comparative grievance between professionals, even though NGO or NPO have been accredited by the competent administration to provide a service included in the Portfolio of Social Services. There is room or margin for improvement in this type of cross-sectorial cooperation.
social problems derived from mental illness (psychosocial disabilities), and persons with drug addiction, persons affected by HIV / AIDS and early care.

According to the report Territorial Programming of Specialised Social Services for this period, two important limitations are found:

1. The lack of a unified data system that makes it possible to estimate the number of people in a situation of social need. Making an estimate of people with social needs is tricky; It has been shown that people attending healthcare services with drug addiction, HIV / AIDS or mental health issues do not necessarily correspond with users of specialised social services for the same sector.

2. The difficulty of having unified information in relation to end users from different services and systems because in certain sectors data gathering systems are underdeveloped.

According to the Sectorial Plans and in line with the Portfolio of Social Services, the following housing resources (although not all of them are residential) are available to specific collectives (the most relevant ones)27:

For Intellectual Disability

1. Specialised day-care centre for DI: addressed to individuals between 18 and 64 years of age with recognised intellectual disability, with a disability certificate of 75%, with a certificate from third-party support need and in need for extensive and generalised support.

2. Home Residence for people with DI: addressed to individuals between 26 and 64 years with recognised intellectual disability, with a disability certificate 33%, without certificate from third-party support need and in need for limited and extensive support.

3. Residential Centre for people with DI: addressed to individuals between 18 and 64 years of age with recognised intellectual disability, with a disability certificate of 75%, with a certificate from third-person support need and in need of extensive and generalised support.

For Mental Health / Psychosocial disabilities

1. Residential facilities for people with social problems derived from Mental Health: Addressed to individuals with a psychosocial disability with a disability certificate of 65% and age between 18 and 64 years. People who can develop basic activities of daily life with external supervision and do not require continued psychiatric and health care.

2. Home with support: Addressed to individuals with a psychosocial disability with a disability certificate of 65% and ages between 18 and 64 years old, which can develop basic activities of daily life with external supervision and do not require psychiatric care and healthcare continued and can live in shared flats in the community.

27 Unguaranteed benefits subject to available budget credits are excluded since they are reduced and particularly hard to benefit from or currently inexistent. (e.g. Home service with temporary or permanent support for people with social problems derived from mental illness in ordinary flats)
3. Pre-Employment Service: Addressed to individuals with a psychosocial disability with a disability certificate greater than 33%, from 18 to 50 years old, who can follow a training course aimed to insert them in the protected or ordinary labour market.

4. Social Club: Addressed to individuals over 18 years old with a psychosocial disability with difficulties in social integration and community integration and are clinically stable and with social and family support.

People with drug addiction

1. Home with support: addressed to individuals over 18 years old with need for support for their social and community integration, with no active toxic consumption or other associated pathologies, during their community integration phase.

People with HIV / AIDS

1. Home Residence: addressed to individuals over 18 years old with need for support for their social and community integration, as a result of HIV / AIDS.

2. Home with support: addressed to individuals over 18 years old with need for support for their social and community integration, as a result of HIV / AIDS, without being in a phase of community insertion.

Aside from that specific housing services offered by the public administration through Public Social Services (detailed later) there are specific resources / instruments aimed to improve access to housing for individuals with psychosocial disabilities consisting of an economic aid complementing the income of the individual who doesn’t have sufficient financial resources to access publicly-funded housing schemes. These benefits are exclusively economic and are granted through a regime of competitive concurrence. Two of the main instruments affecting people with disabilities deployed by the public administration in form of benefits / grants are:

Non-contributory pension supplement

Benefit intended to complement the non-contributory pension of the Social Security system for those people who cannot join the regular labour market.

Social urgency grants

Social urgency benefits are granted to cover specific and particular situations considered urgent, basic and on which the livelihood of the individual depend on it. This is a specific economic benefit addressed to people or families who, due to unforeseen and supervening events, are in a situation of urgent need and serious social risk. These grants aim to cover:

- Basic Maintenance and Alimony (food and clothing).
- Housing (rent, mortgages and alternative accommodation).
- Supplies (gas, electricity and water).
- Pharmacy expenses (diapers, pharmacy and baby feeding).

These grants require to be applied through Basic Public Social Services located councils (villages or cities, depending on the territorial distribution) or in county councils. These benefits are co-financed by the Catalan Department on Work, Social Affairs and Families, and the rest come from state and local funding. The Department extended the collaboration initially agreed
with the local entities for social urgency grants to improve situations where fuel poverty is present by increasing funding allocation and improving inter-administrative cooperation through program contracts with local corporations holding Basic Public Social Services Areas.

2. Assessment of needs & housing allocation process

Assessment of Housing Needs & Allocation in Catalonia for individuals with disabilities is regulated through the Catalan Law of Social Services which clearly defines Social Services as one of the welfare state pillars, alongside with Social Security, the Health System, the Education System, Employment Policies and Housing Policies. Social Services are the set of interventions aimed to guarantee the basic needs of the citizens, specially paying attention to the maintenance of their personal autonomy and fostering its individual capacities, in a framework of respect for its inherent dignity.

Social Services are conceived and regulated according to the principle of universality on the right to access them, notwithstanding its effectiveness lies in proper financing of the benefits contained in the Portfolio of Social Services. Due to the limitations on the budget allocated to Social Services, sustainability is not guaranteed for all the services in the Portfolio, and any new proposal of service (e.g. community housing or social housing) requires previous financial studies for its approval.

Housing policies and instruments to allocate resources available vary depending on the region and a form to view the heterogeneity of policies and practices is to compare the different entities and public bodies competent on each region. Below are described the four main implemented plans implemented across the Catalan territory.

1. Barcelona Metropolitan Area

Within the Metropolitan Area of Barcelona there’s a network of entities operating together, according to the Metropolitan Housing Policy Guidelines 2016-2019:

1. The Directorate of Urbanism
2. IMPSOL (Municipal Institute to Promote Soil Development)
3. The BCN Metropolitan Housing Consortium
4. Metropolitan City Councils (through specific programmes)

The Metropolitan Housing Policy Plan recognises that the availability (or lack thereof) of tools and instruments is a key success factor that needs to be implemented in order to improve social housing policy. Activating and allocating in the regular housing market or in the protected one empty or unoccupied households is a priority at a government level but also at

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28Note that Catalonia has competencies on Social Services and it has a specific autonomic government department regulating them, entirely separate from the Healthcare department while it also has access to Spain Social Security benefits. Meanwhile, the rest of Spain and other Autonomic Regions (CCAA) are a mix of transferred competencies on Social Services and centralised competencies which makes a little difficult making a comprehensive analysis of the entire country regarding social services due to disparity between CCAA.

a municipal level and the aforementioned tools are being conceptualised, developed and implemented to tackle the issue of mobilisation of empty housing.

In the Barcelona Metropolitan Area there is a commitment to further develop regulation, acquired after the signature of the Catalan National Housing Plan 2007-2016 and the approval of Law 18/2007, of December 28, on the Right to Housing. The body responsible for developing this Regulation was the BCN Metropolitan Housing Consortium, an entity created by the Generalitat de Catalunya and the Barcelona City Council for the joint management of functions, activities and services in the field of public housing public in the city.

The Consortium usually acts in two situations:

1. Adjudication of social housing in case of emergency due to loss of housing

It is understood as a social emergency due to loss of housing being in a situation of extraordinary and exceptional vulnerability that causes the family or coexistent unit to be at an imminent loss of the primary residence.

2. Social Housing Pool

Housing pool in which the effective amount to be paid by a successful bidder is calculated according to their net income, guaranteeing at all times that they are not allocating more than 30% of their net income to pay for housing rent, including basic supplies. For this purpose, aids, benefits and subsidies may be applied to achieve this objective. According to the data provided by the Catalan Housing Agency, there are currently 8,214 homes registered in the Register of vacant or unoccupied houses property of financial institutions and investment funds.

Another tool is the Register of Housing Applicants to the Officially Protected Housing of Barcelona. The Register depends on the Metropolitan Housing Consortium, which at the same time depends on the Barcelona City Council.

The purpose of the Registry is to provide a better Official Protection Housing service to individuals with difficulties accessing a home. It is a legal instrument aimed to increase efficiency in the use of public resources and adequate management of the officially protected housing pool in Barcelona, through effective public control in its allocation and transmission. This Registry was created derived from the Law Decree 1/2015, of March 24, on extraordinary and urgent measures to allocate housing originating from mortgage execution processes and it consists on a Registry of empty houses, with administrative character, where unoccupied housing or household property of financial institutions, investment funds and other subsidiaries. This registration is public and allows to know the number houses with these characteristics in each one of the municipalities. It should be noted that the registration in this register is mandatory, but it is not compulsory to withdraw the note from the register in case the property is no longer in use through a contract. Therefore, it does not allow to know exactly the number of empty houses in the hands of big holders, but it allows to know an approximate volume of houses that have been in this situation since its effective implementation.

30https://www.diba.cat/c/document_library/get_file?uuid=99a559d6-feb3-43d4-86e01765714ed5fe&groupId=175591
2. **Girona**

In Girona, through the Local Housing Office\(^{31}\) there’s a service of housing pools for social rental which offers a mediation service between people who owns empty houses and potential tenants who have difficulties accessing housing at a market price. The housing stock for social rental has the objective of increasing and improving the rental housing pool at affordable prices, as well as providing families with access to housing according to their needs and possibilities of payment. It offers:

- Free service of management, information and advice throughout all the time that the property is rented.
- Processing, management and drafting of the lease contract/agreement and follow-up of the contractual relationship.
- Search for a home adapted to individual needs and possibilities of payment.
- A strictly obligatory deposit of the security deposits stipulated in the current legislation with control of the posterior return.
- Applying for public benefits aimed to pay rent.

In Girona there are historical initiatives from the non-for-profit sector, for example *Patronat Santa Creu de la Selva*\(^{32}\) through the Board of Trustees adopted the objective to build social housing located in small development sites in the city of Girona. Later, the Board built households in entire neighbourhoods and overall constructed over 3,000 homes. The Board of Trustees is currently promoting housing through protected rental and is responsible for processing and managing only the rents of the buildings that it promotes and under their property. It also collaborates with administrations and social entities to offer rental housing at affordable prices. The Board of Trustees, has another private entity, non-for profit, which is Fundació Bisbe Tomàs de Lorenzana which primary objectives are the construction and management of officially protected housing mainly for young people, the elderly and groups with difficulties (including people with disabilities).

3. **Lleida**

In Lleida, a Service of Social Inclusion Housing\(^{33}\) exists and aims to provide residential accommodation service for adults in a regime of temporary accommodation, offering maintenance and socio-educational support in a home specifically aimed at individuals who follow a social inclusion plan. In this region, there is also a temporary accommodation service for people in homelessness situations and seasonal residents, as well as people in social emergency situations.

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31. [http://www2.girona.cat/ca/omh_funcions_borsa_mediacio](http://www2.girona.cat/ca/omh_funcions_borsa_mediacio)


4. **Tarragona**

The purpose of the Housing Pool/Stock program\(^{34}\) is to rent unoccupied housing at an affordable price, through a mediation service between homeowners and rent seekers, which facilitates the formalisation of rental contracts providing a series of guarantees. At the same time, aims to increase the housing pool managed by the public administration to make it easier for people with low income to access the housing market.

**PROMISING PRACTICES**

1. Person-centred approach

*Personalised Support Plans*

One of the best tools to promote person centred approaches in several domains among the Housing & Support are the so-called Personalised Support Plans (PPA in Spanish). This good practice is currently implemented by many Spanish organisations devoted to social assistance, among them the Spanish partner of Top House project, Foundation Girona Guardianship. It gives support to more than 1200 users on a yearly basis, among whom 49% are people who suffer from severe mental disorders, 27% experiment an intellectual disability, 19% live with advanced dementia and the remaining 5% are users whose diagnosis is difficult to classify. The Foundation promotes social support and therapeutic interventions by allocating 66% of its human resources to a specific area working jointly with professionals allocated in economic management or legal defence.

Personalised Support Plans are a continuous problem solving and improvement process that helps to see the person as a whole, to recognise his/her wishes and interests and to put him/her at the centre of the process, harnessing their skills and motivations.

\(^{34}\) [http://tarragones.cat/habitatge/borsa-habitatge](http://tarragones.cat/habitatge/borsa-habitatge)
They consist of a process that is based on several steps, starting from a comprehensive appraisal, which allows problems and potentialities to be detected and lately to set goals. These goals are detailed in activities based on personalised instructions, under a follow-up carried out by the social worker.

If needed, goals can be reframed as well as instructions. The whole process is subject to an internal evaluation that gives the possibility to understand the potential improvements (see cycle of intervention described in Fig. 3). In the practice, the process is based on different steps through which PPA is progressively created, adapted, implemented and evaluated.

2. User involvement

**La Sopa**

The best practice that was identified in this section relates to housing for homeless people in the city of Girona during the winter season implemented by a consortium called “La Sopa” (the soup). Consortium is composed by local authorities as well as CSOs such as Red Cross or Caritas. Its main goals are:

- Provide a reception service for people in need or with special difficulties due to their economic and social situation.
- Perform an intervention that combines assistance with reintegration and the promotion of personal autonomy.
- Establish effective cooperation with other services and resources in the territory to face with in social, health, labour, legal and housing aspects.

In the centre, people work with the premise that the regular use of services that cover basic needs make it easier to create more or less stable links with peers and with professionals in a socialising space. This link will allow the people assisted to guarantee, in a progressive way, new commitments, first in the use of services and, afterwards, towards his own personal recovery.

From this logic the centre organises its activity in four levels of commitment according to the users’ engagement:
- The intervention in an open environment, or street work.
- Specific basic services: personal hygiene, social dining room and laundry.
- Basic services: Day Centre and night-time accommodation.
- Recovery services: Residential Centre and inclusion floors.

For all the people who are looked after in any of these services, there is a social intervention and a follow-up of the work plan.

As for the specific good practice, it is based on prefabricated houses are set during the cold season, for giving shelter to 32 persons who are living in the street. The goal is to protect them from low temperatures and serious climatic phenomena, however it also contributes to increase their capacity to manage their lives, to improve responsibility and care about the others. The whole intervention has been conceived for giving voice to users and the responsibility to decide about rules that are at the basement of the living together. More in detail, this decision-taking process can be split in two moments:

Before the winter season:

Social workers meet potential users and work their expectations about lodging and make them reflect about the most basic and generic rules. Rules are usually agreed by the whole group, however if in some circumstances there is not a clear position, the ruling criterion is to ensure the general interest over the individual one.

During winter season:

Weekly meetings continue, and certain rules previously agreed are updated and improved. Social workers set a calendar in which two different people every night are responsible for the house. After two years there were just one situation that they did not achieve to manage, it was the case of a drunk and violent homeless. Rules that are introduced are very practical and tend to cover the more recurrent situations, for instance they face with:

- What to do with homeless’ dogs? Are they entitled to stay inside houses?
- What to do in case of persons who pee on?
- What to do when a drink user becomes violent?

One step at a time homeless people improve their participation in meetings and pay more attention to general needs over the individual ones, they successfully implement rules and some of them start to be skilled enough to live in a normal house.

**Cal Muns**

In the same vein, it must be highlighted the good practice of temporary houses implemented by Pere Claver Foundation. It consists of a residential solution, “Cal Muns”35, addressed to homeless people with serious mental problems aimed at improving their self-care and strengthen their abilities. At the same time, the intervention is oriented to favour users’ re-integration in the community able to face a full autonomous life. When re-integration is not possible, users are referred to residential resource provided in the Social Services Portfolio that best suits their personal characteristics. Cal Muns is based on a team composed by

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psychiatrists, psychologists, nurses and social workers who support and train people. As for results, in one year, almost 75% of users take their medications regularly, take care of their image, their health, recovering their relationships and beginning to take charge of studying or seeking employment. Unfortunately, some improvements are necessary to find permanent housing that would improve users’ stability, since they are hosted in Cal Muns for a period between one and two years.

These good practices are particularly aligned with co-production because it takes into account people’s skills knowledge and experience, it starts from people’s strengths from and things they can do, all depend on each other, all participants contribute to the result, homeless people and professionals work together.
Integrated Housing & Support in Ireland

STATE OF PLAY

1. Legal and policy framework

The assessment of housing need is carried out in Ireland through local authorities / housing authorities. Applicants interested in all forms of social housing provision or support should apply to their local authority.

The legislative basis for this assessment of housing need is the Housing (Miscellaneous Provisions) Act 2009 which contained provisions for revised procedures for social housing applicant assessment. In April 2011, new social housing assessment regulations were introduced.

The Act introduced the legislative basis for these updated rules and the regulations themselves detail how these changed rules should apply and be implemented. These regulations introduced some important changes for social housing applicants:

- An applicant can only apply to one housing authority
- An application must already be living in the housing authority’s area or have a local connection with the area. The housing authority can choose to waive this requirement in some circumstances. A local connection could be that the applicant has lived in the area for the last 5 years, works within a short distance of the area, is in full time education in the area, is attending ongoing medical or support services in the area or that a relative has lived in the area for a minimum of 2 years.
- New income limits apply to housing applicants and if an applicant’s household income exceeds the limit, they will be deemed ineligible. The Department of Housing have a detailed table of the revised income limits.
- An applicant must have no suitable alternative accommodation available to them. This refers to property that a member of the household could be reasonably expected to live in. This does not include property occupied by someone from whom the applicant is divorced or separated, housing that would not meet the requirements of an applicant with a disability, housing unfit for human habitation or that would become overcrowded.

When an applicant is applying for social housing or social housing support and their need is being assessed, they must do so under one of the following categories of housing need:

- Is the property overcrowded.
- Is the property fit for human habitation?
- Is the applicant residing in a hostel or other emergency accommodation?
- Is the applicant residing in an institution?
- Is it unfit for the requirements of the applicant’s disability?

• Is the property shared with people the applicant would have a reasonable requirement to live separate from?

• Is the property subject to an unsustainable mortgage and going through the Mortgage Arrears Resolution Process (newly introduced as part of the 2011 Regulations)?

This final grounds for eligibility was only introduced in 2011 and shows how updated legislation allowed for long established processes and procedures to be more responsive to changes in Irish society – many homeowners found their mortgages were falling into arrears following the economic crash of 2008.

2. Assessment of needs & housing allocation process

Assessments of housing need

The Housing Act of 1988 compelled local authorities to carry out an assessment of housing need every three years. This was updated in the Housing Act of 2014 and local authorities must now carry out such an assessment on an annual basis. This is to be welcomed as it will hopefully produce more meaningful up-to-date data as to the type and level of housing need in particular areas. However, the administrative burden this places on local authorities should not be underestimated and the data such an assessment produces will only be beneficial if it is carried out correctly.

Currently, local authorities write to everyone on their waiting list each year and ask them if they still wish to be included on the list. Many also advertise in local newspapers and on local radio and advise their applicants to make contact with them.

Despite this, there is considerable anecdotal evidence of applicants being removed from the social housing waiting list as they were not aware of their new requirements to confirm their wish to stay on the list. The difficulties experienced by applicants is compounded for applicants with additional support needs who may require support in completing forms.

The results of the 2017 Housing Needs Assessment and the categories of need identified are outlined below:

<table>
<thead>
<tr>
<th>Main need for social housing support</th>
<th>Number of households</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dependent on Rent Supplement</td>
<td>35,204</td>
</tr>
<tr>
<td>Unsuitable accommodation</td>
<td>21,130</td>
</tr>
<tr>
<td>Requirement for separate accommodation</td>
<td>11,914</td>
</tr>
<tr>
<td>Homeless</td>
<td>4,977</td>
</tr>
<tr>
<td>Overcrowded</td>
<td>3,544</td>
</tr>
<tr>
<td>Physical disability</td>
<td>2,084</td>
</tr>
<tr>
<td>Mental health disability</td>
<td>1,691</td>
</tr>
<tr>
<td>Type of Disability</td>
<td>Number</td>
</tr>
<tr>
<td>-----------------------------------------</td>
<td>--------</td>
</tr>
<tr>
<td>Intellectual disability</td>
<td>1,571</td>
</tr>
<tr>
<td>Medical or compassionate grounds</td>
<td>1,564</td>
</tr>
<tr>
<td>Unfit accommodation</td>
<td>948</td>
</tr>
<tr>
<td>Unsustainable mortgage</td>
<td>746</td>
</tr>
<tr>
<td>Sensory disability</td>
<td>381</td>
</tr>
<tr>
<td>Other form of disability</td>
<td>45</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>85,799</strong></td>
</tr>
</tbody>
</table>

While the assessment is comprehensive in its categorisation of different forms of disability, the housing needs assessment has been criticised by many representative bodies, including the ICSH, for many years for its failure to adequately capture the level of housing need for special needs groups, especially people with a disability and older persons.

While it is the role of the local authority to assess housing need, they have generally not provided housing for people with a disability, except for small numbers of adapted units to accommodate someone who uses a wheelchair. Therefore, it is the experience of many disability service providers that their service users do not apply to the local authority for housing as they do not believe they have any chance of their housing needs being met. Most social housing for people with a disability is provided for by voluntary housing associations who are almost always linked to a disability services provider.

Some disability providers have launched campaigns to raise awareness among their service users and peers, family, friends, support workers, etc., to encourage any person with a disability to register their housing need with their local authority. In 2011, the Irish Wheelchair Association launched Operation Sign Up[^38].

**Schemes of letting priorities**

In Ireland, each local authority draws up its own rules for deciding order of priority on the waiting list, called a "scheme of letting priorities", which is contained within a local authority’s broader allocations policy. Local authorities must set out in their schemes how they will determine priority for social housing applicants as well as for existing social housing tenants who apply to transfer to other social housing. Transfers are sometimes used for housing estate management and regeneration purposes but can also take account of a tenant or applicant’s changing housing needs due to increasing age, reduced mobility or a disability.

Although the 2009 and 2011 Social Housing Assessment Regulations take a step towards standardisation, the absence of a compulsory national framework for allocations means a wide variety of approaches taken by local authorities.

One scheme type is points-based, which involves a more subjective assessment of housing need with points being allocated against various criteria of need, the sum of which determines the household’s position on the waiting list. Other local authorities use a simpler banded system that places households into three bands that represent broader categories of housing need.

Period of time spent on the waiting list can also be considered and some local authorities have changed from a points-based system in recent years to one that is based on time on the waiting list.

How are allocations made?

Normally once a suitable house becomes available, an offer is made directly to the highest priority household (direct letting). The number of offers made to a household is limited to two by the Regulations in order to minimise refusals that result in longer property void periods – a household’s refusal of two offers results in deferral from the waiting list for one year during which time spent on the list cannot be accrued for the purpose of priority.

An alternative method of allocation provided for by the Regulations is choice-based letting (CBL), where households actively bid for available properties and the highest priority bidding household is allocated the house. The bidding can be done with a paper or online system. CBL has been found to be useful especially for hard-to-let properties, and Donegal, Fingal and South Dublin County Councils, and Dublin City Council have operated CBL in varying degrees.

Allocations to voluntary and co-operative housing units

The allocation of housing units by housing co-operatives and housing associations is governed by a memorandum issued by the Department of the Environment in 2002.

Voluntary housing associations provide the majority of housing for people with a disability, older persons and people experiencing homelessness in Ireland, as well as thousands of units for families. Most do not operate their own housing waiting list and their allocations are made in partnership with the local authority and are taken from the local authority list. Local authorities have nomination rights on between 75% and 100% of tenancies in voluntary housing schemes, therefore a close working relationship between the housing association and local authority is essential to ensure appropriate nominations are made.

There are over 500 voluntary housing associations across Ireland, all set up with an intention to house particular categories of applicants. It is therefore advisable that each housing association creates its own letting policy statement to outline of the type of housing association it is, why it was set up and the category of housing need it provides and manages housing for e.g. elderly and people with disabilities. Its purpose is to align nominations to the lettings ensuring that the nominations relate to the type of service being provided.

It is important that the local authority understands the nature and objects of the housing association when making its decision to nominate. This is why it is important that the individual letting policy statement sets out:

1. the type of housing service being provided e.g. elderly and disabled persons only;
2. the type of balanced community the housing association is trying to create, and
3. specific needs criteria linked to the individual housing development, for example over 60 years of age, low level of dependency or people who live in the area and surrounding hinterland.

The criteria should also reflect the ability of the housing association or co-operative to accommodate different types of nominees from the local authority, depending on the management expertise and governance capacity.

The letting policy statement allows the housing association the opportunity to inform the type of nominations which may be received when liaising with the local authority.

PROMISING PRACTICES

1. Person-centred approach

Policy background

Policy direction in recent years has slowly taken a more person-centred approach, along with an adoption of the “housing first” philosophy. The Housing First approach is mentioned in the Programme for Government and it underpins the ‘housing led approach’ of the current national homeless policy and it fits naturally with the ‘recovery focus’ of Vision for Change, a strategy document which sets out the direction for mental health services in Ireland.

In July 2012, the Irish Department of Environment, Community and Local Government published the National Housing Strategy for People with a Disability 2011-2016, the first policy document in Ireland to provide clear guidelines specifically on best practice in housing people with a disability. It is part of a wider government policy (legislated for in the Disability Act 2005) for all public services to meet the needs of people with disabilities as an integral part of their function i.e. mainstreaming of services to people with disabilities.

The policy was developed through a multi-agency approach and was particularly informed by the Working Group on Congregated Settings and its ongoing review of disability services moving from institutional settings to support people with disabilities in community-based living, with maximum independence and choice. This reflected the policy shift towards the delivery of care and support to people with disabilities in the community and was another step away from the historical practice of the Department of Health and Health Service Executive funding housing as part of a person’s overall care in a large residential congregated setting.

The Strategy has 9 strategic aims to deliver its vision for housing for people with a disability in Ireland which is:

“To facilitate access, for people with disabilities, to the appropriate range of housing and related support services, delivered in an integrated and sustainable manner, which promotes equality of opportunity, individual choice and independent living.”

The strategic aims that strive to achieve this vision are:

1. To promote and mainstream equality of access for people with a disability to the full range of housing options available suited to individual and household need.

2. To develop national protocols and frameworks for effective interagency cooperation, which will facilitate person-centred delivery of housing and relevant support services.
3. To support people with a disability to live independently in their own homes and communities, where appropriate.

4. To address the specific housing needs of people with an intellectual and/or physical disability, moving from congregated settings in line with good practice, including through the development of frameworks to facilitate housing in the community.

5. To address the specific housing needs of people with a mental health disability, including through the development of frameworks to facilitate housing in the community, for people with low and medium support needs, moving from mental health facilities, in line with good practice.

6. To consider good practice in the design, coordination and delivery of housing and related supports.

7. To facilitate people with a disability to access appropriate advice and information in respect of their housing needs.

8. To improve the collection and use of data/information regarding the nature and extent of the housing needs of people with a disability.

9. Provide a framework to support the delivery, monitoring and review of agreed actions.

There has been growing recognition in recent years that the separation of housing and care/support services can enable people with disabilities to exercise greater choice and control over their own lives and move from being a patient to a service user to a consumer of housing and services.

This is very much reflected in the United Nations Convention on the Rights of Persons with Disabilities, a convention which Ireland signed in March 2007, but only ratified by Ireland in March 2018, becoming the last EU country to do so. Despite the very recent ratification, housing associations in particular have been providing person-centred housing and support for many years, as well as maximising choice for tenants and service users.

**HAIL (Housing Association for Integrated Living)**

HAIL is a housing association with a mission to provide quality housing and individually tailored services to support tenants and clients, primarily those with mental health difficulties, to integrate and live independent lives in the community. They own and manage approximately 300 housing units in the greater Dublin area.

From 2012, they have operated two projects in collaboration with the North Dublin City HSE Mental Health Rehabilitation Teams, Doras and Slán Abhaile. The aim of these projects was to source independent accommodation and offer support to persons living in HSE residential services in congregated settings and who wished to move to independent community living, if it was expected to have a positive outcome for them.
Tenants were given support in three phases:

1. Preparatory phase - selecting suitable candidates for inclusion in the project, making applications to housing authority lists, supporting prospective clients with self-care and living skills

2. Transition phase. Moving in phase – tenants asked to approve accommodation before committing to it and then supported in obtaining a rental agreement, in acquiring fixtures and fittings for the new accommodation and in the logistical aspects of moving in

3. Tenancy maintenance phase - monitoring the client’s wellbeing and integration, supporting social activities and troubleshooting accommodation and tenancy-related problems that might arise.

The intensity and level of support provided varied throughout this process with more intense support provided at the moving in phase and immediately afterwards at the beginning of the tenancy maintenance phase. The intensity of support would also be increased as required. Floating support was provided as opposed to tenant’s previous experience in institutional settings where support was linked to the accommodation with nothing available to them in a community setting.

56 clients / tenants were supported to move from an institutional setting to live in the community through this project and all, but one have continued to live in the community with supports as required.

Tenants have reported excellent outcomes from the project. From their own assessments they have reported:

- Happiness with the new living arrangement (67% ‘great’; 33% ‘good most of the time’),
- Managing mental health issues (47% ‘much better now’; 47% ‘somewhat better now’),
- Life satisfaction (an average increase from 5.4 to 8.2 on a 10-point scale since the move),
- Autonomy - change since the move (80% ‘a lot more now’; 20% ‘a little more now’),
- Daily life activities (67% now ‘managing very well’; 33% ‘managing fairly well’).

- Taking an inter-agency approach to housing development, Clanmil Ireland (as the landlord), Cheshire Ireland (as the service provider) and South Dublin County Council (as the relevant local and planning authority who provided the site and design team) developed Valhalla, an independent living scheme for tenants with disabilities as well as some tenants with no additional support needs. Care and support are provided to individuals in their own homes as required. The building itself has been built to a high specification and is a pilot scheme under the Government’s initiative ‘towards carbon neutral’ homes
The Building was designed following the principles of ‘Universal design’ and in particular four of the ground floor units have been built to include essential aides and assistive technology for people with physical disabilities. The building can cope with a broad spectrum of needs and adapts easily to possible future changes in residents’ requirements. The Irish Wheelchair Association design guidelines were used as a further reference for the design.

During the initial design process Clanmil Ireland and Cheshire Ireland were consulted regarding the specific requirements of prospective tenants. The ground floor apartments are designed to a high spatial standard to cater for the needs of tenants with disabilities. The input of the prospective tenants, their service support team and OTs has been important to this process. Specific requirements have been addressed at the detailed design stage.

Allocations were made in partnership with SDCC and some tenants have been waiting for a considerable time for suitable accommodation in their preferred location. Tenants are important to the successful management of the scheme and are involved in decision making. Clanmil Ireland carries out tenant satisfaction surveys on an annual basis and feedback is incorporated into an action plan and feeds into the Strategic Plan for the organisation. In a recent survey of Valhalla residents, 90% are happy with the overall quality of their home. Those who were not completely satisfied cited remaining snagging issues as the reason (which has since been addressed). 100% of residents said that they were satisfied with the overall service provided by Clanmil Ireland.

One tenant, Jonny Murtagh said:

“It means a lot to me to live here because I can do a lot more that I could do before in my previous accommodation. I didn’t think I could move here in the beginning but would now like to advocate this type of housing for other people. Cheshire staff helped me a lot with the move. It’s great having my own place and lots of space, the neighbours and Clanmil staff are very kind. I talk a lot more than I did before. I’m very happy!”

There are many more examples of person-centred approaches to housing delivering high quality housing solutions for people with a disability and people with additional support needs. Government policy is seeing a welcome shift towards person centred approaches however with person-centred housing being delivered on a small-scale basis by voluntary housing associations, the process of moving social housing for people with a disability to fully person-centred will still take some time.

2. User involvement

Policy background

Housing and Supports under the Irish system encompass at least two government departments. Housing policy is governed by the Department of Housing (previously the Department of the Environment) whereas care and support services are often funded and governed by the Department of Health and the Health Service Executive (HSE). There are difficulties therefore in ensuring a co-ordinated approach to service user involvement on a large scale across both housing and support. Where there are two agencies involved in Housing and Support, it is vital that both agencies as well as the service users are committed to service user involvement / tenant participation. There have been great strides made in recent years in recognising the benefits of service user involvement although its implementation is still somewhat ad hoc.
In 2008, the HSE published the National Strategy for Service User Involvement in the Irish Health Service which defined service user involvement as:

“A process by which people are enabled to become actively and genuinely involved in defining the issues of concern to them, in making decisions about factors that affect their lives, in formulating and implementing polices, in planning, developing and delivering services and in taking action to achieve change”

It stated that the service user should be central to their own care and to the design and delivery of health and personal social services which would result in more appropriate services of a higher quality with increased service user compliance and satisfaction. The strategy was developed to ensure a systematic and consistent approach to service user involvement across the health and social services and to build upon the current good practice in involving service users across the country. The strategy had the support of the Minister for Health and Children and the Board and the Chief Executive Officer of the Health Service Executive (HSE) and it represented a significant step forward in developing strong service user involvement in health. This policy was vital in familiarising service providers with the concept of service user involvement and promoting it. The top-level acceptance of service user involvement was important although the trickle down to front line staff may have taken more time and been implemented on an ad hoc basis and been dependent on available resources.

The strategy comprises a statement of principles:

- Service users, especially those whose voices are seldom heard, have a right to be involved in the development of the health and social services that they use, and this is a key element in the delivery of patient-centred care.
- Commitment of management at all levels is essential to ensure leadership and delivery on this strategy.
- Service users should be centrally involved in their own care.
- Open dialogue, trust and mutual respect are key ingredients of successful service user involvement.
- Involvement must be based on inclusion, diversity and equity – health services must engage socially excluded groups including those who are socio-economically disadvantaged, ethnic minorities and Travellers, people with disabilities, lesbian, gay, bisexual and transgendered people, children, young people and older people and users of mental health services.
- Clear channels of communication with the health service for service users are essential to effective involvement.
- Accurate and timely feedback and information to service users are key elements of successful user involvement.
- Service user involvement initiatives must be systematically evaluated and learning from service user involvement initiatives must be disseminated across the health and social services.

Although the focus of this strategy is on health and care services, it was in place at a time when significant work was taking place in moving people with a disability from institutional
congregated accommodation to more individual person-centred community living, therefore the guiding principles had an effect and were implemented in many cases.

**Sunbeam House Services**

Sunbeam House Services provide housing and support services to people with intellectual disabilities in Co. Wicklow. Sunbeam has incorporated principles of Self-Directed living or into its services. Sunbeam describe self-directed living or SDL is a school of thinking and practice relating to the arrangement of high quality ‘person-centred’ or ‘individualised’ supports that enable people with disabilities, mental health difficulties and dementia to maintain or develop full and meaningful lives in their communities. In a context in which there are many different and sometimes competing models of support, SDL recognises that a number of these models share a common purpose: to bring about a situation in which individuals, with the necessary support, are able to choose, pursue and achieve ‘their good life’ to a similar extent to others in their society.

SDL at Sunbeam House was initiated to respond to requests by people that want a support service built around their life and not their life built around a support service. Traditional support services in group settings work extremely well for some people yet a growing number of people are becoming dissatisfied with this style of service provision. The supports and services offered to adults with an intellectual disability have always been in a constant slow state of transformation, from no services to large institutional services, smaller institutions to group homes, day services to accessing community services, sheltered employment to supported employment.

To further develop SDL, Sunbeam developed an immersion project in May 2013. This project brought together service users, family members, managers and front-line staff from organisations all over the country. Together they immersed themselves in week long workshops and lectures exploring different approaches to service delivery.

Sunbeam acknowledge that SDL is difficult to do properly. Life is not straightforward therefore SDL is not a straightforward process. The supports offered are unique to each person and can often change in accordance with the person’s wishes or requirements. The values of the person come first not those of the supporter or indeed the organisation. Sunbeam have committed to SDL by developing a small staff team to a Self-Directed Living approach of support. In this way, the service user’s expressed wishes and requirements will be prioritised regardless of how that fits with the requirements of the organisation. The SDL team works for service users that have expressed (verbally or through action), a strong desire to direct their own supports. This team is based outside the main Sunbeam properties and offices; it is located within the community and is used as a place to meet with service users, their families, other stakeholders and to avoid the team becoming involved in non-SDL activities.

Sunbeam have also developed a service users’ forum that meet monthly with senior managers to raise issues of concern about their service or accommodation. The Service users’ forum receives a written response from senior management about how issues raised will be dealt with. It is vital in such systems of service user feedback and input that tokenism is avoided and that the involvement or service users is meaningful and more than just a ‘box-ticking exercise’.
There are many more examples of service user feedback and involvement in housing with support in Ireland. Sunbeam is presented here as a best practice example as they have developed feedback and involvement as a key facet of their service. This would not always be replicated across other providers, but there are smaller scale initiatives and approaches that have had great success in incorporating service user feedback in housing and support design and delivery.
Promising practices in Europe

There is nothing better than being inspired by others, especially when you want to move from theory to practice! That is why the TOPHOUSE partnership started its journey gathering examples on access to housing schemes for persons with disabilities, homeless people and the elderly. The intention was not to do a comprehensive review of all existing practices, but to pick up some promising examples that could help TOPHOUSE partners to identify the needed learning outcomes in view of the preparation of the practical guidance (manuals) for staff members dealing with housing allocation and support.

Why ‘promising’?

According to wikipedia.org a ‘best practice’ is a method or technique that has consistently shown results superior to those achieved with other means, and that is used as a benchmark. But we know that in many occasions a ‘best practice’ may not be able to solve a problem at all and it can be difficult to transfer it to another context. That is why some organisations, such as the Fundamental Rights Agency of the European Union (FRA), use the term ‘promising practice’ to refer to practices in place that are innovative yet still on an experimental level so there is still room for some development (e.g. to be aligned closer with UN CRPD) and upscaling (showing how it may be proven to be effective in the long term and also able to be mainstreamed).

Eligibility criteria

The basic criteria were that the promising practice must be a running practice (so it has been implemented and/or currently taking place) implemented in Europe (Council of Europe geographical coverage) and falling under 4 core areas included in TH project:

- Assessment of housing needs of persons with disabilities
- Inclusive allocation models of social housing for persons with disabilities
- Support and assistance models in community living and community-based rehabilitation, that including the access to affordable and accessible housing
- Cooperation models with of stakeholders, community developers or local social planners that improve allocation, affordability and accessibility of social housing for persons with disabilities

The target group of the practices are primarily persons with disabilities seeking help with housing & support. This concept also includes persons with psychosocial disabilities and mental health issues, who often experience homelessness. We were looking for practices dealing with adults with support needs (+18) but being aware of specific issues related to elderly (retirement age+) and gender. We were also looking for practices in many different housing environments: persons living in institutions, people living in larger homes, group homes, people living in own flats with assistance, people living in hostel environments (floating support).

But the most relevant criterion was that the practice must be demonstrably aligned with a rights-based model, reflecting person centred approaches and allowing for the highest level of user involvement in the design, implementation and evaluation process.
Selection process

A call for practices was launched in March 2018 and disseminated amongst all TOPHOUSE partners external communications channels. We received 46 applications that were evaluated and shortlisted by an expert jury composed by one representative per TOPHOUSE project partner organisations. Out of the 46, finally 21 practices were selected to be included in this report.

The practices were selected as they responded particularly to the following core selection criteria:

a. Practices reflecting **person centred approaches rooted in the community**, preferably with relations to key stakeholders, community developers and local social planners;

b. Practices focused on how to better understand the **behaviour or patterns**, on how the user wants to live her/his life;

c. Practices focused on how does integrated housing & support (HIS) work from the **perspective of training housing & support (H&S) staff**

d. Practices developed within or supported **de-institutionalisation processes**

The TOPHOUSE partnership thanks all those organisations who submitted their application. There was always something good in every one of them (that is why you can also find at the end of this chapter reference to other practices which were not selected but in which we saw some inspiring elements) and they all have been fundamental to develop the practical guidelines for staff dealing with allocation of housing & support (you can find these guidelines in the TOPHOUSE project website, as from October 2019: http://www.easpd.eu/en/content/tophouse).
IN BRIEF

The Pentru Voi Foundation is a private non-governmental organisation that runs a protected homes initiative as well as other social programmes, such as day centres, for people with developmental disabilities. The foundation is the largest in the western part of Romania providing support for people with intellectual disabilities, with 78 employees and almost 200 service users.

The programme, which began in 1999, now includes six protected community homes in the community, housing 27 adults who are supported by 17 employees. The purpose of the programme is to provide people with intellectual disabilities the opportunity to live in the community, to participate in the social life of the city, and to have leisure time. Another essential aspect is to offer people with intellectual disabilities, even those with profound and multiple disabilities, the opportunity to make decisions regarding their own lives, such as what to eat, what to wear, and how to spend their leisure time. Furthermore, beneficiaries should also have the opportunity to maintain relationships in the community with friends and neighbours.

INNOVATIVE ASPECTS

The Pentru Voi Foundation is the first organisation to implement the Protected Homes Programme in Romania and is the only service provider of this social service for people with intellectual disabilities in Timisoara. Services are designed according to the individual requirements based on a person-centred approach. Importantly, the person with developmental disabilities participates in the decision-making process regarding his or her life.
Pentru Voi has two kinds of protected homes: three moderate and three maximum, depending on the level of disability and on the level of independence of the person. In the moderately protected homes, part-time staff offer coaching a few hours per day. In the maximum protected homes, staff provide permanent care and supervision. The activities for the service users are designed using easy to read and understand tools (pictograms, photograms) in order to develop independent life skills. These homes are the only community-based homes in Romania for people with profound and multiple disabilities, and one is specially designed to be accessible by wheelchair.

CONTEXT

In Romania, there are few community services for adults with intellectual disabilities, and most do not have the opportunity to continue their lives in the community as they can no longer live with their family (due to the death of parents or their illness). Thus, the only option offered by the state is institutionalisation in segregated centres, where the standard of living is still low. These include neuropsychiatric recovery and rehabilitation centres, where currently more than 9,000 people with intellectual disabilities live. In Romania, only 829 adults with disabilities live in protected houses, representing 0.71 per cent of the group's total population.

According to the Pentru Voi Foundation, currently 21 people with intellectual disabilities are waiting for a vacancy in protected houses.

OUTCOME, IMPACT, AND EFFECTIVENESS

The protected houses are raising the quality of life of 27 people with intellectual disabilities from Timisoara by providing adequate care and offering opportunities to participate in community life. The most important activities are: needs assessment, personal care, health monitoring, education, accommodation, nourishment, skills development, recreational and social activities, support in accessing community services, shopping, psychological counselling, and alternative and augmentative communications. The organisation also provides know-how and trainings for other organisations in the country as well as the Republic of Moldova, which is developing a similar programme.

Funding was provided by the national government, international NGOs, and private donors from the Netherlands. One apartment was donated by a Romanian family with a child with intellectual disability.

CONTACT

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IN BRIEF

A Thomashuis is a home in which eight to nine adults with intellectual disabilities live together with two caregivers, who run the privately financed house as self-employed entrepreneurs. The franchise concept was launched in the Netherlands in 2008, and today there are already 118 Thomashuizen in some 100 communities throughout the country. The Thomashuis concept is owned by the franchise company De Drie Notenboomen, based in Gouda, which also consults with the Ministry of Health and Care as well as politicians and other stakeholders.

INNOVATIVE ASPECTS

The Thomashuis concept appeals to people who wish to become self-employed as a franchisee and to become private health entrepreneurs. The concept also allows beneficiaries to enjoy independent living in small communities of a maximum of eight to nine people. Furthermore, whereas regular care institutions cost €75,000 to €80,000 per person per year, the cost of living in a Thomashuis is approximately €65,000 per year.
CONTEXT

Thomas was a boy with an innate mental disability. He was housed in an asylum with which his parents were very dissatisfied. Instead of rules and protocols, the parents wanted the provision of love and attention. Instead of employees with high turnover, they wanted a dedicated environment. Therefore, in 2003 Hans van Putten, Thomas’s father, invented the concept of Thomashuis.

A Thomashuis (“Thomas’s house”) offers independent living for eight to nine adults aged 18 years or older with learning disabilities. The household is run by a married couple or by two partners with a professional background in health care. Van Putten conceptualised the Thomashuis after an old-fashioned grocery store, when the grocer lived above the store in the same building and knew all his customers and what they needed.

KEY FEATURES

Each Thomashuis can be interpreted as an independent enterprise, which is managed as a franchise by the so-called care entrepreneurs (zorgondernemers). The group leaders are thus also managers, free to act according to their own judgement as to what is best for their residents. This avoids excessive levels of management and hours of meetings, and the time saved flows into the care of the residents. Another positive aspect is that the caregivers remain the same, avoiding typical institutional staff turnover. The care entrepreneurs work according to the care quality standards of the Thomashuizen Nederland.

What also differentiates a Thomashuis from a usual care facility is the size. Regular care institutions are much larger with up to 250 inhabitants. Thomashuizen are limited to eight to nine and are located in charming buildings – from an old oil mill to a monumental courtyard and even a former school building. Under all circumstances, the houses are located in a residential environment. A Thomashuis is always in the midst of a living community, and special focus is placed on their integration into the neighbourhood.

OUTCOME, IMPACT, AND EFFECTIVENESS

Currently, there are 118 Thomashuizen in the Netherlands. Their small scale makes them very appealing, and most people with disabilities and their families are very satisfied. Moreover, the project is already being replicated, thus demonstrating the success of the franchise concept.

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Assisting Deinstitutionalised Individuals with Intellectual Disabilities Through Personalised Support

Serbia / Elementary and Secondary Boarding School “Milan Petrovic”

IN BRIEF

The Public Elementary and Secondary Boarding school “Milan Petrovic” is the largest institution of its kind in the region.

Its mission is to bring up, educate, support, and empower children and adults with different disabilities and according to their restrictions through numerous contemporary and innovative programmes and activities. The organisation invents, implements, and promotes an open-minded, multidisciplinary approach to support children’s inclusion in society throughout their lifetime. Its system consists of numerous programmes, including Supported Living in the Community.

INNOVATIVE ASPECTS

The organisation is creating and implementing specific long-term support programmes that enable individuals with intellectual disabilities to live outside institutions. It is also working towards deinstitutionalising adult individuals with intellectual disabilities and helping to reintegrate them into the community through residential support services. Specifically, the programme provides assistance and improvement of users’ abilities in:

- everyday activities and situations (such as taking responsibility for money, personal hygiene and cleaning in general, clothing maintenance, food procurement and preparation, use of public transport, and development of positive interpersonal relationships);
• inclusion in cultural and sports activities offered by the community; and
• engaging in work activities both in the private and social sphere.

CONTEXT
Traditionally, persons with intellectual disabilities have been placed in institutions without their consent and without respect for their personal needs and desires. In Serbia, the local support services providing alternatives to institutionalisation for people with disabilities are not well developed.

OUTCOME, IMPACT, AND EFFECTIVENESS

As part of the programme, persons with intellectual disabilities can stay in their local community, with the possibility to choose where and with whom they will live. They also receive fully individualised support from assistants. In cooperation with each individual, an expert team makes an individual service plan, defining the type and duration of support. Users are supported in everyday activities as much and for as long as required, ranging from a couple of hours per week for specific activities to 24 hours per day.

The programme started in 2005 with three users: parents with hearing and speaking impairments and a child with intellectual difficulties and a visual impairment. The goal was to prevent the child's institutionalisation and the separation from his parents. Today, thirteen years later, there are 39 adult users with intellectual difficulties in the programme accommodated in 12 apartments in the community of Novi Sad. Nine of the users were deinstitutionalised from three social protection institutions in the Autonomous Province of Vojvodina.

All users are showing significantly higher levels of self-confidence and social skills. They actively participate in the life of the local community (such as educational, recreational, and cultural activities), and some are employed in private companies. The programme is also a significant source of support for users' primary families. Plans for 2018 included establishing two living communities for an additional six beneficiaries.

In addition to its programmes developing and growing inside the organisation, the Milan Petrovic team is spreading information and experiences through consultations, and thus helping other organisations and institutions in Serbia to develop similar programmes of supported community living.

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Creating Innovative Neighbourhood Centres that Safeguard the Inclusion of People with Disabilities

Belgium (Flanders) / Flemish Agency for People with a Disability and Zewopa

IN BRIEF

Zewopa is a non-governmental organisation offering a wide range of integrated support (nursing, domestic help, individual and collective guidance, transport, personal assistance, and occupational therapy) for people with disabilities, mostly financed by the regional government of Flanders. It also organises inclusive living and social housing for people with disabilities, with 90 per cent of clients fully supported by Zewopa.

Zewopa is the abbreviation of the Dutch “Zelfstandig wonen met persoonlijke assistentie,” or “living independently with the support of personal assistance.” The organisation has been recognised and subsidised for many years by the Flemish Agency for People with a Disability as a service provider specialised in supporting people with disabilities in their daily activities.

INNOVATIVE ASPECTS

Zewopa’s core business consists of running six centres for people with disabilities, located in social housing projects, where people can meet each other seven days a week from 8:00 a.m. to 11:00 p.m. Zewopa’s main aim is to realise independent living conditions for people with disabilities, in close collaboration with other actors in the social housing market. In earlier days, this was by means of installing a call system for those living in social housing units, and thus making it possible for them to call for assistance. Initially, the focus was on people with a physical disability, but later the scope was widened.
Today – and especially since the major transition in Flanders from a system of recognised and subsidised service providers to a financing system allocating personal budgets to the persons with disabilities themselves – Zewopa is a prototype of a social enterprise that tests the limits of the new regulations and leads the way in the innovation process that is unfolding in the Flemish region.

The objectives of the programme are to:

- get everyone involved and create win-win situations for all stakeholders;
- challenge different stakeholders from different domains to co-create win-win situations with maximal gain for persons with disabilities themselves;
- empower clients with disabilities as a very important condition for inclusion;
- transcend the classic work of day centres;
- promote volunteers to get involved, including supporting persons with disabilities to become volunteers;
- strengthen support for people with disabilities by realising multifunctional support centres; and
- implement a unique concept of solidarity between persons with disabilities by bundling individual budgets (such as personal financing by the Flemish Agency).

**CONTEXT**

The main aim of the programme is to realise and safeguard the inclusion of persons with disabilities living in social housing, regardless of their specific impairments, by offering a neighbourhood centre – an aim directly inspired by Article 19 of the UN Convention on the Rights of Persons with Disabilities.

Zewopa offers integrated assistance in all domains of life for people with all kinds of disabilities. Neighbourhood and community centres are the cornerstone of the support model, providing a mix of services and working in close collaboration with various sectors – in particular health, welfare, and culture.

**OUTCOME, IMPACT, AND EFFECTIVENESS**

Zewopa centres serve their communities in a wide variety of ways. For instance, the centre in Zwijndrecht has now been used for more than two years as a base for the organisation called ARKTOS, which is working with local youth from disadvantaged families. These youngsters help clients in maintaining their garden in exchange for the use of the centre. In Berchem, Kiel, and Zwijndrecht the programme organises morning meetings for single mothers. And in Kiel, the Silvertoppers, a group of volunteers with disabilities (living in Zewopa apartments), organise holidays for people who live in social housing as well as produce plays and sing in a choir.

**CONTACT**

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Diakoniewerk is an Austrian non-governmental organisation that runs approximately 150 institutions and develops numerous projects and offerings, addressing people with disabilities, elderly people, refugees, as well as health or education related services in general. Further, Diakoniewerk addresses the issue of affordable and assisted living for elderly people by conceptualising cross-generation housing models that already have been put in place in different regions in Austria (rural areas as well as city centres). Diakoniewerk is a strong partner among politicians, local authorities, architects, and property developers for conceptualising the social aspects of such projects and for supporting the concept in its operational process of implementing and developing a supporting structure and network among tenants and neighbours.

Diakoniewerk’s LeNa-project (LeNa is the abbreviation of the German expression “Lebendige Nachbarschaft,” or living neighbourhood) is a concept of intergenerational neighbourhood-branding and inclusive social housing. The concept aims to support all tenants to live a self-determined life in their own homes as long as possible.
INNOVATIVE ASPECTS

Many housing projects solely address the need for barrier-free (sheltered) living (or design4all), incorporating paid support and offered assistance to its users. However, these projects do not meet the need for a strong, efficient, and sustainable community. The LeNa concept, which offers a unique support structure for people with disabilities, the elderly, and other people lacking support, is taking the meaning of ‘inclusion’ to another level.

Furthermore, architects, residential property developers, politicians, and even NGOs lack experience in such concepts, and LeNa provides them with the opportunity to learn and develop new structures and processes to meet the challenges of our time. A particularly unique aspect of the programme is the incorporation of the concept’s spirit in the architectural planning, which takes into account ways that make communication and community-building easier and more likely. For example, the laundry area includes a children’s play area, and there is a joint garage for bike repair and crafts.

Plans also call for those joint rooms and spaces to be enhanced by the engagement of a social coordinator, who will motivate and support neighbours in building up a community. Over time, the community should be transformed more and more towards self-planning and self-organisation by the tenants and neighbours.

CONTEXT

Demographic and sociocultural trends show a growing rise in the demand for housing and care services for elderly people. Furthermore, the need for new concepts of inclusion has led to new forms of housing for people with disabilities. People grow older, but at the same time they want to stay active and to live self-determined lives as long as possible. Once they require some supportive assistance in their daily routine, however, their families often do not have the time to support them or perhaps do not live close enough to be of assistance. Thus, many elderly people have to move to a nursing home even though they do not require medical attention.

Young families also often lack support. Parents of little children or single parents may require flexible childcare for just a few hours. A strong and supportive community of neighbours would improve the situation for everyone – the elderly, young parents, and people with disabilities.
KEY FEATURES

The programme offers people with disabilities the opportunity to live in a more inclusive, autonomous, and independent way. As a result, some of the current tenants specifically moved into the LeNa house (from sheltered housing) in order to live more self-determined lives.

When moving in, the LeNa actors organised a flea market where they exchanged goods for their newly obtained apartment. Later, they established a telephone chain to be used if in need. To improve and enliven their free time, they organised a tarot class, since many people were interested in learning this pastime. They also organised a Punsch get-together as well as other social events in order to get to know their neighbours better.

Since the project was accompanied by one year of scientific evaluation, the tenants were also part of this evaluation and participated in a workshop on how to shape their future (lively!) neighbourhood.

OUTCOME, IMPACT, AND EFFECTIVENESS

Diakoniewerk is currently involved in five other similar residential projects in larger urban areas (Salzburg and Vienna) with more than 650 apartments, directly affecting more than 1,800 people. The wider neighbourhoods of these housing areas will be influenced as well.

In February 2018, the LeNa project was the subject of an evaluation conducted by the University of Applied Sciences St. Pölten (FH St. Pölten). The aim of this research was:

- to learn about the value of the LeNa concept for neighbours as well as project stakeholders;
- to learn more about the coordinating needs of such projects; and
- to get insights about improved communication mechanisms for further development of the concept.

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Developing a ‘Preparation for Independent Living Centres’ Programme

Romania / Pro ACT Suport

IN BRIEF

Pro ACT Suport is a non-governmental organisation accredited by the Romanian authorities (Ministry of Labour) as a social services provider for people with psychosocial and mental disabilities. The organisation was founded in 2011 and is mostly financed through public procurement service contracts and through a grant provided by the Mental Health Initiative–Open Society Foundation.

The organisation’s services promote the deinstitutionalisation of people with intellectual disabilities while integrating them into common houses in the community. Pro ACT Suport employs a personalised approach to help people to recover and develop their potential for independent living.

INNOVATIVE ASPECTS

Pro ACT Suport has developed “Preparation for Independent Living Centres” to promote the social inclusion of people with psychosocial and intellectual disabilities. Its clients have been deinstitutionalised from large public and impersonal residential institutions, where many have lived their entire lives.

Despite the clients’ intellectual disabilities, each has the potential to progress and become independent or as close to independent as possible. The organisation’s main goal is to support individuals to recover and develop the skills and capacities they never had the chance to acquire. Using a personalised approach, Pro ACT integrates these individuals into common
houses in the community. This is the first step of a long process that aims to build their lives and help them become neighbours, friends, customers, and employees, thus changing their status from socially assisted persons to contributors to society.

**CONTEXT**

Once an individual is moved into Pro ACT’s care, his or her skills are evaluated and a personalised programme for recovery and development is implemented by professionals (social workers, psychologists, vocational counsellors, and psychotherapists) with the beneficiary’s participation, with the goal of independent living.

Examples of daily activities include, but are not limited to: preparing meals, personal hygiene, managing medications, completing household chores, coordinating transportation, continuing or enrolling in education, administering personal finances, and getting a job. For most beneficiaries, the organisation has succeeded in connecting them with parents or other relatives. Family is a strong Pro ACT value, even if the person-centred approach means that the person does not necessarily live with his or her family.

**OUTCOME, IMPACT, AND EFFECTIVENESS**

Currently the organisation runs 11 “Preparation for Independent Living Centres,” four located in houses in rural areas close to Bucharest and seven located in rented apartments in Bucharest city. The facilities have different numbers of clients, ranging from one to six, depending on their level of acquired independent life skills. Permanent or partial support as well as counselling, vocational skills, and rehabilitation services are provided by a team of professionals.

In total, there are currently 44 clients ranging in age from 18 to 55 and with varying levels of intellectual and mental health impairments. Since the first centre opened, 11 beneficiaries have left the programme’s services, having become prepared for a totally independent life, including having a job, getting married, or having a partner and a rental place of their own.

The organisation’s staff structure is comprised of 40 permanent full-time employees, including caregivers, social workers, psychologists, and vocational counsellors. Pro ACT also maintains service contracts with other professionals, such as psychotherapists, lawyers, and neuropsychiatrists. The average annual budget is $800,000.

At the national level, Pro ACT provides technical assistance to central and local public authorities as well as to other non-governmental organisations. It also participates in the formulation of special legislation regulating the field of disability. Pro ACT services have been recognised and presented on television in a variety of shows about human rights, deinstitutionalisation, community-based services, case management for people with disabilities, and good practices in the community.

**CONTACT**

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Fondazione Cariplo is a grant-making foundation with its origins in banking and based in Milan. Fondazione Housing Sociale (FHS) was established by Fondazione Cariplo with the participation and support of the Lombardy Region and ANCI Lombardy (the regional branch of the Italian Association of Municipalities) to develop its programmes on social housing.

INNOVATIVE ASPECTS

The social housing solutions that FHS provides do not limit themselves to the mere provision of affordable housing. Rather, they pay special attention to the integration of people at risk of
social exclusion into a true community. This aim is pursued from the very design of the houses and places for socialisation, and is integrated with the provision of social services linking the units to the wider neighbourhood. Moreover, the units are designed with special care for the environment and for sustainable lifestyles.

The programme began at the local level, launching after the first call for investment, which raised €85 million with the involvement of nine high-profile private and public investors. This experience was later scaled-up to the national level, leveraging €3 billion. At present, FHS operates its residential projects countrywide.

CONTEXT

Fondazione Housing Sociale addresses the problem of access to housing as well as homelessness, and targets vulnerable people at risk of social exclusion, including people with disabilities, the unemployed, disadvantaged youth/students, and the elderly.

KEY FEATURES

The organisation offers affordable housing units to vulnerable people at risk of poverty. Its work encompasses all phases of the project, starting from financial and urban planning to design, construction, and integration within the existing housing context.

FHS is financed through the creation of private ethical investment funds, steered by Fondazione Cariplo. When its activity was scaled-up to the national level an Integrated Funds System was created, first introduced by the National Housing Plan that formally started private social housing in Italy.

OUTCOME, IMPACT, AND EFFECTIVENESS

As of September 2018, there are 30 approved local funds spread throughout Italy with nine local fund managers. Some 20,000 “alloggi sociali” (social homes) will be created by 2020 in addition to the provision of neighbourhood services. According to a 2018 Carbon Disclosure Project report, currently 190 projects are being implemented across Italy, including 13,650 homes and 4,790 beds for student housing.

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Empowering Individuals with Disabilities to Contribute in Their Communities

Finland / Finnish Association on Intellectual and Developmental Disabilities

IN BRIEF

The Finnish Association on Intellectual and Developmental Disabilities (FAIDD) works with a number of institutions, such as:

- SAVAS, a non-governmental organisation offering housing and support for people with disabilities living in Savo, Finland, financed by service revenues and grants;

- South Karelia Social and Health Care District, a regional administrative body offering public health and social services for all persons living in the area; and

- Setlementtiasunnot (the Finnish Federation of Settlement Houses), a non-governmental organisation offering social housing for persons with and without disabilities.

FAIDD’s project has three employees and works with around 60 individuals with disabilities as well as their families, support workers, and municipalities. The programme is implemented in five municipalities, varying in size and service structure.

INNOVATIVE ASPECTS

The opportunity for people with intellectual disabilities to participate in mainstream community activities is often very narrow, as most activities are organised for their own special groups. FAIDD trains its staff to support people with disabilities to become more autonomous and to contribute to and collaborate with other members of their communities, rather than treat them as dependent people. It also trains people with mental health problems to adopt a more active role in their own lives.
CONTEXT

Isolation, loneliness, and the lack of social support are seen as obstacles to persons with intellectual disabilities living in supported housing, as opposed to a group home. This reduces the ability of parents and support workers who are attempting to provide assistance to people in supported living situations.

OUTCOME, IMPACT, AND EFFECTIVENESS

The FAIDD programme builds on ways to help and support people with disabilities to find their own personal role as a community member, which in turn can benefit supported living by reducing the fear of isolation, loneliness, and lack of social support.

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Helping Young Homeless Adults Work Towards Independence, Education, and Employment

Denmark/Home for All Alliance

IN BRIEF

The Home for All Alliance is a non-governmental organisation representing 14 partners from the public and private sectors and civil society, including municipalities, foundations, social housing NGOs, businesses, and educational institutions. It works with over 50 organisations focusing on social innovation projects for ending homelessness among young adults. The organisation helps to provide permanent housing, strengthen social networks, and offer solid and integrated social support for young adults.

INNOVATIVE ASPECTS

The Home for All Alliance is a pilot programme combining housing with social support for homeless young adults, delivered by an alliance of partners representing municipalities, foundations, and NGOs.

The Alliance is managed by a board of directors representing seven of the leading partners. The daily business is run by a backbone secretariat of three people.

The programme brings together partners from different sectors, thereby providing a new and more integrated solution to the problem of persistent homelessness. Homeless young adults receive case management from the municipality and permanent housing from private or social housing organisations, as well as volunteer support from civil society and NGOs.

The programme has also initiated an exploratory process with the student housing community, helping to work toward a more open and supportive social community for the benefit of all student housing residents.

The Mayor of Social Affairs in Copenhagen and Aarhus and the Confederation of Municipalities are members of the Alliance, and the implementing body of the Ministry of Social Affairs is a member at the Chief Executive Officer level. The Home for All Alliance is joining the implementing body of the government programme to end homelessness in Denmark.
CONTEXT

The alliance works to end homelessness, a growing problem in Danish cities, targeting young adults between the ages of 18 and 29. This target group lacks both housing and proper social support, and the vast majority belonging to the “Not in Education, Employment, or Training” (NEET) group have mental impairments and abuse alcohol and/or drugs.

KEY FEATURES

Homeless young adults require permanent and affordable housing, which in itself is challenging in the current Danish housing market. But housing alone is insufficient. Therefore, the Home for All Alliance aims to provide stable and permanent housing for homeless young adults combined with access to healthy supportive student networks.

The goal is a new type of social housing that emphasises community, such as through student housing. The idea is to create a community that makes the fellow student residents part of the social support network for their homeless young adult neighbours. The Home for All Alliance seeks to provide homeless young adults solid and integrated social support and thus allow individuals to work towards their independence, education, and employment.

OUTCOME, IMPACT, AND EFFECTIVENESS

Home for All Alliance is a pilot programme working with a complex target group and breaking new ground of collaboration across sectors. To date, 20 young adults have been housed through the programme, even though it is still in its testing phase. The programme is based on the principle of ‘Housing First,’ which has proven successful internationally and in Denmark.

The goal of the programme is to create a model solution that can be scaled-up to all relevant cities in Denmark. The programme started in one unit of student housing and has since moved to a second. Two more locations are in the pipeline, and the overall target is to provide 2,000 people with homes.

The main sources of financing are municipal funding and foundation grants. The Home for All Alliance is currently working with the Ministry of Finance and several foundations and investors towards creating social investment opportunities within the field of homeless young adults.

CONTACT

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Organising - And Examining - New Types Of Assisted Housing In Russia

Russia/Federal State Budgetary Institution

IN BRIEF

The Federal State Budgetary Institution, a governmental body, is tasked with the following activities:

- oversight of the development, implementation, and control of methodology for the program concerning the selection of adapted housing for people with disabilities;
- creation of better living conditions;
- selection of people with disabilities;
- training of skills in self-service;
- social, medical, and educational services delivery; and
- depending on the demand, the organisation of individuals’ everyday life and employment.

In the program, people with disabilities have almost an independent lifestyle. They work to the best of their ability and pay their own housing and communal expenses.

INNOVATIVE ASPECTS

The program substitutes psycho-neurological residential care homes with the technology of assisted living for people with disabilities. The aim of the technology is to create conditions for a normal way of life for tenants with disabilities and their participation in society. The program offers people with mental disabilities lives outside of closed psycho-neurological residential care homes. Thanks to the technology of assisted living for people with disabilities, they can live under similar conditions as at home.

The houses from the programme are financed via regional funds, funds of public organisations, and personal donations.

The modern project is a three-story house with specialised construction, designed for accommodation of nineteen people in June 2017. It is funded by regional funds, funds from public organisations, and a joint-stock company.

OUTCOME, IMPACT, AND EFFECTIVENESS

The first program was organised in 2006 in St. Petersburg by creating social apartments. The apartments were designed to accommodate six young people with disabilities in mental development, retaining partial ability to self-service in domestic life.
In 2018, the “methodical centre of accompanied housing” was established to analyse the experience of the programme. The “methodical centre of accompanied housing” is financed by the state budget and grants. The program is also being spread to different regions of the Russian Federation. Implementation has already been completed in twenty-three regions. The proven effectiveness of the practice is shown by the fact that all project participants have decreased the demand for external assistance. Furthermore, the level of self-service skills has improved and domestic activities and communication have increased. The quality of life of persons with disabilities has also improved.

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Lebenshilfe Tirol is a non-profit organisation that spiritedly accompanies people with disabilities on their way to a fully accessible, self-determined, and fulfilling life, mostly financed by the regional government of Tyrol, an Austrian province.

INNOVATIVE ASPECTS

Lebenshilfe Tirol promotes and operates innovative, inclusive housing projects, which are at the heart of communal life, making equal participation in society possible. People with disabilities are supported while deciding how they want to live, where they want to live, and with whom they want to live. People with disabilities can lead a fulfilling life and have the possibility to create their own individual living space. Further, these apartments are situated in the very midst of the city of Tyrol, among housing for the non-disabled.
The project includes separate apartments for service providers, which represent the place of encounter and community space as well as the provider’s own personal refuge, and the clients are located in separate apartments at varying distances away. Depending on the wishes and requirements of the clients, this makes it possible to establish normality and independence. The apartments are adaptable living spaces and therefore can be adjusted according to the beneficiary’s demands and requirements. Every apartment is equipped with an emergency call system.

**CONTEXT**

Freedom of choice in the way of living and equal participation in societal and communal life are basic human needs and basic rights. Lebenshilfe Tirol unrestrictedly acknowledges this right, as stated in the United Nations Convention on the Rights of Persons with Disabilities. The organisation accompanies and supports people to enjoy a self-determined way of life and assists them in creating their individual living space.

**OUTCOME, IMPACT, AND EFFECTIVENESS**

According to Lebenshilfe Tirol, every person with a disability should live where those without a disability also live. Furthermore, beneficiaries should be able to be a neighbour; decide where and with whom they want to live; have the possibility to invite friends, colleagues, or neighbours into their home; decorate and furnish their own residence, enjoy privacy by sometimes simply closing the door, and call a place ‘home’.

The apartments in Hall, in the Innsbruck-Land District of Tyrol, were the first housing project of this sort. Other projects in Innsbruck and Fieberbrunn followed and more are expected.

A study by Management Centre Innsbruck students showed that clients especially appreciated having such common items as their own kitchen, their own set of keys, their own pets and Christmas trees – none of which was possible before.

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Promoting Social Inclusion of Individuals with Intellectual Disabilities Through Accessible Housing

Moldova/Keystone Human Services International, Keystone Moldova

IN BRIEF

Keystone Moldova, a non-governmental organisation, administers the Community for All Moldova programme, which promotes the social inclusion of persons with intellectual disabilities by employing a rights-based approach; social role valorisation; persons-centred planning; and a partnership of public authorities, NGOs, and people with disabilities.

INNOVATIVE ASPECTS

The programme promotes placing people with intellectual disabilities in typical houses within communities. The maximum number of people per house is six, and the maximum number of people per room is two. The program offers support services based on persons-centred planning principles, encouraging beneficiaries to be more independent and to become active and valued members of their communities.

The housing services are developed based on public-private partnerships. Keystone Moldova owns the properties and the public authority pays the operational costs. Keystone Moldova mentors the support staff to deliver quality assistance and monitors the public authority regarding the planning and implementation of the budget in line with quality standards.

CONTEXT

According to official data there are at least 182,000 people with disabilities in Moldova and based on current estimates one in ten of these people lives with an intellectual disability. About 2,000 people with intellectual disabilities are still isolated and continue to live in neuro-psychiatric residential institutions. Each year, nearly 100 people with intellectual disabilities are at high risk of institutionalisation. Currently, there are 2,355 children in residential institutions, 69 per cent of them with disabilities.

The main problems addressed through the Community for All Moldova programme include:

- the lack of social services for deinstitutionalisation and prevention of institutionalisation of persons with intellectual disabilities;
KEY FEATURES
The Community for All Moldova Program promotes social inclusion of persons with intellectual disabilities by employing a rights-based approach. Social role valorisation, person-centred planning, and partnerships of public authorities, NGOs, and people with disabilities are also taken into account. For the first time in Moldova, the programme has piloted housing services for deinstitutionalised persons, with the government approving the legal framework and ensuring the financial sustainability.

As a non-profit, non-governmental organisation, Keystone Moldova works to create opportunities where people can grow, exercise self-determination, and be participating and contributing members of society. Working in partnership with public authorities, the mission is to promote and develop opportunities in the form of consultant services, technical assistance, direct support service, best-practice training, and monetary and administrative support to ensure the quality of life of individuals living in difficult social situations – including persons with disabilities, children with special educational requirements, abused children and women, families living in poverty, and discriminated groups.

Keystone Moldova is contributing to the implementation of the national reforms on social inclusion of persons with disabilities and vulnerable people by running projects funded by the European Union, Soros Foundation–Moldova, Open Society Foundations, and Keystone Human Services International US. All services developed by Keystone Moldova are eventually assumed by public authorities, though Keystone maintains an advisory role to ensure the high quality of services.

OUTCOME, IMPACT, AND EFFECTIVENESS
About 100 people with intellectual disabilities who have lived their whole life in residential institutions are now living a meaningful life in their community. Further, 10 per cent of these have a job in the open labour market, 20 per cent are working occasionally, while another 20 per cent are active members of self-advocacy groups established at the community level.

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Providing Assistance with Housing Services for Individuals with Disabilities

Hungary / Equal Chances! Foundation

IN BRIEF

Equal Chances! Foundation (ECF) provides integrated housing support for persons with disabilities and their families. The idea to develop such a methodology and to build houses with 15 accessible flats was a response to a clear demand: How can families with an adult member with a disability or elderly parents with an adult child with a disability access a complex mix of services close to a rehabilitation centre offering employment opportunity, health care, a peer community, and social integration? There are some families who want to stay together, or for whom it is unthinkable to live separately from their disabled family member. The essence of the ECF programme is that there is a social centre nearby, everyone has his/her own residence, and everyone can live a safe and independent life.

INNOVATIVE ASPECTS

The ECF programme has three important innovations: the support can be for all family members; after a loss of parents the child can stay in the same flat under the same conditions in his/her own environment; and it provides safety and independence at the same time.

CONTEXT

Eleven years ago, the Equal Chances! Foundation established a so-called ‘Integrated House’ with the aim of giving people with disabilities the opportunity to live in their own home close to a rehabilitation centre, which can provide social services for all family members. There are also persons with disabilities who would like to live with their partner or with their elderly parents. Residents in an Integrated House can purchase from the ECF the specific services they need (for example, transport or meals) based on their individual requirements.

In Hungary the majority of families with a person with a disability are not in a financial situation that would allow them to buy or rent a separate home for their disabled family member. As an alternative to social service housing, in this system adults with disabilities can live more autonomously and, in an environment, where appropriate forms of professional help can be provided as required. In response to this need, the ECF would like to construct a new building of integrated housing or of rental apartments near its place of operation, which could social provide housing for people with disabilities.
KEY FEATURES
The ECF has been operating since 2000 and currently provides housing for 116 people with disabilities, including 38 people in so-called supportive housing.

Based on the requests of families with people with disabilities, ECF founded (through credit financing) a construction project 11 years ago, resulting in the building of Integrated House I. People with disabilities can live there on their own, and families of people with disabilities have purchased housing units for themselves. The building is located near the ECF headquarters, so residents can request and purchase services from the ECF to meet their individual needs.

Working on the basis of normalisation and inclusion, and following the guiding principles of freedom, autonomy, human rights, and security, ECF focuses on the complex rehabilitation of persons with disabilities and helps with their integration into society. At present the foundation offers permanent housing for 117 people and day care for 50 people.

The ECF’s professional staff currently consists of 66 people with diverse educational backgrounds and specialisations, including social workers, specially trained teachers, physical therapists, and caregivers.

OUTCOME, IMPACT, AND EFFECTIVENESS

The Integrated House I project can constantly grow and renew. Currently, a Tenants House for persons with disabilities is under consideration. There is great interest in these opportunities both in Hungary and abroad. Compared to the basic social service housing system, the Integrated House and the Tenants House offer individualised solutions for families, for persons with disabilities, and (broadly defined) for the whole society.

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Providing Supported Housing And Employment Opportunities To Persons With Intellectual Disabilities

Czech Republic / Portus Praha

IN BRIEF

Portus Praha is a non-governmental organisation that provides sheltered and supported housing as well as employment opportunities to persons with intellectual disabilities. It is financed from a number of sources, including state and regional subsidies, contributions from service users, and proceeds from fundraising.

CONTEXT

In the Czech Republic, institutional care is still predominant and remains relatively resistant to change. Portus Praha has been making efforts to raise awareness on accessible community-based services though such channels as art festivals, the media, and networking with other stakeholders, including private companies.
INNOVATIVE ASPECTS

The Portus Praha programme is designed to support service users to enhance their autonomy and competences to live independently. Drawing on person-centred principles, the programme is exceptional because it provides opportunities for the staff as well as the service users to regularly question and reflect on the ongoing practices. The overall purpose is to prevent stagnation or even reversal from the organisation’s core pillars of supporting the human rights and autonomy of its service users. Outputs of such formal and informal reflections are closely considered and, where appropriate, the service is modified accordingly.

OUTCOME, IMPACT, AND EFFECTIVENESS

Most of the beneficiaries have been transferred from large institutions with limited or non-existent social networks. Feedback from staff members as well as from service users suggests that the programme has had a strong impact on the service users’ community participation, expanding their and the organisation’s circles of friends.

A number of Czech and European stakeholders have had opportunities to learn from and scale-up this programme, including other non-governmental organisations and service providers as well as local and regional governments.

In 2016, the organisation was awarded as an exemplary innovative service provider by Floccus, Nadace České Spořitelny, a bank. Its primary sources of financing are the Czech state, regional governments, and other grants.

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Supporting Individuals with Intellectual Disabilities and Their Communities

Bosnia and Herzegovina / Sumero

IN BRIEF

Sumero, a non-governmental organisation, is developing an innovative and unique way of assisting people with intellectual disabilities who were living in closed institutions. Through its Life in Local Community programme, founded in 2011, individuals have the right to make personal choices, to advocate for themselves, and to participate in all areas of life regardless of their disability. People with intellectual disabilities taking part in the programme are empowered to learn about their rights and to advocate for them and are encouraged to fight for solutions regarding their standing in life, in society, and in their workplace.

Sumero’s costs are covered through project fees and the government (70 per cent) and by international organisations such as the United States Agency for International Development, the Open Society Foundation, the Czech Development Agency, and Raiffeisen Bank (30 per cent).

INNOVATIVE ASPECTS

People with disabilities in Bosnia and Herzegovina (BiH) are the most marginalised group of citizens, with an estimated 2,000 adults and children living in state-run institutions under far from ideal conditions. People with intellectual disabilities are themselves involved in the work of the organisation through twice-monthly meetings and participation in self-advocate groups. Sumero’s support service users perform certain types of work depending on their abilities, although the popular understanding in BiH is still that persons with disabilities cannot work.

In partnership with ProReha, a non-governmental organisation for professional training of hard-to-employ categories in Bosnia and Herzegovina, Sumero implements the capacity-building of supported persons through education, professional training, prequalification, and employment programmes – all with the aim of improving their lives and status in society.

CONTEXT

People with intellectual disabilities often live in closed institutions and do not have the ability to live in their local communities without support. In BiH the right of these individuals is not sufficiently respected. Sumero seeks to bring excluded people back to their local communities, thus allowing them to lead normal and fulfilling lives. Through partnerships with local communities, Sumero has made significant progress in its housing programme.
OUTCOME, IMPACT, AND EFFECTIVENESS

After seven years of implementation, Sumero now has twenty-five housing communities in Bosnia and Herzegovina, with 85 people with intellectual disabilities living in these houses. Thirty-five people work with these residents as assistants, coordinators, psychologists, and social workers. The programme is expanding to other regions of the country and is now actively functioning in five regions. Recently, there has been a dynamic increase in the number of users and housing communities in addition to a territorial expansion of cooperation with centres for social work.

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Supporting Individuals with Mental Health Issues to Develop the Personal and Social Skills for Independent Living

Greece/Society of Social Psychiatry and Mental Health

IN BRIEF

The Protected Apartments project of the Society of Social Psychiatry and Mental Health (EKP&PSY) seeks to promote independent community life, equal participation, and active citizenship, as well as occupational (re)integration into the community.

Beneficiaries living in protected apartments are people with mental health disabilities who cannot live independently alone or with family due to unfavourable health, social, residential, or family conditions.

The programme of protected apartments is either the next step of the rehabilitation and inclusion process after residential housing or the transitional solution for people with disabilities who are not yet able to live completely independently.

INNOVATIVE ASPECTS

The programme seeks to encourage the development of personal and social skills for independent living, especially regarding the rehabilitation of persons with disabilities who have suffered many years of hospitalisation. EKP&PSY offers special training to encourage everyday life skills, such as interpersonal skills, autonomy skills, and social skills.

The role of the therapeutic team is to support people with mental health disabilities who live in protected apartments in a discrete way. The therapists help the programme members to handle issues relating to their future, their employment rehabilitation, as well as their relations with the opposite sex.

EKP&PSY tries to coordinate efforts in different sectors and from varying sources in order to achieve better results. It seeks to involve civil society, authorities, and the services of the community and business sector in order to support equal participation of people with mental disabilities and to help them regain their right to social and professional life.

EKP&PSY trains the staff team to assist people with mental disabilities to be more autonomous. It also trains people with mental health disabilities to adopt a more active role, rather than to be passive.

Figure 12 People handing out flyers and informing the public
CONTEXT

EKP&PSY is a non-profit scientific organisation founded in 1986 by the child psychiatrist and psychoanalyst Professor Panayiotis Sakellaropoulos. The organisation has made a significant contribution to Greece's psychiatric reform based on the principles of social psychiatry by offering high-quality psychiatric and psychological support services in order to ensure the population's mental health and well-being.

The organisation operates within the ideological framework of social psychiatry, and all its prevention and therapeutic services are offered within the community. Particular emphasis is placed on the provision of out-of-hospital treatment and services in order to avoid hospitalisation and institutionalisation. The organisation is funded by the Ministry of Health, and all services are provided for free.

KEY FEATURES

People living in protected apartments are people with mental health disabilities who are not able to live independently alone or with family due to unfavourable health, social, residential, or family conditions.

The programme of Protected Apartments is either the next step of the rehabilitation and inclusion process after residential housing or the transitional solution for persons with disabilities who are not yet able to live completely independently.

The aim is an increasingly upgrade the ability of people with disabilities to live under “natural” conditions and to benefit from the resources of the community (services, goods, etc.) as well as to have a more ordinary life with regard to occupation/job, entertainment activities, responsibilities, the ability to recognise and claim rights, and so on.

The program seeks to help develop personal and social skills for independent living. The training focuses on a person-oriented approach and is part of a comprehensive personal therapeutic programme tailored to the demands, skills, and requirements of each person. In addition, the organisation offers similar team programmes facilitating the (re)integration of excluded people into community life.

OUTCOME, IMPACT, AND EFFECTIVENESS

In 2017, EKP&PSY conducted an internal evaluation regarding the satisfaction rate of 171 people with mental health disabilities living in hostels (6 hostels with a capacity of 15 people each) and protected apartments (22 apartments with 75 beneficiaries in total) in four regions: Attica, Evros, Phocis, and Phthiotis.

The average satisfaction rate for the housing services in the four regions was 4.035/5. Three indicators were used: satisfaction regarding infrastructure, everyday functions, and therapeutic aspects.

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Supporting People with Disabilities Live Together in a House and Community

Austria/Jugend am Werk Steiermark GmbH

IN BRIEF

Jugend am Werk Steiermark is a non-governmental organisation offering support for people with disabilities, children and young people, and families as well as refugees. It also provides assistance to people looking for education, training, and work.

The organisation works in 80 facilities throughout the province of Styria, Austria, and most of the services for people with disabilities are financed by the Styria regional government.

CONTEXT

Most traditional housing for people with intellectual disabilities and a high demand for support is organised in group homes. Usually, the institution decides who is living where and with whom.

KEY FEATURES

As part of the deinstitutionalisation programme, people with disabilities – including those requiring considerable support – live in their own apartment, but in a house with families and other people without disabilities in the general community.

OUTCOME, IMPACT, AND EFFECTIVENESS

Eleven people with disabilities in Knittelfeld, Styria, decided (in an accompanied and moderated process) on a new living situation; and the Jugend am Werk Steiermark programme, which has ten employees in Knittelfeld, used person-centred planning methods to facilitate the relocation. The eleven users now have very good contacts with their neighbors, and such a “normal” context (instead of a group-home) has improved the quality of their lives.

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Supporting Quality of Life Through Co-production and Collaboration with Staff and Families

Finland / Service Foundation for People with an Intellectual Disability

IN BRIEF

The Service Foundation for People with an Intellectual Disability (KVPS) is a national service provider and developer with roots in parent-led governance. The foundation supports people with intellectual disabilities and other special requirements, as well as their families. The foundation is committed to developing new innovations that can make a difference in the lives of people with an intellectual disability and their families, and by doing so to improve the quality of life for all concerned. It engages in models of service provision that are person-centred, practical, and of high-quality standards.

KVPS is also the founder and owner organisation of the KVPS Tukena Ltd. Tukena, which provides and develops housing and support services all over Finland.

INNOVATIVE ASPECTS

The “CO for GOOD” programme is based on the creation of trusting relationships through respectful interaction, and on the improvement of skills and competencies of staff in supporting the relationships and utilising the expertise of their families. The core of the programme is a person-centred approach focusing on the history, values, lifestyle, personality, and hopes/dreams of the service user and his or her family.
Family members play a key role in every person’s life. Disability services should support the relationships and social inclusion of persons with disabilities, and it should be one of the core tasks of the front-line staff. They should have the competence to enable family leadership and to respect families’ expertise as well as support the self-determination and independence of the service users. According to KVSP, this is the only way disability services can support a good life, and not just provide good services.

Family members often have many roles in the lives of persons with disabilities: they support their decisions, they are advocates, legal guardians, caregivers, case managers, supporters, and so on. For family members it is crucial to be able to trust and have close cooperation with the service providers. Without such trust, it is very difficult for them to support the self-determination and independence of the disabled person together with the staff.

Front-line service staff – for example, in housing services – are usually very committed to their work, but the official education system does not offer them skills and competencies in developing and supporting good relations with the family. Family members, services providers, and front-line staff need training and tools on how to create helpful cooperation. They require platforms for shared discussion and shared vision.

To date, feedback from the programme includes:

- increased service users' well-being and customer satisfaction (based on yearly questionnaires, feedback from service users, and the focus on impacts);
- increased trust and involvement of family members (based on annual questionnaires/feedback, and feedback on everyday life of the family members); and
- increased well-being and competencies of staff (via well-being indicators and annual development discussions).

The programme has also affected the municipalities responsible for organising these services. Now, municipalities are able to trust that service providers and resources are not used in solving controversial issues, but in developing individual support and services.

Between 2010 and 2017, the “CO for GOOD” programme completed 120 training days for staff and 90 days for family members, reaching some 2,000 staff members and 1,800 family members.

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Supporting the Improvement of Quality of Life for Individuals with Autism

Croatia / Autism Association Zagreb

IN BRIEF

The mission of the Autism Association Zagreb (AAZ), a non-governmental organisation, is to protect and promote the rights and improve the quality of life of persons with autism living in the city of Zagreb and in Zagrebacka county, Croatia. The organisation helps provide community-based social services, with an emphasis on organised housing and support for adults with autism in their local community. The AAZ is a humanitarian and non-profit organisation established in 1997 by parents of persons with autism spectrum disorders.

INNOVATIVE ASPECTS

In Croatia only, 2 percent of persons with autism spectrum disorders are covered by some form of educational or rehabilitation service, and the only support provided is by a state institution offering therapy and residential care. A small number of adults live in this institution under rather difficult conditions, unable to make choices of their own in any areas of life.

To address this situation, this project aims to broaden the network and model of supported housing in the city of Zagreb and in Zagrebacka county. Autism Association Zagreb has already secured official approval from the Ministry of Social Politics to provide supported housing services in the community for 20 adults with autism spectrum disorders.

CONTEXT

AAZ has developed a community-based supported living programme through which persons with autism spectrum disorders can actively participate in the life of the community and realise their human rights. As part of the programme, ten adults currently live independently and have comprehensive 24-hour support for daily life, social integration, work, and leisure. AAZ has also helped to provide evidence for setting-up and broadening the network of community social services for adults with autism spectrum disorders.

The AAZ programme can be readily replicated and sustained. The organisation has made a major contribution to unburdening family members of persons with autism spectrum disorders and has also raised public awareness on the issues in Croatia.
KEY FEATURES

The goal of the project is to promote social inclusion of persons with autism spectrum disorders by protecting and promoting their rights and improving their quality of life. The project’s specific objectives are:

- to promote the social inclusion of persons with autism spectrum disorders in Croatian society;
- to strengthen the capacity of AAZ to deliver social services for persons with autism spectrum disorders; and
- to assist ten adults with autism spectrum disorders in direct danger of institutionalisation to join the programme of organised community-based living.

Autism Association Zagreb is the only non-governmental organisation in Croatia that provides non-institutional supported housing services for adults with autism spectrum disorders designed to provide a support network in the local community. AAZ collaborates with the relevant local and state bodies, produces promotional materials, and works with the media to raise public awareness. The organisation also cooperates and exchanges information with affiliated non-governmental organisations, such as the Association for Promotion of Inclusion, in order to combat social exclusion.

OUTCOME, IMPACT, AND EFFECTIVENESS

AAZ has already developed and, to a great extent, implemented a project of establishing two supported housing service facilities in one city and one village in Croatia. It has also developed an individualised support programme to meet each person’s level of skills, experience, and general functioning.

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Training Caregivers, Families, and Persons with disabilities to Help Smooth Transitions while Moving

Finland / Service Foundation for People with an Intellectual Disability

IN BRIEF

Service Foundation for People with an Intellectual Disability (KVPS) is a national service provider and developer, with roots in parent-led governance. The foundation supports people with an intellectual disability and others with special needs as well as their families, and is committed to developing innovations that can improve the quality of life for all those concerned. The foundation engages in models of service provision that are person-centred, practical, and of high standards. KVPS is also the founder and owner organisation of the KVPS Tukena Ltd., which provides and develops housing and support services all over Finland.

KVPS’s Training for Moving programme is designed to provide support to people with special requirements who are about to move from their childhood home to independent or supported housing, as well as those moving from institutional to community-based services.

INNOVATIVE ASPECTS

The programme strives to support persons moving from their childhood homes or from an institution as well as family members and staff. Since 1991, the organisation has assisted 48 Training for Moving processes, lasting from four months to four years. In each process approximately 15 individuals plus two family members are involved. Specifically, ten staff members oversee each process, which entails about six group or individual meetings. As a result, people with special requirements have been empowered to share their thoughts and

Figure 15 Movers getting to know their new home through floor plan
make plans and decisions for themselves. They have made new friends, strengthened their social networks, and found a place in their community.

CONTEXT

People with disabilities and their families have the same hopes and fears as any family. The difference is in the higher level of individualisation involved throughout the transition phases of life. Any transition process must be carefully planned, addressing both practical and emotional aspects. A successful transition requires cooperation between those with disabilities and their family members as well other support network (social workers, housing services staff, personal assistants, and so on.)

A transition process should focus on changes in relationships, in daily activities, and in the environment from the perspective of the transitioning individual. A significant life change can involve, for example, experiencing strange places or strange sounds and scents, performing daily routines in a new way, meeting new people, or finding a shared language.

OUTCOME, IMPACT, AND EFFECTIVENESS

The Training for Moving process is conducted together with the person moving out, his or her confidant or family, and the involved employees. The first step is to identify the current life situation and future plans of the individual. This is a way of conceptualising a person’s life story, resources, support requirements, and wishes in order to help the individual moving to a new home.

During the preparation phase KVPS provides information on the new home and arranges regular peer support meetings until the actual move, as well as visits to the new home. In this way, employees at the new location meet the newcomer in advance. The settling in process is facilitated by meetings within the first year that focus on such topics as individualised life planning, active support, and connecting with the environment. A positive attitude from family members is also a major support in adapting to these new life changes.

KVPS provides education on Training for Moving methods and tools through employee training, seminars, workshops, and peer groups; and the programme activities have been embraced by Finnish municipalities and service providers.

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Using ‘Person-Centred’ Planning to Support Deinstitutionalisation

Croatia/Centre for Rehabilitation Zagreb

IN BRIEF

Supported living housing is a social service that provides support to one or more persons with intellectual disabilities at home and/or in the community by providing them their basic needs and also the ability to actively participate in social, vocational, cultural, educational, and recreational activities.

Established in 2013, the Centre for Rehabilitation Zagreb provides social services in accordance with the principles of person-centred planning and active support.

INNOVATIVE ASPECTS

The Centre for Rehabilitation Zagreb works to deinstitutionalise people with intellectual disabilities and to engage them in society. The organisation uses tools that help it understand what its beneficiaries want from their life and what kind of support they require to achieve their everyday goals.

Use of these tools – particularly person-centred planning, active support, and its Support Intensity Scale – facilitates the organisation’s evaluation of the entire supported living process.

Person-centred planning helps people with intellectual disabilities in planning their future. The beneficiary chooses who else should be a part of his or her life, such as family members and people who could assist in the realisation of the person’s goals.

The Centre for Rehabilitation Zagreb uses three forms of person-centred planning: Making Action Plans, Planning Alternative Tomorrows with Hope, and Essential Lifestyle Planning. At the end of the process, an action plan is drawn up and the organisation evaluates it through documentation and support groups, which meet every few months for every beneficiary.
Active support is the type of support that is “just enough” for the beneficiary to successfully engage in meaningful activities and relationships and to live mainly on his or her own.

Finally, the organisation’s unique Support Intensity Scale measures the degree of assistance that an individual requires; it is not a measure of ability of the beneficiaries. The scale includes measuring the capacity of beneficiaries in everyday activities at home, in the community, in learning new things, in working and having a job, in health and safety activities, as well as in social activities and self-advocacy.

CONTEXT

The Centre for Rehabilitation Zagreb focuses on: (1) replacing the institutional care of the past with supported housing; (2) involving people with intellectual disabilities in the community; and (3) encouraging the creation of lasting interpersonal relationships.

This philosophy enhances the self-determination of residents and encourages personal autonomy as well as an independent lifestyle. Furthermore, it facilitates participation in activities of everyday life and contributes to the whole community.

OUTCOME, IMPACT, AND EFFECTIVENESS

The programme started in 2013 with 45 beneficiaries and 44 employees, and today it has grown to include 90 beneficiaries and almost 97 employees.

In terms of economic viability, over the long term supported housing is more cost effective than the institutional form of accommodation. Moreover, by using the Support Intensity Scale to take two measurements over six months, the organisation has found that for some beneficiaries a reduced level of support is required thanks to the continued use of the organisation’s tools and principles.

Supported housing through person-centred planning and active support has been implemented in inclusive workshops, which have demonstrated the necessity to engage beneficiaries in everyday meaningful activities. These workshops employ people with intellectual disabilities, creating an inclusive and supportive environment. The instructors adapt to the beneficiaries needs, optimising their potential, independence, self-management, self-determination, and person-oriented planning. The goal and vision of the workshops is to create unique products that can be sold on the open market, to increase the sustainability of the workshops, and to create added value by contributing to the wider community.

In Zagreb there are not many adults with intellectual disabilities who are gainfully employed. Beneficiaries have a strong work ethic and a genuine desire to be productive and contributing employees.

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Other inspiring practices

- **Researching Developing Living Spaces Accessible to Everyone**

France/CRIDEV (Centre de Recherche pour l'Inclusion des Différences dans les Espaces de Vie/Research Centre for Inclusion of Differences in Living Spaces)

CRIDEV, Centre de Recherche pour l'Inclusion des Différences dans les Espaces de Vie, is a non-profit association recognised as a research centre and studies office focused on inclusive building design. In order to make spaces accessible and comfortable for anyone, whatever a person's particularities (physical, intellectual, cultural, social, or age-related), CRIDEV is developing a users group. The aim of the group is to complete an inventory and description of the uses and the specific requirements of persons with difficulties or disabilities, including the quality of individual living spaces and specific equipment, the compiling of supportive services for these individuals, and the types of compensations that can be instituted to minimise the loss of autonomy.

- **Empowering Vision-Impaired People to Travel Spontaneously and Independently**

Oslo, Norway and Barcelona, Spain/Oslo Metropolitan University and Wayfindr

Wayfindr is a non-profit social enterprise aiming at empowering vision-impaired people to travel spontaneously and independently using accessible indoor audio navigation underpinned by the use of an Open Standard adopted by the International Telecommunications Union. The Standard allows building owners and technology providers to develop indoor audio navigation systems that are accessible to people who are blind or vision impaired. Wayfindr has tested audio navigation systems across Europe and beyond with great success.
- **Helping Standardise Assistive Technology Services at the Planning, Provision, and Clinical Levels**

**United Kingdom/CECOPS CIC**

CECOPS CIC (www.cecops.org.uk) helps to standardise assistive technology services at the planning, provision, and clinical level across all sectors, driving quality improvements and improving service user outcomes. The organisation is the only one addressing all assistive technology services. It also provides accreditation of services and has developed tools to help assess organisational readiness to drive continuous improvement.

- **Piloting A Comprehensive Rating System to Place and Design Accessible Housing**

**Germany/Eukoba**

The organisation's BPASS® is an assessment and analysis system that determines the current state of accessibility of an object (building or open space), evaluates the data determined for user groups, and displays the state of accessibility, all summarised in a scale. “A” stands for 100 percent accessibility and G for zero percent accessibility. Each project is subjected to an intensive environmental analysis of the infrastructure. This prevents social housing from being created in the wrong place or the social housing project being a barrier-free island - that is, surrounded by barriers.

- **Managing a Cooperative Housing Development to Support Comprehensive Wellbeing**

**Italy/La Casa**

The objective of the Cooperative La Casa will be to promote a Community Laboratory encouraging collaborative living. La Casa will draw on participatory models that can also be managed by means of an online support system available to users. The needs of citizen-participants will be met with the provision of adequate and efficient services to support innovative forms and virtuous of welfare. The Cooperative deals with the construction of housing for low-income families and the management of property, facilities, and community services.
• **Trying to Find the Best “Social Services” Model for People with Mental Health Issues**

**Bulgaria/Mental League**

Mental League helps implement “the circle of services for housing,” giving opportunities for people in Bulgaria with mental health issues to live independently and, moreover, to be motivated to live independently with supervision by professionals where required.

• **Uniting Thousands of Families with Children and Young People with Psychophysical Disabilities in Belarus**

**Belarus/ BelAPDiMI**

There is no alternative to large boarding institutions in Belarus. Young people with intellectual disabilities who live with their family are dependent on their relatives. They have no opportunity to live independently with assistance and cannot make their own decisions and plan their adult life. The Belarusian Association of Assistance to Children and Young People with Disabilities (BelAPDiMI) has united, on a voluntary basis, approximately 3,000 families bringing up children and young people with psychophysical disabilities in Belarus. The aim of the organisation is to create for children and young people opportunities to participate in every field of social life.

• **Increasing Best Practices with regard to Accessibility in Russia**

**Russia/ All-Russian Society of Disabled People (ARSDP)**

The object of the program is to make the environment - facilities and infrastructure - more comfortable and accessible for people with impairments and reduced mobility. The program trains people with disabilities as accessibility experts, supports the establishment of Expert Centres in regions of Russia and supplies them with information and methodology on accessibility best practices. The program also promotes Expert Centres and helps individuals with disabilities find jobs in a given accessibility area.
• Managing a Hotel Specifically Geared Toward Individuals with Disabilities

Slovenia/Dom Paraplegikov

Created by the Association of Paraplegics of Slovenia, Dom Paraplegikov is a hotel that has everything that people with disabilities require - and especially wheelchair users. The organisation now offers services to other types of guests (including those with multiple sclerosis and families with small kids). The organisation has expanded to spearheading activities for athletes with disabilities and is promoting its services through www.booking.com and Slovenian agencies for accessible tourism.

• Enabling People with Severe Disabilities in Vienna to Live in Their Own Studio Apartments

Austria/Vienna Social Fund—Fonds Soziales Wien

Vienna Social Fund offers services in cooperation with twenty organisations, which provided services in about 200 institutions all over Vienna and its surrounding areas. The studio-apartment-residential model which the Social Fund ascribes to enables people with serious disabilities to live in their own studio apartment as part of a larger housing group. This model is offered by four private partner organisations.

• Maintaining and Improving a Cutting-Edge Multi-generational Living House

Austria/ÖJAB - Österreichische Jungarbeiterbewegen (Austrian Young Worker Movement)

Neumargareten is the multi-generational house of the Österreichische Jungarbeiterbewegen (ÖJAB). While it is a house for old and young, Neumargareten pays particular attention to the needs of the elderly. It is open to all people regardless of their origin, religion, or political beliefs. Ensuring and promoting the individual quality of life of the residents is a special concern. The care of high-maintenance and chronically ill residents is a focus of the house. Respect for human dignity is always at the forefront of staff actions.
• **Organising a Building Association for Elder Migrants to Germany from Turkey**

Germany/Baugemeinschaft MEKÂN

The program is a building society for social housing, geared toward first-generation migrants in Germany mainly from Turkey. Guest workers, who came to the Federal Republic in the 1950s are now retired. Residents are sixty to over eighty years of age. 80 percent are widows with minimal incomes. The residents, who never integrated into Germany, want to live independently, but not alone. Many speak minimal German and have very limited writing skills. The program ensures members are not left alone in the last days of their life.

• **Organising a Peer–Learning Group for Museum and Heritage Professionals in the Balkans**

Albania, Bosnia and Herzegovina, Bulgaria, Croatia, Greece, FYROM, Kosovo, Montenegro, Romania and Serbia /Association Balkan Museum Network (BMN)

Balkan Museum Access Group (BMAG) is a peer–learning group for museum and heritage professionals. It consists of a team of nine individuals committed to learning and developing their educational consulting capacities. BMAG helps design inclusive educational activities based on the social model of disability, working with various age groups and influencing museum policies related to co-production in partnership with people with disabilities.

• **Providing Individuals with Disabilities in Poor Housing Free Apartments in Azerbaijan**

Azerbaijan/The Ministry of Labour and Social Protection of Population

The program addresses the problem of poor living conditions of persons with disabilities because of their low incomes. The low number of pensions and social allowance, lack of employment, and low incomes are the reasons why many people with disabilities do not have a decent living provision. The program’s intention is to improve housing for people with disabilities. Those who qualify register to receive housing. Individuals are then put on a waiting list and are eventually given free apartments that are purchased from private companies in multi-storeyed buildings. In rural areas they are provided houses built on vacant land.

The described program is implemented by the Ministry of Labour and Social Protection of Population. But I represent the Union of Disabled People Organisations of Azerbaijan, which closely cooperated with the Ministry on this program.
• **Using Digital, Video-Led Technologies to Make Living and Learning Easier for Individuals with Disabilities**

United Kingdom and Sweden/NFC Helps Me Limited

NFC (Near Field Communication) delivers digital, video-led tools to make places more accessible. Using mobile technology, NFC provides access to instructional information and user-generated video content. Users record videos through the platform, which are vetted before being uploaded. Alternatively, video content can be linked to a calendar to support routines and social engagement. Users and their supporters create content related to daily routines - including personal care, home maintenance, and social activities - all cornerstones of independent living and social interaction.

• **Tackling Housing-Led Inequality by Providing Accessible Homes for Wheelchair Users**

United Kingdom/Abode Impact

There is an acute lack of wheelchair accessible homes in the UK Private Rented Sector (PRS). Abode Impact’s research shows that 4 in 5 of wheelchair users currently live in a home that does not fully meet their needs. 91% had experienced barriers to privately renting an accessible home. To tackle this, Abode Impact is launching an Accessible Housing Fund for London in order to use large-scale investment to purchase wheelchair accessible homes for private rent. By providing these homes, Abode Impact hopes to provide wider choice and independence for wheelchair users; reduce state spend and increase economic productivity and create a new market place for wheelchair accessible properties.

• **Rehousing Families in Chronic Housing and Social Exclusion Situations in Spain**

Spain/Ripoll Spiteri Antonio

The organisation works to develop coordinated social programs by accompanying and giving support to families under the jurisdiction of the Murcia Regional Government in chronic housing and social exclusion situations. The organisation works before, during, and after families’ selection for social housing. It also purchases proper houses for chosen families to work with complementary projects.
• **Spearheading a New Approach to Social Inclusion in Urban Development in Hamburg**

**Germany/Evangelische Stiftung Alsterdorf**

The foundation is breaking new grounds with its project Q8 in the rarely-explored field of inclusive urban development through its new approach by focusing on developing support and care structures, strengthening inclusive local communities and increasing the participation of residents. In particular, topics which require from-scratch approaches were further engineered with all stakeholders involved.

• **Fostering Inclusive Accommodation Through Shared Tasks and Community**

**Austria/ich bin aktiv—Lebensbegleitung für Menschen mit Behinderung**

“Ich bin aktiv” (“I am active”) offers services for people with intellectual disabilities in the area of education, leisure time, working, and housing. The organisation is designing future inclusive-living opportunities by setting up unique flat-sharing communities. Flat residents will undertake daily tasks with the mutual support of all members. Residents will then learn to take responsibility for one another fostering inclusion in society.
Conclusions

It is an objective of many organisations working with people with support needs to include person-centred approaches in their offers and services, and some even are creating new approaches based on it. But there are limits to the organisations due to structural framework conditions in many countries. Many organisations state that it is necessary for the funding bodies, the federal, regional and local governments to enable the change that is needed.

There is a broad agreement among self-advocates and service providers that the freedom of choice and self-determination must be strengthened.

The report also clearly points out that the provision of personalised housing services in most countries need to change toward disability-inclusion and person-centred approaches. Consequently, both have also to be considered already at the stages of architectural planning and real estate development in the future.

Models have to be developed so to encourage public funding bodies, public as well as private real-estate developers to provide the space that are also requested on a sustainable base, including improved consulting, matching and feedback processes.

This report found promising practices (regulations, stakeholder-involvement processes, cooperation models) on Integrated Housing and Support (IHS) in Europe that can be of guidance to all decision-makers. According to its findings, user involvement at all stages of the allocation process needs particularly more attention. The report also considers the following list of issues to be addressed as a matter of priority for the development of adequate person-centred housing services in Europe:

**Insufficient availability of social housing outside institutions**

In practice, most persons with disabilities still live in institutions, segregated from mainstream society, and this contributes to the stigmatisation of disadvantaged groups.

**Lack of compatibility**

One of the main barriers in the allocation of housing options to persons with support needs is the lack of compatibility between the resources available and those that are requested and needed by the end users. Issues such as accessibility of the environment and lack of other adaptations that may make the housing setting accessible to a wider public are to be addressed more consistently. Moreover, the use of assistive technology as a tool to enhance independent living should be promoted more widely.

**Lack of coordination between government bodies**

Very often, different ministries, departments or other governmental bodies are responsible for the housing needs of persons with disabilities and no coordination mechanisms are in place. Responsible bodies may include urban planning, social housing programs, social benefit and social protection policies, and more local policies on municipality level. As another consequence of this lack of coordination, enormous differences exist by region, but also by housing provider.
Non-user-friendly assessment processes linked to disability certificates

Often, persons with disabilities do not want their disability to be officially certified or fail to obtain a disability certificate for other reasons - or the process of certification takes very long and requires uncomfortable clinical and psychological reports and interviews.

In most countries, only those certifications entitle persons with disabilities for social housing; in the absence of these the only alternatives are paying market rents or prices.

Towards new solutions

Some support organisations have created programs like “Goal and Life Plans” that are based on finding out what is important for a person and what a person wants to achieve. The support staff helps the person to achieve their goal and document the process accordingly.

Personal Support Plan as promising practice

The Personalised Support Plan is a generally regarding as a promising practice in this report. It clearly helps solving problems and improve the shift from the medical to the social model: seeing a person as a whole, recognising wishes and needs, and placing the person at the centre of all processes.

Developing a new occupational and professional profile

Currently, most of the skills and expertise that have to be built in the future to respond to housing needs of persons with disabilities should be included in very different professions and occupations, like social workers, real estate developers, funding experts. Currently, close to none of them include a specific focus on and/or involve directly persons with disabilities and their expertise in their training processes or job practices. Persons with disabilities that need housing have to explain their needs over and over again and have no competent counterparts.

Developing a new professional profile or occupation, creating curricula, trainings and certifications is a key success factor in the future to promote the development of person-centred practices in social housing.

The TOPHOUSE legacy

Despite some achievements in recent years, the findings of this report point out clearly to the need of an even stronger focus on practical ways and tools to implement person-centred approaches – so to avoid that old attitudes pop-up again. The support that a person needs may be available in many different places, provided by formal carers but also by family members or extended circles of support. The TOPHOUSE project will continue raising awareness on the need of establishing strong networks where all relevant actors are involved, driven by persons with disabilities and their families.

TOPHOUSE partnership
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