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FABIO COLOMBO, TATIANA SARUIS

Social Innovation and Local Welfare: A Comparative Case Study on Housing First in Italy and Sweden

ABSTRACT Social innovation rises and grows within specific social and institutional conditions and relations, being at once an outcome and a driver of change of the contexts in which it is embedded. This paper sheds light on these processes, by studying the relationship between social innovation and local welfare configurations in the development of the same innovative practice, the Housing First model to contrast homelessness, in two different European cities: Bologna (Italy) and Stockholm (Sweden). The comparison allows us to highlight how the two local innovative practices, inspired by the same global model, have developed differently in these contexts and how they have adapted to the conditions posed by local welfare and housing configurations.

KEYWORDS Social innovation, welfare systems, Housing First, homelessness, case-study research

I. Introduction

The paper analyses the role of welfare configurations in shaping social innovation (and vice versa) by means of a critical contextualisation of two Housing First initiatives. Housing First is a service model aimed to combat homelessness. It was conceived in New York City in the early 1990s and then extensively spread in many North American and, more recently, European cities. It is widely recognised as a social innovation, since it radically challenges the way services to homeless people are conceived, designed, organised and delivered, as described in chapter two. The opportunity to study the implementation of the same innovative service model in two different

local contexts (Bologna, Italy and Stockholm, Sweden) was of special interest for the purposes of this research. The research strategy is based on case studies, which enable “an empirical inquiry that investigates a contemporary phenomenon within its real-life context, especially when the boundaries between phenomenon and context are not clearly evident” (Yin 2003: 13). The aim to grasp phenomena in their contexts makes the case-study strategy particularly suitable for this study. The case studies of Bologna and Stockholm were selected because they belong to different welfare and housing regimes. In the traditional classification of welfare regimes (Esping-Andersen 1990; Ferrera 1993; Kazepov 2010), they respectively belong to the Southern so-called “familistic” model – with a low level of de-commodification, residual role of the State and passive subsidiarity – and the Nordic model, based on universalism – which is characterised by generous de-commodification and inclusive universal benefits mainly provided by the State. In the typology of housing regimes (Kemeny 1995, 2001), they are classified as a dual housing system (in the case of Italy) – characterised by a policy oriented towards home ownership, an unregulated and unsubsidised private rental market, and a residual social sector – and a unitary housing system (that of Sweden) – with a tenure-neutral housing policy, and a regulated and subsidised private sector that competes on equal terms with public housing. These configurations, and other local conditions, contribute to shaping the way Housing First is implemented in the two cities.

The relationship between the development of social innovation and local welfare systems is therefore the object of this paper, which develops as follows. In the first part, we briefly introduce the perspective of social innovation in a framework of changing welfare configurations. We then provide a description of the Housing First model and its spread from the United States to Europe and explain to what extent it can be considered as an innovative approach in the design and provision of services for homeless people. In the second part, we focus on the two case studies of Bologna and Stockholm. We provide a framework for the field research, presenting the main characteristics of the initiatives and of the local welfare and housing policies. We then describe how the two initiatives interact with the original model and the local welfare policies. The final part sums up the main results of the field research and proposes some general reflections on social innovation in a comparative perspective.

2. Social innovation and the configuration of welfare policies

A shared definition of social innovation is still to be agreed, despite the growing interest shown by policymakers, researchers, and socioeconomic operators around the world (cf. this issue's introduction). The definition of social innovation adopted in this paper refers to locally embedded practices, actions, and policies that help individuals and social groups to satisfy basic social needs for which they find no adequate solution in the consolidated welfare policies or the private market and that aim at promoting the structural transformation of social relations (Oosterlynck et al. 2013a). This perspective focusses on territorial development and historical institutionalism (Pierson 2004). It emphasises path dependency and path discontinuity characteristics in social innovative initiatives, as well as their implications for political, economic and societal institutions. Social needs and, consequently, possible solutions, differ on the basis of local socioeconomic and institutional conditions. Social relations, too, are structured at the micro level, and their transformation should be defined starting from specific local configurations. The local embeddedness of social innovation (Fontan/Klein 2004; Moulaert 2009) does not mean it ignores overall processes and transformations. On the contrary, the local is intended as the level where the effects of all other levels are conflated: global, supranational, national, and regional levels all influence local welfare configurations. Social innovation is both an outcome and a driver of change within the ongoing process of rescaling of social policies (Kazepov 2010). On the one hand, socially innovative practices can profit from the decreased strength of the central state, a stricter link with local public institutions, and an enlarged space given to new nonstate actors. On the other hand, they can suffer from a lack of support and coordination, traditionally provided by the central state.

The contexts in which social innovation takes form are diversified across Europe, due to different societal, cultural, economic, and historical frameworks. Innovative initiatives are also influenced by different configurations of welfare regimes, governance models and territorial organisations of social policies, as social innovation is essentially a practice-led field and a locally embedded practice (Young Foundation 2012; Oosterlynck et al. 2013b).

In our understanding, social innovation is not an attribute of a single social actor or sector, but it rather grows in the intersections and collaboration between different actors (public administrations, private for-profit actors, third sector and civil society organisations, social movements, informal groups) to cope with complex and multiple social needs and problems, and often changes their relationships, modifying their roles, tasks and forms of cooperation (Oosterlynck et al. 2013a).

This paper aims to disentangle these relationships between actors, practices and contexts, and to highlight the path dependency and path discontinuity relations between social innovation and different welfare contexts, with reference to a specific socially innovative practice (Housing First) and two local contexts (the cities of Bologna and Stockholm).

3. Housing First as a ‘glocal’ social innovation

Housing First (henceforth ‘HF’) is a model of intervention for addressing homelessness among people with mental health and addiction problems that was developed in New York City in 1992 by the nonprofit organisation Pathways to Housing. It radically challenges the traditional ‘staircase’ model, which considers housing as a final goal to be achieved only after individuals have successfully participated in psychiatric and addiction treatment programs (Johnsen/Teixeira 2010; Pleace 2011; Tsemberis 2010). These requirements prevent many people from accessing housing and push them into chronic homelessness (Pleace 2011; Tsemberis 2010). The HF model considers housing a basic human right to be provided without any requirement for compliance with psychiatric treatment or sobriety. Other basic principles of HF are a commitment to working with users as long as they need, the separation of housing from mental health and drug and alcohol services, consumer choice and self-determination, recovery orientation, and a harm reduction approach (Tsemberis 2010). In the original New York-based initiative, users have access to furnished apartments rented in the private market. If possible, they sign contracts directly with landlords in order to enjoy full tenancy rights. If landlords are unwilling to commit directly with HF’s users, Pathways to Housing signs their contracts. The only two conditions are weekly visits from a social worker

and the payment of 30 per cent of the user's monthly income, if available, towards rent (Tsemberis 2010). The social support is provided separately from housing and it follows the methodology of assertive community treatment, a method of intervention for mental illness that aims to reduce risks of relapse and re-hospitalisation. Both the staff and treatment practices are transferred out of institutions, into local communities (Tsemberis 2010). Social support is delivered by an interdisciplinary team, which includes a psychiatrist, a health worker, a family specialist, a housing specialist, a substance abuse specialist, and an employment specialist (Tsemberis 2010). This support is available 24 hours a day, seven days a week, and the services are delivered as much as possible in the user's environment: the dwelling, the neighbourhood and, sometimes, the workplace. The support addresses housing maintenance, health care, job search assistance, spare time activities, family relations, personal hygiene, and life styles (Tsemberis 2010). The model adopts a recovery orientation and a harm reduction approach. In any case, the cornerstone is the free choice of the users, who can decide which services to use and to what extent to use them.

The HF model has been widely spread in the United States, being both horizontally transferred among cities and vertically upscaled from the local to the national level (Stanhope/Dunn 2011; USICH 2015). In recent years, the new approach has also been used as a model for change in Europe, mainly for two reasons. First, the model has shown much better outcomes than the traditional staircase model, at least in terms of housing retention (Atherton/McNaughton 2008; Johnsen/Teixeira 2010; Pearson/Montgomery/Locke 2009; Pleace 2008). Second, a number of studies have demonstrated that HF is associated with decreased costs compared to traditional staircase-based services, considering that users of HF services significantly reduce their use of other services, such as shelters, hospitals and prisons (Gulcur et al. 2003; Tsemberis 2010).¹

The local practices inspired by the original model present common features and differences depending on the local needs and institutional conditions (Atherton/McNaughton 2008; Busch-Geertsema 2013; Pleace 2011; Pleace/Bretherton 2013). Some of the HF services implemented in European cities show a high degree of fidelity to the original model (Pleace/Bretherton 2013); others are addressed to different homeless groups. In effect, the definition of homelessness elaborated by FEANTSA (2011)²,

referred to as “Ethos”, proposes a wide conception of homelessness, which also includes situations of housing vulnerability which are not included in the scope of the original HF model.³ Access to affordable housing for vulnerable groups is a major concern throughout Europe, and this influences the way HF services are conceived and implemented, to the extent that a new concept, that of “housing-led services”, has been introduced to describe services that present only some features of the original model, for example, providing low-intensity social support or addressing different target groups (ECCH 2011).

HF is widely recognised as a social innovation (Busch-Geertsema 2013) that has radically challenged the traditional way services to homeless people are conceived, designed, organised and delivered. However, if we refer to the definition of social innovation provided in section one, we should turn our attention to the local level, and recognise that the extent to which HF can be considered a socially innovative practice is highly context sensitive. Indeed, many basic features of Housing First directly derive from the experience of the supported housing service model, which emerged during the 1990s (Tabol et al. 2010). When HF was transferred to Europe, some countries, like Germany and the United Kingdom, had already implemented a well-established system of supported housing, providing homeless people with long-term housing solutions. In those countries, HF is not considered as a radical social innovation, as it is in other contexts. For these very reasons, each HF project should be analysed in relationship to the local policies and social relations.

4. Contexts and practices of Housing First in Bologna and Stockholm

Two case studies have been selected to analyse the dynamic relationship between social innovation and local welfare systems. They pertain to two different welfare and housing regimes and are embedded in the social and institutional relations of the two contexts where they have developed: the cities of Bologna, Italy, and Stockholm, Sweden. They draw on reflections, information and data collected within the European research project ImPRovE: Poverty, Social Policy and Innovation, which includes a study

on social innovation in the field of poverty, based on the analysis of 31 case studies of socially innovative practices, six of which concerned Housing First. The field research in Bologna and Stockholm was conducted between February and June 2014. Data collection corresponded to the protocols established within the ImPRove project (Kazepov et al. 2013), and used the following methods: a) Document analysis, including a detailed study of documents concerning the innovative experience (web sites, publications, formal agreements, evaluation reports, leaflets, brochures, internal reports, agreements, evaluations); b) analysis of institutional programmes, laws, strategies, statistics and research describing local policies on homeless and housing; c) three to five qualitative semi-structured interviews per case study conducted with people related to the organisations involved in the initiatives and other people having privileged insights on them and on the context (the aim of the interviews was to describe in depth the project, its genesis and potential, its organisation and network, the characteristics of the local context, and the policies on housing and homelessness); d) one focus group per case study with people involved in the innovative initiatives, aimed at discussing in depth the project and its innovative characteristics in relation to the context.⁴

5. Contexts: Housing and welfare policies in Bologna and Stockholm

The contexts where the two initiatives are developed are described in order to provide a background for the case studies. The main aspects influencing them are highlighted, especially in relation to local welfare and housing policies.

5.1 Bologna

50,724 homeless people have been reported in Italy by a study published by the National Institute for Statistics (Istat 2014). The vast majority of them are men (85.7 per cent), with a prevalence of foreign homeless people (58.2 per cent). 21.4 per cent of them have been in a state of homelessness for more than four years, 41.1 per cent for more than two years, and 17.4 per cent for less than three months. 23.7 per cent of the

Italian homeless population live in Milan, and 15.2 per cent in Rome. Two per cent of the Italian homeless population, that is 1,032 people, live in Bologna, a medium-sized city of 387,000 inhabitants. 51.6 per cent of them are foreign citizens.

Social welfare policies in Italy are regulated at the regional level, co-financed by the central state, regions and municipalities, and implemented by the latter. The municipality of Bologna has organised its welfare system through a central unit of coordination and six territorial social desks placed in the city districts. A public local agency coordinates the providers, which are mainly third sector organisations. Public shelters for adults (Italian and regular immigrants, aged 18–65 years old) are classified in four typologies on the basis of requirements for access and time of permanence, and bound to a gradual accomplishment of social and activation pathways, as in the staircase model. They can accommodate about 300 guests (550 during winter), are completely financed by public funds, and managed by third sector organisations. The city offers many other services to poor households and homeless people, such as canteens, toilets, and the distribution of essential goods.

Italian housing policy is residual and mainly oriented towards home ownership. Only six per cent of households reside in social rented dwellings, an exceptionally small number compared to the European standards (Istat 2013). In 2010, social rented houses in the province of Bologna numbered 16,542 (Province of Bologna 2012), but in the period 2007–2010, only 949 applications could be satisfied. The public supply is insufficient and the province estimates the deficit of houses in its territory at between 20,500 and 27,000 units (Istat 2013). The Municipal Housing Policy Sector provides measures to limit rent costs in the private market and manages the assignment of public social rented houses. In 2010, there were 13,098 demands for such housing, regarding 24,493 people. In 2012, the list for public houses contained 8,485 valid requests. Inclusion in the lists to access these provisions is based on economic and social criteria. Applicants must be in the local register of residents and accomplish a complicated procedure; both of these conditions disadvantage homeless people. Besides, these measures are not considered as part of the policies to combat homelessness, although at the end of a successful inclusion pathway, social workers can present a social evaluation to facilitate access.

5.2 Stockholm

The Swedish National Board of Health and Welfare reports about 30,800 homeless in the country, including people in different precarious accommodations ranging from acute homelessness to inadequate or unsafe long-term conditions. Those living on the streets and experiencing acute homelessness number 4,500 people (NBHW 2011). Stockholm has about 900,000 inhabitants and 2,866 homeless people (Stockholms Stad 2014). Almost half of them (49 per cent) are 46–64 years old and the women are on average younger than the men. Fifty eight percent are reported to have substance abuse problems (38 per cent are mainly alcohol related, 39 per cent are mainly drug related, and 19 per cent involve both). In recent years, people experiencing housing difficulties are increasingly young adults and families with children, especially immigrant newcomers (Källmen et al. 2013).

In Sweden, social welfare policies are regulated at the national level and implemented at the municipal level. The traditional model of intervention on homelessness is based on the staircase logic. The municipalities are in charge of the provision of public housing. Each municipality owns a housing company, except for the city of Stockholm, which owns four companies. Since the 1990s, the municipal housing companies have been gradually transformed into market actors, after a long history of acting outside the market with the aim of promoting housing as a universal social right (Elsinga/Lind 2012). As a consequence, between 2000 and 2010, 120,920 dwellings were sold by public housing companies in Sweden, of which 41,990 were in Stockholm (Andersson/Magnusson Turner 2014). Access to the regular rent market is a tricky issue, especially due to the housing shortage, the high rental market prices, and the long waiting lists to access public housing. These conditions are particularly severe in Stockholm, where 551,756 people are registered on the municipal waiting list.⁵ 64,618 people were added to the waiting list in 2015, the biggest number ever recorded in one single year: the number was 18,706 ten years before, in 2005.⁶ As a result, the average waiting period is increasing year by year: it was 8.2 years in 2015, while the vast majority of registered candidates received a house within six years in 2007.⁷ The average waiting period can be up to 16 years in the inner city.⁸ As a consequence, the so-called secondary housing market is expanding, including not only

apartments subleased by social services to poor households, but also a growing black market that attracts young people in particular, as well as vulnerable households that do not meet the requirements to access the public stock reserved for social services (about 400 apartments).

6. Practices: The Housing First projects in Bologna and Stockholm

6.1 Bologna

The project Tutti a Casa is managed by the non-profit organisation Piazza Grande. It was the first experiment with the HF model in Italy. It started at the end of 2012 as a pilot project financed by the Bank Foundation Del Monte of Bologna and Ravenna, and its development has been very rapid: in August 2013, the association was managing about 40 private and four public apartments, hosting 160 formerly homeless tenants. Unlike the original model, the project does not include active users of drugs or alcohol. It addresses two target groups: adult homeless individuals coming from the streets or shelters with long-term difficult pathways and multiple needs (not necessarily with mental illness, but different combinations of economic poverty, unemployment or weak work positions, health, psychological, relational problems and so on), and households with minor children who are homeless or coming from inadequate, unsafe, or precarious accommodation.

Candidates are selected by a working group including professionals from Piazza Grande, the municipal social services, public health services, and some local social cooperatives for work inclusion. The assessment is mainly based on people's motivation and capacities, means and needs, and their willingness and potential to reach housing stability through the support of this integrated public-private network. In fact, it collaborates to provide the tenants with (a) an internship aimed at a more stable occupation to enable them to pay their rent, if they have no right to an elderly or disability pension; (b) support in the organisation and management of the apartment; and (c) health care at home and psychological and social care. These measures are decided case by case, depending on households' needs and resources.

The municipality of Bologna is actually the main partner of the project: the social services oversee the users in coordination with the public-private network and also provide limited and temporary economic subsidies in the most difficult cases. Thanks to an innovative agreement with the health services, the tenants who need ongoing aid (e.g., people in psychiatric care) receive assistance directly at home. Furthermore, a team of professionals from Piazza Grande, composed of a project manager, a psychiatrist, four social workers, and four psychologists, provide relational and organisational support to all the tenants. Individual weekly meetings are organised with the association's professionals and fortnightly group meetings among cohabitants in each apartment.

The apartments are mainly rented by Piazza Grande from private owners and are not free of charge. The main responsibility with respect to the contract and the payment of the rent falls on the association, which also provides the economic and formal guarantees, takes charge of the bureaucratic practices, and supervises the apartments' management. These are free services for the landlords, to encourage them to offer their houses for the project. The association has launched a social campaign to find houses to rent. Special agreements can be made, if Piazza Grande also takes over the renewal of the apartments.

The rent for households is about 150-200 euro per month, depending on their socioeconomic conditions, which is significantly below the market price (568 euro)⁹, and includes the cost of utilities.

6.2 Stockholm

Bostad Först i Stockholms Stad is a pilot project of the municipality of Stockholm, started in 2010 to test the potential of the HF model. It is managed by the Social Affairs Division of the municipality, which leads a network comprising four city district administrations, the municipal housing company Svenska Bostäder, which provides the apartments, and the NGO Stadsmission, which offers social support to the tenants. The University of Lund works on the assessment of the project.

Homeless people are offered a trial period (from nine to 24 months) during which they sublet an apartment from the social services without any condition apart from paying their rent (when possible) and respecting the national Tenancy Act.¹⁰ They are not expected to stop using drugs

and alcohol, and social measures, health therapy, or both, are provided if requested and due, but they are not conditions for keeping the accommodation.

The target group is homeless people, both with substance addiction and mental illness, with long-time homelessness pathways. A major difference between the original model and the Swedish experiment is that the former addresses people not engaged in structured pathways in the welfare system, while the latter involves people with a long history in the social services and poor results from traditional intervention.

The social workers of the district social services manage the access to the project. They select candidates with the required characteristics and conduct interviews to assess their motivation. When a new apartment is available, a meeting between all the partners involved in the project and the candidate is organised to explain the conditions for accessing the accommodation. During the trial period, the rental contract is signed between the housing company and the district service following the case. If there are no complaints during this period, the contract is transferred directly to the tenant, who gets access to the regular housing market.

The apartments for the project are provided by the public housing company Svenska Bostäder, using the stock reserved for the social services. The NGO Stadsmission provides social support to each tenant, coordinated by the case manager of the social services. Its social workers visit the apartments once a week. Their task is to monitor and support the tenants' strategies to keep housing stability and respect the Tenancy Act. The staff is available on call seven days a week and 24 hours a day for any emergency. The project is financed using the ordinary budget of the municipal social services dedicated to homelessness.

	Bologna – Italy	Stockholm – Sweden
Title	Tutti a casa (All at home)	Bostad Först i Stockholms Stad (Housing First in Stockholm)
Year of launch	2012	2010
Main organiser	Association Piazza Grande	Social Affairs Division of the Municipality of Stockholm
Type of organisation	Third sector	Public sector
Other organisations involved	Municipality of Bologna, Local Health Agency, Provincial centre for unemployed in Bologna, Social Cooperatives employing disadvantaged people, private houses' owners	Municipal public housing company Svenska Bostäder, Stockholm's Stadsmission NGO for social support, University of Lund, municipal Unit for homelessness and social services of four city districts
Type of network	Public-Third sector mixed	Mainly Public
Territorial dimension	Bologna and some Municipalities in the surroundings	Stockholm
Funds	Mainly private	Public
Financers and budget	Multiple sources: Bank Foundation Del Monte, private donors, Municipalities (mainly ordinary social services measures), rent paid by the beneficiaries	The Social Affairs Division of the Municipality of Stockholm funds the project (including rents) through the ordinary budget of social services for homeless people. Only a small additional budget is assigned to the project for publishing the results.
Aim	Housing-led intervention, social and health support, activation, gradual autonomy but without a temporal limit	Experimental intervention providing housing stability not bound to other treatment-related measures
Target	Families with minor children without a stable accommodation and homeless single adults	Acute and prolonged homeless people with substance addiction and mental illness

Beneficiaries	160 people (2012-2013)	35 people (2010-2014)
Type of accommodation	Four public and 40 private apartments rented by the association in the Municipality of Bologna and environs	24 public apartments reserved for social purposes
Houses' rent contracts	The rent contracts are between the association and public and (mainly) private owners	Trial period of nine-24 months with rental contracts established between the housing company and the social services. If successful, the contract is transferred to the tenant
Request to the tenants	The tenants have to pay their rent with the support of the association and measures activated by the network collaborating with the project	The candidate is only required to respect national Tenancy Act. A contract between the housing company and the local district is signed

Table 1: Main features of the Housing First projects in Bologna (IT) and Stockholm (SE)

Sources: Author's elaboration from field research

7. Similarities and variations: The Housing First model and local practices

7.1 Bologna

Tutti a Casa is inspired by the original HF model but also influenced by the ideas of the Italian psychiatrist Franco Basaglia (1981, 1982), which were crucial during the 1970s in promoting the national law establishing the closure of the asylums and the deinstitutionalisation of psychiatric patients. Some of the differences between Tutti a Casa and the original HF reflect this historical framework, such as the stress on relations as enabling and being part of empowering interventions.

The basic principle taken from the HF model is that access to housing should be granted to anyone. Piazza Grande provides homeless people and families with affordable apartments, mainly rented from private owners. The association shares the responsibility with the tenants for respecting the

established costs and conditions. If the tenants have incomes (pensions, social assistance benefits, or wages) they use part of these to pay the rent. Otherwise, a tailored solution is developed within the public-private network, supporting the project and negotiated with the tenant. Italy has never introduced a measure of minimum income and the municipal social services can provide only limited and temporary economic subsidies, paid internships, or both. The acceptance of activation measures, in order to be in a position to pay a rent, is a reason why active users of drug or alcohol who are not in treatment have not been included in the initiative: they are supposed to have more difficulties and to need specific support in accomplishing these goals. This is a major difference from the original HF model.

The attainment of the housing stability generated in the beneficiaries of *Tutti a Casa* a new demand: to be supported in their social integration in the new neighbourhood. This has become part of the support provided to tenants during the first period they are in the apartments: Piazza Grande's social workers participate in local public events with them and introduce them to strategic places for setting in the context, like parks, social centres for elder people, public libraries, shops, gyms, and so on.

The apartments are scattered throughout the city, as in the original HF model. Special attention is paid to avoiding any condition that might create a potential negative label for the tenants and thus reproduce processes of social exclusion. For example, the names on the doorbells are those of the tenants (even if the formal holder of the contract is the association) and the other people in the condominiums are not informed about the special status of the apartments.

7.2 Stockholm

Bostad Först was designed following quite exactly the original model as interpreted by the University of Lund (Knutagård/Kristiansen 2013), which promoted this approach in Sweden and has the task of monitoring the initiative's implementation. The mainstream strategy in the field of homelessness is based on the staircase model, and therefore the experiment represents a challenge for the Swedish social and housing services.

The target group is similar to the beneficiaries defined in the original model: the acute and long-time homeless, with both substance addiction

and mental illness. Following the model, the provision of housing is not conditional on participation in any social or health care programme. The only condition is to respect the Tenancy Act, as it is for all the other tenants in Sweden. For a trial period of nine to 24 months, tenancy contracts are signed by the social services of the local district. After this period, if there are not problems or complaints, the contract is transferred directly to the tenants, who have to pay 30 per cent of their income toward rent, when possible. This is meant to guarantee housing stability.

The social support was very ‘light’ in the first edition of the project. Social workers visited the tenants, provided information, and mediated, if necessary, with other services and institutions. A professional from the housing company acts as a mediator in conflicts with the neighbours.

Finally, as in the original model, the apartments are scattered-site independent houses. They are mainly concentrated in suburbs in North and South Stockholm, as they are less expensive and have apartments of the needed size.

Tsemberis’ principles of Housing First	Tutti a casa (All at home) in Bologna	Bostad Först i Stockholms Stad (Housing First in Stockholm)
Housing as a basic human right	Limited – Access to stable accommodation as a pre-condition to social inclusion and as a collective (not only public) responsibility. Tailored measures help the tenants to pay an affordable rent.	Yes – Experimentation totally financed by public funds and with dedicated public houses housing. The houses are free of charge for tenants for nine-24 months, then they are required to pay their rent, if possible.
Respect, warmth and compassion for all clients	Yes – Continuous dialogue to understand and support personal needs, desires and capabilities.	Yes – Support by a staff available seven days / 24 hours, provision of health and social services if requested and due.

A commitment to working with clients for as long as they need	Yes – No fixed term for the accommodation and services.	Limited – The rent contract and social support can be renewed after the trial period, with the approval of the involved partners (substantial role of the housing company).
Scattered-site housing, independent apartments	Yes – Explicit avoidance of a concentration of the apartments, spread throughout the city and the suburbs.	Limited – Scattered-site independent housing, although mainly placed in some (less expensive) areas in the suburbs.
Separation of housing and services	Limited – Integration between housing provision and services to support social inclusion (economic, social, health and activation measures).	Yes – Access to housing is not conditional on participation in health or social programmes; the only condition is to respect the Tenancy Act and meet a social worker once a week.
Consumer choice and self-determination	Yes – Selection of tenants based on the assessment of conditions and motivation. Tailored intervention on multiple aspects, attention to tenants’ needs, desires and capabilities.	Yes – Selection of tenants on conditions and motivation. Health and social services are provided only if requested.
A recovery orientation	Yes – Tenants are supported in managing the apartment (especially those in cohabitation), paying their rent (also through activation measures), and building relationships within the neighbourhoods.	Yes – Tenants meet a social worker once a week and are supported in their adaptation to the new house and respect of tenants’ rules. The participation in any other social or health program is voluntary.
Harm reduction	No – At the moment, active drugs or alcohol-addicted people who are not in treatment are not included in the project.	Yes – Although participation in treatment programmes is not a condition for keeping the apartments, the project aims at reducing risks related to substance abuse.

Table 2: The Housing First original principles and their application in Bologna (IT) and Stockholm (SE)

Source: Tsemberis 2010: 18; Author’s elaboration from field research

8. The Housing First practices and the innovation of local welfare

8.1 Bologna

Piazza Grande's experience in the field of homelessness was important in the design of the project, as it had a deep knowledge of the local social needs, resources, and networks. Its good reputation has been crucial for succeeding in fundraising strategies and finding low-cost houses to rent in the private market.

The main challenge for the association was how to help the tenants pay rent. Italy does not have a minimum income scheme, the municipality could not make available free public houses, and the economic subsidies are limited and temporary and thus inadequate to support housing stability. Excluding people who have old age or disability pensions, it is necessary to offer to the tenants paid job or internships. These opportunities are offered by a mixed network, including public services and third sector organisations. These measures are also supposed to complete the tenants' process of social inclusion, creating new relationships and reinforcing their self-confidence.

The initiative was born during a period of a crisis of local policies for homelessness, mainly due to increasing needs and decreasing public resources. The high cost of public shelters and the awareness that this solution leads to dependency on welfare provisions stimulated the research into new and more effective interventions. The combination of crisis and innovation should not be taken for granted: a deep crisis can reduce the creative potential and redirect resources to coping with emergencies while cutting investments in potentially promising experiments.

The support of the municipality of Bologna was crucial for the development of the initiative. The governance system of the local welfare is strongly horizontal and participatory, a condition that fosters the promotion and diffusion of social innovation. One year after the beginning of the project, the municipality decided to close a night shelter in order to earmark new resources to finance a public HF service to be managed in collaboration with Piazza Grande.

The number of houses and tenants involved in Tutti a Casa is growing in Bologna and the surrounding municipalities. The association was able to

present the initiative as a cost-effective new solution. Similar initiatives are being established in other Italian cities and regions and a national network of HF has been promoted by *fio.PSD*.¹¹ The network supports the establishment of new HF services providing training, networking, and evaluation (Consoli et al. 2016). Apart from this initiative, promoted entirely by the third sector, there is no public national strategy for implementing HF, mainly due to the regional and municipal aspect of the Italian welfare system and the lack of institutional mechanisms designed to identify and spread local best practices.

8.2 Stockholm

Bostad Först is completely financed by the municipality of Stockholm, and involves a mainly public network in the governance process (a third sector organisation has a limited role in the social support aspect). This initiative highlights the innovative potential of the public welfare institutions in this context. After the initial experimentation (2010–2014), the project was expanded in the second edition (2014–2016), with the number of available apartments increasing from 24 to 64, and becoming better integrated in the social welfare. The aim is to strengthen the multi-professional team, to better coordinate housing provision and care, social and economic support, substance abuse therapy, psychiatry, active labour market measures, and crime prevention. The purpose is to improve the initiative by better combining the strengths of the HF approach with those of the local welfare system. In particular, an innovative agreement between the municipal social services and the provincial mental health services was in the process of being signed at the time of the field research. It would be a relevant innovation in a context where the two services usually show a low degree of collaboration.

The structure of the national and local housing market was a major obstacle to launching the initiative, for two reasons. First, neither private landlords nor municipal housing companies (which act as market actors, as established by the law) are interested in providing apartments for these kind of initiatives, since they could rent them to more reliable and stable tenants. Out of four municipal companies operating in Stockholm, only one agreed to take part in the pilot initiative. Second, once a tenant has access to the regular housing market it is very difficult for the landlord to

terminate the tenancy. On the one hand, this fosters housing stability for the HF beneficiaries when they sign a direct contract after the training period; on the other hand, it undermines the willingness of landlords to participate since they are reluctant to accept tenants that could give them problems. Furthermore, vested interests are in action: public, private, and nonprofit organisations managing shelters and other similar forms of accommodation have strong interests in preserving the staircase model (Knutagård/Kristiansen 2013). So far, only seven out of 290 Swedish municipalities have started an HF project, despite the fact that the method has been promoted by the University of Lund as an evidence-based and cost-effective strategy.

Svenska Bostäder, the more socially-oriented public housing company in Stockholm, reserved 24 apartments for the pilot project. They are mainly concentrated in some areas in the northern and southern suburbs of Stockholm where cheaper dwellings are available. The small number of apartments does not currently create a problem of concentration of these tenants and the consequent labelling effects. However, this could become a problem in the future if the number of apartments increases: at least in terms of the promoters' goals, the model should become part of city welfare services.

9. Contexts and practices of Housing First: A synthesis

Both projects are inspired by the same model, but their implementation is shaped by different national and local welfare and housing configurations. Five main points can be highlighted.

- I. The target groups are different. In the Swedish context, public investment allows the programme to address homeless persons with both addiction and mental health issues, separating housing and welfare measures, as in the original HF model. In the Italian project, houses are rented in the market and tenants have to fully pay their rent, although they are supported with welfare and activation measures. This entails the exclusion of active drug or alcohol users, who are perceived as too problematic to fulfil these aims.

2. In Stockholm, the capacity for innovation in public welfare institutions is evident, as the municipality drives the entire process of adaptation of the model to the local conditions. In Bologna, a complex mix of public-private resources was activated through the efforts of the leading association, while the public local welfare system became crucial in the institutionalisation process.
3. Starting from an urban context in the United States, the original HF model became a global model and then, in both cases, it came back to the local dimension. In Italy, it is mainly diffused through informal horizontal networks among different cities or through the national network of HF promoted by the third sector. In Sweden, there is the supervision of the University of Lund, which is also trying to build a “Swedish model” of HF (Knutagård/Kristiansen 2013). In any event, in both cases a structured vertical diffusion is lacking: supralocal institutions (such as the regions or the state) do not intervene to evaluate and mainstream the model.
4. Both projects try to overcome the staircase model, which is considered to be ineffective and inefficient in dealing with homelessness. In Bologna, the initiative takes into particular account the multidimensional aspects related to homelessness (health problems, relational difficulties, unemployment, and the like). In Stockholm, the quality of the social support and of the attention to health problems emerged as a weakness of the first version of the initiative, mainly because of the lack of coordination between municipal social services and provincial mental health services. The second version of the project aims to better integrate the two components.
5. Housing stability is considered in itself a socially inclusive and empowering instrument, which allows tenants to regain full social citizenship. However, this is hardly considered an automatic outcome, especially for the long-term homeless, who often present complex and multidimensional problems. The support provided in Bologna to tenants’ social integration in the new neighbourhood addresses this concern. This specific attention stems from the bottom-up, participatory perspective historically adopted by the leading organisation. The more managerial approach adopted by the municipality of Stockholm seems less adequate to pursue the goal of social integration.

10. Final reflections from a comparative perspective

Despite their very different welfare regimes (Esping-Andersen 1990, 1999; Ferrera 1996; Kazepov 2010), both Sweden and Italy consider homelessness a social issue whose resolution belongs to the social policy sector and not to the housing sector. This logic is consistent with the dominant paradigm based on the staircase model, where the accomplishment of the aims of the social services is a prerequisite for homeless people to access stable accommodation. However some features of the two HF practices show a certain continuity with the welfare regimes in which they are embedded.

The Scandinavian welfare model is characterised by a managerial governance style and a pervasive role for the state (Kazepov 2010; Oosterlynck et al. 2013b); both features are evident in the HF initiative in Stockholm. This guarantees strong economic and political support for socially innovative initiatives, which are integrated into broader, but mainly top-down, national and municipal political strategies. The managerial approach tends to concentrate its efforts on achieving the expected results more than on promoting new approaches, such as bottom-up participation, that could slow down the attainment of the anticipated outcomes. This context could reduce the innovative potential of HF, which is mainly considered as another possible way of managing homelessness, more than as an opportunity for promoting new social relations where homeless people can play a proactive role. This approach promotes a sort of ‘conservative’ social innovation which, being promoted within the system by strong public actors, tends to produce substantial effects through linear processes instead of challenging existing social structures and radically transforming social relations.

The framework of passive subsidiarity which characterises Italy leaves instead enough room for third sector organisations’ initiatives, yet often without adequate financial support (Kazepov 2010). The socioeconomic crisis worsened the situation in recent years: the retrenchment of the welfare state both at national and local level and the growth of the demand for social benefits and services led many public and private actors to react in a conservative way, by trying to preserve the existing services rather than investing in innovative ones. In the case of Bologna, a private actor,

the Bank Foundation, was fundamental in sustaining the start-up phase of the project, which was then supported by the local public administration, without a preceding broader strategy. This confirms a certain degree of chance in the emergence and diffusion of social innovation in Italy and a large, albeit confused, space for less established actors, processes, and ideas.

For both projects, the main difficulty lies in the possibility of mainstreaming. In Italy, this is mainly due to the fragmentation of the welfare system and the weak national coordination, although the recently established national network of Housing First is a promising initiative for addressing the challenge of mainstreaming. In Sweden, the vested interests of public, private, and nonprofit organisations managing shelters tend to preserve the staircase model, despite the fact that the University of Lund has provided evidence-based results of the effectiveness of the HF method, both in terms of effectiveness and efficiency.

- 1 This is a contested point. See, for example, Rosenheck 2010; Stanhope/Dunn 2011.
- 2 Fédération Européenne des Associations Nationales Travaillant avec le Sans-Abri (European Federation of National Organizations Working with the Homeless).
- 3 “Ethos” stands for the European Typology of Homelessness and Housing Exclusion, available at <http://goo.gl/PXhZ2p>.
- 4 Drawing on the data collected, a report for each case study has been drafted (see: Colombo/Saruis/Kazepov 2016 and Saruis, Colombo/Kazepov 2016).
- 5 Stockholm Housing Agency (2016): Bostadskön i siffror. <https://bostad.stockholm.se/statistik/statistiktjansten/>. Last consultation 5th October 2016.
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- 8 Stockholm Housing Agency (2016): Bostadskön i siffror. <https://bostad.stockholm.se/statistik/summering-av-aret-2015/>. Last consultation 5th October 2016.
- 9 Istat (2015). VII Rapporto sul mercato delle locazioni in Italia. <https://goo.gl/OaXn9B>
- 10 Tenants’ rights are particularly strong in Sweden, so that it is very difficult for a landlord to dismiss a tenant, except for two conditions: lack of payment for three months or exceptional disturbances caused to the neighbours. These are the rules to be respected by HF tenants.
- 11 Federazione Italiana Organismi per le Persone Senza Dimora (Italian Federation of Organizations for homeless people).

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ABSTRACT Soziale Innovation gründet auf spezifischen sozialen und institutionellen Voraussetzungen und erwächst aus Beziehungen. Sie ist zugleich Folge und Triebkraft jener sich wandelnden Verhältnisse, in die sie eingebettet ist. Der vorliegende Beitrag beleuchtet diese, indem er anhand eines innovativen Modells, dem „Housing First“-Programm gegen Obdachlosigkeit, die Beziehung zwischen sozialer Innovation und lokalen wohlfahrtsstaatlichen Strukturen analysiert. Als Fallbeispiele dienen zwei unterschiedliche europäische Städte: Bologna (Italien) und Stockholm (Schweden). Der Vergleich verdeutlicht, wie lokale innovative Praxen, die vom gleichen globalen Referenzmodell inspiriert wurden, sich unterschiedlich entwickelten und an lokale wohlfahrtsstaatliche und wohnbaupolitische Strukturen angepasst wurden.

Fabio Colombo

Department of Economics, Society and Politics (DESP)

University of Urbino Carlo Bo

fabiocolombo6@gmail.com

Tatiana Saruis

Department of Economics, Society and Politics (DESP)

University of Urbino Carlo Bo

tatiana.saruis@gmail.com