

WOMEN'S HOMELESSNESS IN EUROPE

Edited by

Paula Mayock &
Joanne Bretherton



Women's Homelessness in Europe

Paula Mayock • Joanne Bretherton
Editors

Women's Homelessness in Europe

palgrave
macmillan

Editors

Paula Mayock
School of Social Work and Social Policy
Trinity College Dublin
Dublin, Ireland

Joanne Bretherton
Centre for Housing Policy
University of York
York, United Kingdom

Women's Homelessness in Europe

ISBN 978-1-137-54515-2

ISBN 978-1-137-54516-9 (eBook)

DOI 10.1057/978-1-137-54516-9

Library of Congress Control Number: 2016958880

© The Editor(s) (if applicable) and The Author(s) 2016

The author(s) has/have asserted their right(s) to be identified as the author(s) of this work in accordance with the Copyright, Designs and Patents Act 1988.

This work is subject to copyright. All rights are solely and exclusively licensed by the Publisher, whether the whole or part of the material is concerned, specifically the rights of translation, reprinting, reuse of illustrations, recitation, broadcasting, reproduction on microfilms or in any other physical way, and transmission or information storage and retrieval, electronic adaptation, computer software, or by similar or dissimilar methodology now known or hereafter developed.

The use of general descriptive names, registered names, trademarks, service marks, etc. in this publication does not imply, even in the absence of a specific statement, that such names are exempt from the relevant protective laws and regulations and therefore free for general use.

The publisher, the authors and the editors are safe to assume that the advice and information in this book are believed to be true and accurate at the date of publication. Neither the publisher nor the authors or the editors give a warranty, express or implied, with respect to the material contained herein or for any errors or omissions that may have been made.

Cover image © Alexey Moskvina / Alamy Stock Photo

Cover design by Samantha Johnson

Printed on acid-free paper

This Palgrave Macmillan imprint is published by Springer Nature

The registered company is Macmillan Publishers Ltd.

The registered company address is: The Campus, 4 Crinan Street, London, N1 9XW, United Kingdom

Foreword

In the 30 years or so since the publication of Sophie Watson and Helen Austerberry's *Housing and Homelessness: A Feminist Perspective* much has changed, but progress has been intermittent, often painfully slow and much remains the same. While reductionist interpretations still find occasional outlet, conceptually the depiction of homelessness has moved on to embrace its complexity as a 'process' rather than a 'condition', and the diverse composition of homeless populations are now more widely recognized. Homelessness is today identified as a major component of social exclusion and marginalization by most European countries and national homelessness 'strategies' proliferate, though some are more purposeful than others and all are invariably under-resourced. In recent years, the antipoverty programmes of the EU Commission have explicitly recognized homelessness as a priority: in 2013, as part of its Social Investment Package, the Commission published a 'guidance' document for Member States—*Confronting Homelessness in the European Union*—urging 'concerted action' and 'preventative measures'. Yet, apparently hidebound by subsidiarity and competency rules, the Commission continues to resist repeated resolutions from the European Parliament for an EU-wide homelessness 'strategy' directive. Policy developments, of which the shift from 'housing-ready' to 'housing-led' is the latest and perhaps most notable example, reflect a recognition of homeless people's agency and a concession to some control over their own lives—though

the process here, as elsewhere, is uneven with entrenched practices and convictions contributing too frequently to institutional and conceptual sclerosis: homeless people are still too often herded into overcrowded, badly serviced shelters, criminalized and incarcerated.

Beginning with Watson and Austerberry, over the past three decades, hegemonic male tropes with regard to homelessness have been challenged and modified (though not dislodged) by a growing recognition of gender as a critical determinant of homelessness. An increasing appreciation of the social origins of homelessness—specifically with regard to the role of patriarchal social relations, the sexual division of labour and the role of the traditional dyadic family model in marginalizing women in housing markets characterized by dwindling stocks of accessible and affordable accommodation—has taken root among researchers, policymakers and practitioners; it is now generally conceded that in the gendered terrain of homelessness women comprise a significant component, are disadvantaged relative to men, have gender-specific needs and that their advancement requires parity of treatment and opportunity as well as empowerment. Yet, as the caveat—‘not dislodged’—noted above regarding hegemonic male tropes implies, much needs to be done. Too frequently, with notable exceptions, gender today is merely imbricated—‘layered on’—rather than integrated and assimilated in homelessness research, policymaking and practice: ‘recognition and appreciation’ of female homelessness fall short of ‘explication and incorporation’; as a consequence, homeless women too often still remain invisible.

In recognition of these and other issues, the Women’s Homelessness in Europe Network (WHEN) was established in 2012. Alarmed by the ‘weakness’ and ‘incompleteness’ of the evidence base and by the lack of international comparative work, the Network’s members set themselves the task of promoting policy and academic research to facilitate the development of effective strategies for the prevention and reduction of homelessness among women. The present publication is a product of their endeavours.

Women’s Homelessness in Europe provides a robust assessment of the ‘state of knowledge’ on women’s homelessness in Europe, extends that knowledge base and identifies key areas of prospective research. With appropriate acknowledgement of extant work, the contributors set about nuancing interpretations, challenging myths, debunking shibboleths

and exposing embedded restrictive practices and attitudes which serve to obscure and mask not just our understanding of the dynamics of women's homelessness in Europe but sometimes its very presence. An examination of the characteristics of homeless women in the nineteenth and early twentieth centuries challenges the notion that contemporary women's homelessness marks a break with the past—it was as 'pervasive, hidden and disregarded' then as much as now; the interrelationships between housing and welfare systems, apparently robust when general (that is, predominantly male) homelessness is under consideration, are demonstrated to be less influential when gender comes into play. Of more importance are prevailing cultural constructs and images of women and their positions in society—images which are encoded in local and national enumeration systems. Data on homelessness rarely takes account of women and, even when it does, undercounts and fails to distinguish their diversity; statistical recording of homelessness embodies cultural norms and perpetuates attitudes which format deficient government policies and popular understanding.

The substantive coverage and analyses of salient dimensions of women's homelessness—domestic violence, health, family homelessness, chronic homelessness and homeless migrant women—bring to the fore commonly ignored complexities of women's homelessness and unacknowledged gender-specific needs. Without losing sight of their shared gender experience, these chapters humanize homeless women in revealing their diversity of circumstance and the reality of their all too frequent shoddy treatment, thereby exposing the gender-based inequalities that endure across Europe. The coherence of these analyses is aided by the adoption of an 'intersectionality approach'—a methodological and conceptual perspective which, paraphrasing the editors, recognizes that the problems faced by homeless women are compounded (intersected) by inequalities based, for example, on class, race and ethnicity, and also by the broader institutional structures that serve to reinforce women's subordinate position. Intersectionality recognizes that inequities are rarely if ever the result of single, distinct factors. Rather, they are the outcome of intersections of different social identities, power relations and experiences which create different patterns of vulnerability to homelessness; these patterns of vulnerability in turn should determine the support that individuals receive and define effective interventions.

As a marker of where we are at and as a platform for moving forward, this book succeeds admirably. At a time when homelessness, including women's homelessness, is rising alarmingly in a Europe in thrall to neoliberal politics and economic austerity, the challenges identified here for further research are stark: the development and adoption of refined typologies and effective enumeration methodologies to capture the scope and diversity of homelessness among women; comparative primary research to reveal subjectivities of the lived experiences of homeless women together with analyses linking women's homelessness with the broader structures of power and inequality to reveal the dynamics of the journey into, through and out of homelessness; contesting the prevailing cultural images of patriarchal male hegemony and refuting the growing medicalization and criminalization of the homeless condition; and, we might add, the development of an introspective awareness of the challenges thrown up by the 'trans' and 'inter' of lesbian, gay, bisexual, transgender and intersexed social and corporeal identities to prevailing notions of gender as 'female/male binary'. As this volume so strikingly demonstrates, there is indeed much to be done.

Joe Doherty
Professor Emeritus,
University of St Andrews, Scotland, UK

Acknowledgements

This book has emerged from the work of the Women's Homelessness in Europe Network (WHEN), which was established in 2012 to promote and develop academic scholarship on women's homelessness in Europe (www.womenshomelessness.org). WHEN has a membership of 16 researchers of homelessness from 12 European countries and is co-directed by Dr. Paula Mayock (School of Social Work and Social Policy, Trinity College Dublin) and Joanne Bretherton (Centre for Housing Policy, University of York). We are grateful to the Irish Research Council for the funding awarded in 2011 under its 'New Ideas' scheme, which enabled the establishment of WHEN. Since that time, WHEN has received funding from the University of York and from the Dublin Region Homeless Executive. We are grateful for this funding, which has helped to support the work of the network.

We wish to express special thanks to our contributors for their commitment to this publication and for their work more broadly in relation to WHEN. We also want to thank Pascal DeDecker, Evelyn Dyb and Katalin Szoboszlai, who have made valuable contributions to the work of the Network. Finally, we would like to thank our respective universities for allowing time and resources given to the book and particularly our colleagues, friends, families and partners for their continued support in bringing this book to publication.

Contents

1 Introduction	1
Joanne Bretherton and Paula Mayock	
Part I Historical Legacies, Cultural Images and Welfare States	13
2 Women's Homelessness: A Historical Perspective	15
Eoin O'Sullivan	
3 Cultural Images and Definitions of Homeless Women: Implications for Policy and Practice at the European Level	41
Cecilia Hansen L�fstrand and Deborah Quilgars	
4 Women's Homelessness and Welfare States	75
Joanne Bretherton, Lars Benjaminsen, and Nicholas Pleace	

Part II	Issues, Challenges and Solutions	103
5	Exclusion by Definition: The Under-representation of Women in European Homelessness Statistics Nicholas Pleace	105
6	Women's Homelessness and Domestic Violence: (In)visible Interactions Paula Mayock, Joanne Bretherton, and Isabel Baptista	127
7	The Health of Homeless Women Judith Wolf, Isobel Anderson, Linda van den Dries, and Maša Filipovič Hrast	155
8	Mothers Who Experience Homelessness Linda van den Dries, Paula Mayock, Susanne Gerull, Tessa van Loenen, Bente van Hulst, and Judith Wolf	179
9	Long-term and Recurrent Homelessness Among Women Nicholas Pleace, Joanne Bretherton, and Paula Mayock	209
10	Migrant Women and Homelessness Magdalena Mostowska and Sarah Sheridan	235
11	Conclusions Paula Mayock and Joanne Bretherton	265
Index		287

Notes on the Contributors

Isobel Anderson is Chair in Housing Studies and Associate Dean for Research in the Faculty of Social Sciences at the University of Stirling, Scotland. She has research, teaching and doctoral supervision interests in housing policy and governance, inequality and social exclusion, homelessness, health and well-being, and international comparisons. Isobel was a founder of the European Network for Housing Research (ENHR) working group on Welfare Policy, Homelessness and Social Exclusion, which she jointly coordinated during 2003–2013, and is a member of WHEN. She is also a member of the International Advisory Committee of the *European Journal of Homelessness* and a board member of Homeless Action Scotland.

Isabel Baptista is Senior Researcher at CESIS—Centro de Estudos para a Intervenção Social—with 20 years' research experience in poverty and social exclusion, and particular expertise in homelessness. She has also extensive research experience in the area of domestic violence. She represents Portugal in the European Observatory on Homelessness under the auspices of FEANTSA¹ and is a member of the editorial team of the *European Journal of Homelessness*. She is also a member of the European Social Policy Network (ESPN). She participated in the inter-agency team which prepared the first National Homelessness Strategy in Portugal, approved in 2009. She has coordinated and participated in several research projects—at the local, national and European level—on the topic of domestic violence. She has also worked extensively with service provid-

¹ FEANTSA—European Federation of National Organisations Working (in English); Fédération Européenne des Associations Nationales Travaillant avec les Sans-Abri (in French).

ers and local authorities in the implementation and assessment of local strategies to fight domestic violence.

Lars Benjaminsen is a researcher at the Danish National Centre for Social Research and is, since 2006, a member of the European Observatory on Homelessness under the auspices of FEANTSA. He is a sociologist and completed his PhD at the Department of Sociology, University of Copenhagen. Dr. Benjaminsen's research fields are social exclusion and interventions for socially marginalized people. He has conducted five national counts of homelessness in Denmark and took part in the evaluation of the Danish national homelessness strategy. He is the author of the intervention manuals for the second stage of the Danish homelessness programme, a national study of the addiction treatment system, a study of material and social deprivation among poor people, and a study of the family background of socially marginalized people in Denmark.

Joanne Bretherton is a homelessness scholar based at the University of York. Internationally, she co-directs WHEN and was a visiting fellow in homelessness at Nagoya Chukyo University, Japan. She has published widely on homelessness law, Housing First, social enterprises and homelessness, employment services and education for homeless people and Sanctuary Schemes for women, whose homelessness is linked to domestic violence. She has directed research for several major homelessness charities in the UK and Ireland, the Scottish Government, the Joseph Rowntree Foundation and co-directed research for the Economic and Social Research Council (ESRC) and UK central government departments.

Susanne Gerull was born 1962 in Berlin and is a trained social worker. She has been working with homeless people and people threatened by evictions for 15 years in two social welfare offices in Berlin, Germany. Since the conferral of her doctorate (a dissertation about the prevention of homelessness) at the Free University of Berlin, she has been working as a social scientist on a freelance basis for five years. Since 2008, she has been Professor for Social Work at the Alice Salomon University of Applied Sciences in Berlin with a focus on poverty, unemployment, homelessness and low-threshold social work. She is a member of WHEN.

Maša Filipovič Hrast is a researcher and Associate Professor at the Faculty of Social Sciences, University of Ljubljana. Her research topics are social policy, housing policy and social inclusion issues. The emphasis of her research is on position of vulnerable groups, their living and housing situations and their inclusion in society. She is a member of the sociology department and lectures at the undergraduate and postgraduate levels. She has been involved in several international and national research projects linked to housing and homelessness.

She has also been a member of different networks, including the European Network of Experts on Gender, Social Inclusion, Health and Long Term Care, the European Observatory on Homelessness and WHEN.

Cecilia Hansen Löfstrand is an Associate Professor of Sociology and Senior Lecturer at the Department of Sociology and Work Science, University of Gothenburg. Her research concerns the welfare state and how organizations and individuals are governed and policed. More specifically, her research interests include housing and homelessness, victimization and support work, as well as the demand for, and provision of, public and private sector policing services. She conducts research on the establishment and governance of quasi-markets for homeless accommodation and policing services in Sweden, with the purpose of exploring the quest for organizational legitimacy among companies in these quasi-markets.

Paula Mayoock is an Assistant Professor at the School of Social Work and Social Policy, Trinity College Dublin. Her research focuses primarily on the lives and experiences of marginalized youth and adult populations, covering areas such as homelessness, drug use and drug problems. Paula is a National Institute on Drug Abuse (NIDA) INVEST Post-Doctoral Fellow (2006–2007) and an Irish Research Council (IRC) Research Fellow (2009–2010). She is the founder and co-director of WHEN and the author of numerous articles, book chapters and research reports. Paula is also Assistant Editor to the international journal *Addiction*.

Magdalena Mostowska is a researcher and an academic teacher at the University of Warsaw in Poland. Her research has focused on issues of homelessness and migration, including intra-EU migrants in rough sleeping situations in large European cities, their survival strategies, social networks, changing institutional context, regulations in the public space and interactions with services. She is also interested in the qualitative research methods and their ethical implications, ethnographic methods, biographical interviewing and discourse analysis. She has started a research project that aims to examine the dynamics of women's homelessness in Poland.

Eoin O'Sullivan is Professor in Social Policy, Head of the School of Social Work and Social Policy, Trinity College Dublin and Fellow of Trinity College. His research explores comparative dimensions of homelessness, and the history of the institutionalization of marginal populations in twentieth century Ireland. He is lead editor of the *European Journal of Homelessness* and a member of the European Observatory on Homelessness.

Nicholas Pleace has been researching homelessness at the University of York since the mid-1990s. Since 2010 Nicholas has been part of the core research team for the European Observatory on Homelessness, operating under the auspices of FEANTSA. He is on the Editorial Committee for the *European Journal of Homelessness*. Nicholas led the international review of the Finnish national homelessness strategy in 2014–2015 and is the author of the *Housing First Guide Europe*. Nicholas has published and presented very widely on homelessness and worked with the UK central and national governments, DIHAL (French Government), OECD, the European Commission, the Joseph Rowntree Foundation and UK homelessness charities. His previous publications include *Homelessness and Homeless Policies in Europe: Lessons from Research* (2010).

Deborah Quilgars is a Senior Research Fellow at the Centre for Housing Policy with 25 years of housing research experience. She has undertaken extensive research on homelessness and housing-related support for vulnerable and marginalized households and has directed projects on provision for women fleeing domestic violence for the Department of Communities and Local Government, England and the Greater London Authority. Deborah has undertaken considerable work at the European level, on the topics of home ownership, housing provision for vulnerable groups and homelessness. Deborah represented the UK in the European Observatory on Homelessness and is a member of WHEN.

Sarah Sheridan is a social researcher dedicated to the topic of homelessness and housing instability. Her PhD research was a qualitative longitudinal study of women experiencing homelessness in Ireland, during which time she was based in the School of Social Work and Social Policy, Trinity College Dublin. Prior to this, she worked as researcher on a biographical study of homeless women and contributed to the design, fieldwork, analysis and dissemination of the research. She has a particular interest in how homelessness and housing instability interacts with other issues such as domestic violence, criminal justice contact and migration, and she has co-authored several articles related to these topics. Her methodological interests include qualitative methods, biographical interviewing, ethnography and qualitative longitudinal research. Sarah is currently Research Officer at Focus Ireland, a voluntary organization that supports and advocates for those individuals experiencing homelessness.

Linda van den Dries has a Masters in Child Psychology and holds a PhD from Leiden University. Her PhD thesis examined the development of former foster and former orphanage children adopted from China. She works as a Senior Researcher at Impuls—the Netherlands Centre for Social Care Research at the Radboud University Medical Centre. Her research focuses on socially vulnerable people and their service needs.

Bente van Hulst studied psychology at Tilburg University in the Netherlands. She passed her Master's degree with merit in 2012. From 2012 until 2014 she was involved in several studies of homelessness at Impuls—the Netherlands Centre for Social Care Research at the Radboud University Medical Centre, in Nijmegen. She has also volunteered as a Dutch teacher for foreigners and currently teaches at Fontys Nursing School in Eindhoven, the Netherlands.

Tessa van Loenen holds a Masters in health sciences with a specialization in policy and the organization of health care. After completing her Masters, she started her PhD research at the Scientific Institute for Quality of Healthcare (IQ healthcare) at the Radboud University Medical Center, Nijmegen, in collaboration with the National Institute of Public Health and the Environment (RIVM). Her PhD thesis (2016) focuses on the organization of primary care in Europe and how this relates to avoidable hospitalizations and emergency department utilization. Tessa works as a scientific researcher at Impuls, the Netherlands Centre of Social Care Research at Radboud University Medical Centre, in Nijmegen, on several projects targeting care for socially vulnerable people.

Judith Wolf is Professor of Social Care at Radboud University Medical Centre, Nijmegen. She is head of Impuls—the Netherlands Center for Social Care Research at Radboud University Medical Centre, director of the Academic Collaborative Centre for Shelters and Recovery and director of the Academic Collaborative Centre for Public Mental Health. Judith Wolf has more than 30 years' experience in designing and conducting both academic and applied research on socially vulnerable populations (including homeless people and abused women) and on the social and health care services needed by these groups. She was principal investigator of several large-scale, multi-site research projects in the Netherlands; a homeless cohort study in the four largest cities in the Netherlands (2010–2014), two randomized controlled trials on the effects of critical time intervention in women's shelters and low threshold facilities for the homeless (2009–2013), and a study in five municipalities on predictors of tenant evictions for rent arrears and profiles of high risk households for eviction (2010–2014).

List of Figures

Fig. 2.1	Male and female casuals in the workhouses of Ireland, 1882–1915	28
Fig. 5.1	Women’s homelessness as a proportion of all homelessness in 13 EU Member States	119

List of Tables

Table 3.1	ETHOS definition of homelessness	49
Table 3.2	Extent of women's homelessness in selected European countries	51
Table 7.1	Health care systems in selected European countries	166

1

Introduction

Joanne Bretherton and Paula Mayock

The Growing Visibility of the ‘Unaccommodated Woman’

Homelessness is the greatest manifestation of poverty and injustice in the economically developed world. A 2015 review of the state of housing exclusion in Europe reported that while evidence was variable, signs of increased homelessness were present almost everywhere, with only some Scandinavian countries reporting low levels or falling rates (Domergue et al. 2015). Another recent comparative European study has added to existing evidence about the interrelationships between poverty and housing insecurity, while investigating the links between homelessness and eviction. Kenna et al. (2016) found the link between evictions and

J. Bretherton (✉)
University of York, York, UK
e-mail: joanne.bretherton@york.ac.uk

P. Mayock
Trinity College Dublin, Dublin, Ireland

© The Author(s) 2016
P. Mayock, J. Bretherton (eds.), *Women's Homelessness in Europe*,
DOI 10.1057/978-1-137-54516-9_1

homelessness to be clearly related to the availability of support and resources, namely personal, social and financial, as well as available options for rapid rehousing. Inadequate welfare protection systems can exacerbate this predicament, particularly for vulnerable people, and for those with weak or no functional family ties (Kenna et al. 2016).

Historically, there has been recognition that women's experiences of homelessness differ from those of men and that there can be an important gender dimension to the problem of homelessness (Edgar and Doherty 2001; Watson and Austerberry 1986). However, there is a paucity of research on women's homelessness throughout Europe and the literature has only recently begun to include women's experiences (Baptista 2010; Mayock and Sheridan 2012; Moss and Singh 2015). While the 'invisibility' of homeless women, within both popular and academic portrayals of homelessness, has been recognized for some time (May et al. 2007; Wardhaugh 1999; Watson 1999) very little robust research has specifically focused on women. Women's homelessness, according to Wardhaugh (1999), has remained largely invisible because of the particular stigma attached to the 'unaccommodated woman'. This stigma centres on perceptions of displacement from an acceptable role as a woman within European and Western cultural norms. A woman who is not a wife, mother or carer, regardless of her other characteristics, represents a form of deviance, even if she may be simultaneously viewed as a victim and in need (Wardhaugh 1999; see Chap. 3, this volume). Homeless women therefore 'disappear' into the institutional spaces of homeless hostels and frequently rely on precarious arrangements with acquaintances, friends or family to keep a roof over their head (Pleace et al. 2008; Shinn et al. 1998); preferring to hide themselves from public view, they only rarely move into the public spaces of street homelessness (Wardhaugh 1999).

Women's homelessness encompasses other extreme forms of poverty, particularly child poverty, largely because much of what we talk about when we discuss women's homelessness is lone female parents with dependent children. Edgar and Doherty (2001) provided an important contribution to the enhancement of an understanding of the characteristics and experiences of women facing homelessness in Europe, adopting a country by country approach. This work broke new ground in that it was the first book to specifically examine female homelessness across

Europe. It highlighted how the gender dimensions of homelessness were neglected throughout Europe, particularly the experiences of women facing homelessness. As homeless women were less visible than men sleeping rough or using emergency accommodation, they were simply assumed to be a minor social problem, rather than actually being investigated.

The Need to Build a European Evidence Base on Women's Homelessness

This collection aims to build upon earlier research, adopting a comparative pan-European approach. The goal of the volume is to make a critical contribution in terms of assessing and extending the knowledge base on women's homelessness. This book is the result of the first international collaboration between leading homelessness researchers who have cooperated through the work of the Women's Homelessness in Europe Network (WHEN) to produce a comparative analysis of women's homelessness across Europe. WHEN, which was founded in 2012 (www.womenshomelessness.org) and currently has a membership of 16 academics from 12 European countries, was established to enhance understanding of issues at the core of women's homelessness and foster international collaborative research on gender dimensions of homelessness.¹

European policy debates about homelessness, particularly in more recent years, are more likely to acknowledge that homelessness among women is a distinct and separate issue. An increased interest in women's homelessness is evident in national and pan-European responses to homelessness. The European Parliament resolution of 14 April 2016, on meeting the antipoverty target in light of increasing household costs, directly addressed the issue of homelessness among women. The resolution called on the need for more research in this field and on action to be taken by the European Commission, the European Institute for Gender Inequality and its Member States:

¹WHEN is co-directed by the editors of this collection, Paula Mayock (Trinity College, Dublin) and Joanne Bretherton (University of York).

[The European Parliament] *Calls on the Commission, the European Institute for Gender Equality (EIGE), and the Member States to undertake research into female homelessness and its causes and drivers, as the phenomenon is captured inadequately in current data; notes that gender-specific elements that ought to be taken into account include gender-based economic dependency, temporary housing, or avoidance of social services.* (European Parliament 2016, Key Recommendation 39)

FEANTSA, the European Federation of National Organisations working with homeless people, has called for the specific needs of homeless women at risk of domestic and gender-based violence to be integrated into strategic responses to gender-based violence, noting that:

Women who are homeless have a number of severe, interrelated and exceptionally complex problems which contribute to their homelessness and make recovery a challenge. The experience of homelessness can carry different implications across the gender spectrum. This is why homelessness strategies must explicitly make room for women's homelessness. There is already a considerable body of existing evidence around gender perspectives on homelessness and how they can critically influence policy and help to ensure that services work appropriately and effectively to meet the needs of homeless women. (FEANTSA 2015, p. 5)

Echoing these calls for greater and explicit attention to women's homelessness, a recent review of the Finnish homelessness strategy, which is increasingly regarded as setting the standard for a coordinated and comprehensive strategy for preventing homelessness, concluded:

Homelessness among women is clearly an issue in Finland, women are represented in the homeless and long-term homeless populations and experiencing all the potentially harmful effects of homelessness. Ensuring that this social problem is accurately mapped and understood, which may mean using specific methodologies for understanding women's homelessness and also ensuring that homelessness services exist that cater effectively for women's needs, lies at the heart of ensuring that this dimension of homelessness is fully addressed. (Pleace et al. 2015, pp. 70–71)

The exact extent of women's homelessness across Europe is not known but there are almost universal reports of relative increases in the proportion of women using homelessness services and living rough. The

degree to which there is undercounting of homeless women living in precarious, inadequate and sometimes unsafe temporary arrangements with acquaintances, friends and relatives is only beginning to become apparent as homelessness research starts to look in more detail at women's experiences.

Available data, while showing upward trends, are primarily based on the most visible forms of homelessness—that is, individuals who are rough sleeping and those residing in homelessness hostel accommodation. Variations in definition and in measurement techniques produce marked differences in levels, which may be generated by methodological inconsistencies and shortfalls, alongside any substantive differences in the number or demographics of those who are homeless. A 2014 review of the extent and quality of statistical knowledge on homelessness across 15 EU Member States reported that 12 per cent to 38 per cent of homelessness was being experienced by women, but again raised serious questions about the quality and comparability of current data (Busch-Geertsema et al. 2014). Challenges exist, but the indications are clearly that women's homelessness—even when enumeration is restricted to metrics that fail to account for hidden or concealed homelessness and has other flaws related to an over-reliance on point-in-time methodology—is rising across Europe (Baptista et al. 2012; Busch-Geertsema et al. 2014).

The task of improving data is part of the bigger set of challenges that this book seeks to explore. Addressing the inadequacies of the enumeration of homeless women is the point at which new and better research needs to start in gaining a fuller understanding of this social problem. As the contributions to this book demonstrate, women are under-represented in homelessness statistics and the gender dimensions of homelessness are generally under-researched. Homeless women are often not separately enumerated, including the numbers of women present in concealed households (Pleace and Bretherton 2013). As discussed throughout this collection, women's homelessness is typified by this 'concealment' and that is a challenge for effective enumeration and social scientific research. This volume highlights the gaps in evidence and methodological challenges that need to be addressed, and the need to recognize this social problem and seek to better understand it could hardly be clearer.

About the Book

This book does not aim to provide a comprehensive guide to each and every country in Europe on the topic of women's homelessness. Rather, it is an edited collection that attempts to resolve the limitations of country-specific accounts of women's homelessness by providing a collection that is grounded in comparative analyses that are conversant with the available empirical research. The collection examines the nature and meaning of women's homelessness, relying on a multidisciplinary, comparative approach, and examines several of its most significant dimensions, including: domestic violence, motherhood, family homelessness, health, long-term (recurrent and sustained) homelessness, and the specific situations and experiences of migrant women.

The book asks critical questions about the current state of knowledge on the lives and situations of homeless women throughout Europe. There are discussions of the methodological traditions within the existing literature and the images used in discourses on homeless women. The book explores the extent to which these images and discourses reflect the reality of the lives of homeless women and how women's homelessness is 'managed' strategically by governments and by policy communities across Europe.

Comparative research at a European level allows new insights into how wider socio-political, economic and cultural contexts impact on women's homelessness. Different cultural attitudes to female roles, variations in opportunities, economic conditions, education and welfare systems all potentially influence the extent to which the experience of homelessness can be differentiated by gender. Perhaps most importantly, 'comparative analyses can make visible taken-for-granted assumptions and underlying ideologies; reveal the arbitrariness of particular categorisations and concepts; and suggest new innovative solutions' (Salway et al. 2011, p. 2).

There are also challenges associated with cross-national comparison, irrespective of the topic or 'problem' chosen for detailed analysis. In relation to homelessness specifically, European countries subscribe to different definitions and the measurement of homelessness is notoriously fraught (Busch-Geertsema 2010). Nonetheless, such empirical challenges present opportunities as well as risks. The limitations in current data also reflect broader ambivalences and/or a failure on the part of academic

and policy communities to engage with the multitude of pressing issues facing some of the most marginalized women in societies across Europe. This collection embraces this challenge and, in so doing, aims to promote critical, social and scientific cross-national perspectives on several key dimensions of women's homelessness. Throughout Europe the experiences and circumstances of women have received far less attention within homelessness research compared to those of men, and this book represents an attempt to correct that situation.

The bulk of the evidence presented in this book is based on research conducted in countries from across the EU. European research and data on women's homelessness are, however, often limited and, for this reason, the authors also draw upon knowledge and evidence from further afield, particularly from the extensive evidence bank available in the USA. Inevitably, the scope and depth of research into any given area differs between countries and this volume is no exception. The nature and extent of homelessness research also varies at a European level: some countries, such as the UK, Ireland, Denmark and France, conduct relatively high levels of homelessness research, whereas data and research from Central, Eastern and Southern Europe is more limited. While there have been recent improvements, for example, in the enumeration of homelessness in Italy, Poland and Spain, this is often at quite a basic level which means that research on specific aspects of homelessness, including women's experiences, is still emergent. Some countries, such as Germany, tend to explore homelessness and collect data at a regional or municipal level, reflecting the policy level at which homelessness is responded to, whereas the coordinated national strategies in countries like Denmark, Finland, Ireland and the UK tend to have dedicated data collection and far more extensive bodies of research evidence.

This book is separated into two parts. Part One, *Historical Legacies, Cultural Images and Welfare States*, provides the reader with a contextual framework for understanding contemporary women's homelessness across the EU. It begins with a historical analysis of the portrayal of homeless women. In Chap. 2, O'Sullivan argues that women were homeless in large numbers in the nineteenth and twentieth centuries, but were rendered invisible as they largely utilized a range of female-only services that were usually not formally designated as services for the homeless. The chapter's

conclusion presents lessons from the past that resonate with the present, in that how we define homelessness remains contested and measuring homelessness by only counting those individuals residing in homelessness facilities results in an ‘emaciated and partial understanding of homelessness’ (p. 17). In Chap. 3, Hansen Löffstrand and Quilgars consider how ideas about gender and homelessness impact on homelessness policies and services, and thus the situations of homeless women across Europe. Here, the power of culturally specific definitions and images of homelessness is argued as being significant. Access to homelessness accommodation and exits out of homelessness appear to be conditional upon the perceived conduct of women in many European countries.

The final chapter of this part explores the relationships between European welfare systems and women’s experiences of homelessness. Chapter 4 opens by considering how previous research has maintained that welfare systems broadly determine the nature and extent of homelessness. However, Bretherton et al. argue that this earlier research is based on limited evidence and has neglected to examine gender. The role that welfare systems play in women’s homelessness is complex. For instance, welfare states can support a woman with children, effectively ‘protecting’ her from homelessness, but they may also remove children from homeless women and deliver highly variable supports to those lone women who are homeless. Further, welfare systems also reinforce wider patterns of cultural and political bias centred around gender.

Part Two of the book, *Issues, Challenges and Solutions*, focuses specifically on several of the most significant dimensions of women’s homelessness. This part begins with a theme recurrent throughout this collection, that of enumeration. In Chap. 5, Pleace explores the argument that European systems for enumerating homelessness are undercounting homeless women. Furthermore, the chapter argues that since women sleeping rough stay out of sight for reasons of safety and are more likely to respond to homelessness by using ‘sofa surfing’ arrangements than approaching services, women are undercounted. Pleace concludes that widespread failures to recognize that gender differentiates the homeless experience have misrepresented homelessness as a largely ‘male’ phenomenon.

The book then turns to one of the most documented aspects of homelessness among women, the relationships between domestic violence and women's homelessness. Chapter 6 considers the role of domestic violence in women's homelessness in the European context, with a comparative focus on the UK, Ireland and Portugal. Mayock et al. start by discussing existing definitions of homelessness and domestic violence. They then examine the influence of these definitions on dominant conceptualizations of—and assumptions about—the relationship between homelessness and violence, highlighting the utility of intersectionality as a framework for exploring women's experiences of both domestic violence and homelessness and their relationship with broader structures of inequality. Existing research documenting a relationship between domestic violence and homelessness is reviewed and analysed. In the latter part of the chapter, barriers to women's access to domestic violence and homelessness services, as well as the disconnect between the two service sectors, are considered.

Research evidence from across the globe indicates that maintaining good health and accessing health services is a major challenge for homeless women. In Chap. 7, Wolf et al. examine this issue, arguing that it is an under-researched area that has received very little attention in Europe. This chapter presents an overview of the available international evidence on the health of homeless women and the issues that influence their access to health services in different national health and welfare systems. The chapter demonstrates that the effectiveness with which the healthcare needs of homeless women are met depends to a large degree on enabling factors such as the nature of national health services and their general accessibility. However, there remains a lack of relevant data and research on the specific barriers that homeless women may face in accessing healthcare.

Chapter 8 examines family homelessness in Europe, paying particular attention to women who are mothers and living in situations of homelessness, either with or without their children in their care. Here, van den Dries et al. highlight the diversity of family homelessness and the extent to which families headed by a single mother are represented within populations of homeless families in Europe. Routes into homelessness and the key characteristics and experiences of homeless mothers are discussed.

The focus then shifts to a discussion of the challenges associated with parenting within the context of homelessness and this is followed by an overview of service provision for mothers experiencing homelessness.

The current evidence base indicates that long-term and recurrent homelessness is experienced by a minority of homeless people who are characterized by high support needs. Until recently, long-term and recurrent homelessness has been seen as a highly gendered social problem, disproportionately experienced by men, with relatively little attention paid to women experiencing repeat or prolonged homelessness. In Chap. 9, Pleave et al. argue that there is growing evidence that women do experience long-term and recurrent homelessness, but in a different way from men. Women with high and complex support needs often use precarious arrangements or forms of hidden or concealed homelessness on a sustained and repeated basis. Furthermore, these women are experiencing the most damaging forms of homelessness and at higher rates than has been previously recognized.

Completing Part Two of the volume is a chapter that discusses one of the most pressing issues in Europe today, that of migration. In Chap. 10, Mostowska and Sheridan discuss homelessness among migrant women across Europe, arguing that, to date, very little empirical research has been dedicated to, or inclusive of, the experiences of migrant homeless women. The authors critically examine potential areas of intersection in the research literature on homelessness, migration and gender, allowing for a discussion that attempts to identify the multiple, interrelated processes and factors that propel migrant women into homelessness or housing instability. In light of the scarce evidence available on this group, the chapter also posits possible reasons for the apparent 'gender blindness' that exists across the homelessness and migration literature, in particular.

In the final chapter the key issues and themes arising from the contributions to the book are discussed. The book concludes by identifying possible directions for future research on women's homelessness in Europe.

This edited collection has been constructed in a format that allows each individual contribution to be read as a stand-alone chapter. Each chapter explores a definitive core issue at the heart of women's homelessness. This means that, where necessary, some overlap occurs between chapters but, equally, cross-referencing throughout the book should enable the reader

to move smoothly through the collection and access topics and issues that are of particular interest. The book marks a critical contribution in terms of assessing and extending the knowledge base on women's homelessness utilizing the knowledge and experience of Europe's leading researchers on the subject. We hope readers find this a useful addition to an important subject and are encouraged to build upon this work to further develop knowledge and understanding of women's homelessness.

References

- Baptista, I. (2010). Women and homelessness. In E. O'Sullivan, V. Busch-Geertsema, D. Quilgars, & N. Pleace (Eds.), *Homelessness research in Europe* (pp. 163–185). Brussels: FEANTSA.
- Baptista, I., Benjaminsen, L., Pleace, N., & Busch-Geertsema, V. (2012). *Counting homeless people in the 2011 housing and population census*. Brussels: Feantsa.
- Busch-Geertsema, V. (2010). Defining and measuring homelessness. In E. O'Sullivan, V. Busch-Geertsema, D. Quilgars, & N. Pleace (Eds.), *Homelessness research in Europe* (pp. 19–40). Brussels: FEANTSA.
- Busch-Geertsema, V., Benjaminsen, L., Filipovič Hrast, M., & Pleace, N. (2014). *Extent and profile of homelessness in European Member States: A statistical update*. Brussels: FEANTSA.
- Domergue, M., Derdek, N., Vaucher, A. C., de Franclieu, L., Owen, R., Robert, C., et al. (2015). *An overview of housing exclusion in Europe*. Paris: Foundation Abbe Pierre.
- Edgar, B., & Doherty, J. (2001). *Women and homelessness in Europe. Pathways, services and experiences*. Bristol: The Policy Press.
- European Union: European Parliament. (2016). *European Parliament resolution on meeting the antipoverty target in the light of increasing household costs*, 14th April 2016, P8_TA-PROV(2016)0136. Retrieved June 16, 2016, from <http://www.europarl.europa.eu/sides/getDoc.do?pubRef=-//EP//TEXT+TA+P8-TA-2016-0136+0+DOC+XML+V0//EN>
- FEANTSA. (2015). *The links between violence against women and homelessness: Background paper*. Brussels: FEANTSA.
- Kenna, P., Benjaminsen, L., Busch-Geertsema, V., & Nasarre-Aznar, S. (Eds.). (2016). *Pilot project—Promoting protection of the right to housing—Homelessness prevention in the context of evictions*. Brussels: European Commission.

- May, J., Cloke, P., & Johnsen, S. (2007). Alternative cartographies of homelessness: Rendering visible British women's experiences of 'visible' homelessness. *Gender, Place & Culture: A Journal of Feminist Geography*, 14(2), 121–140.
- Mayock, P., & Sheridan, S. (2012). *Women's 'Journeys' to homelessness: Key findings from a biographical study of homeless women in Ireland*. Women and Homelessness in Ireland, Research Paper 1. Dublin: School of Social Work and Social Policy and Children's Research Centre, Trinity College Dublin.
- Moss, K., & Singh, P. (2015). *Women rough sleepers in Europe: Homelessness and victims of domestic abuse*. Bristol: Policy Press.
- Pleace, N., & Bretherton, J. (2013). *Measuring homelessness and housing exclusion in Northern Ireland: A test of the ETHOS typology*. Belfast: Northern Ireland Housing Executive.
- Pleace, N., Culhane, D. P., Granfelt, R., & Knutagård, M. (2015). *The Finnish homelessness strategy: An international review*. Helsinki: Ministry of the Environment.
- Pleace, N., Fitzpatrick, S., Johnsen, S., Quilgars, D., & Sanderson, D. (2008). *Statutory homelessness in England: The experience of families and 16–17 year olds*. London: Department for Communities and Local Government.
- Salway, S. M., Higginbottom, G., Reime, B., Bharj, K. K., Chowbey, P., Foster, C., et al. (2011). Contributions and challenges of cross-national comparative research in migration, ethnicity and health: Insights from a preliminary study of maternal health in Germany, Canada and the UK. *BMC Public Health*, 11(514), 1–13.
- Shinn, M., Weitzman, B. C., Stojanovic, D., Knickman, J. R., Jimenez, L., Duchon, L., et al. (1998). Predictors of homelessness among families in New York city: From shelter request to housing stability. *American Journal of Public Health*, 88(11), 651–1657.
- Wardhaugh, J. (1999). The unaccommodated woman: Home, homelessness and identity. *The Sociological Review*, 47(1), 91–109.
- Watson, S. (1999). A home is where the heart is: Engendering notions of homelessness. In P. Kennet & A. Marsh (Eds.), *Homelessness: Exploring new terrain* (pp. 81–100). Bristol: Policy Press.
- Watson, S., & Austerberry, H. (1986). *Housing and homelessness: A feminist perspective*. London: Routledge and Kegan Paul.

Part I

**Historical Legacies, Cultural Images
and Welfare States**

2

Women's Homelessness: A Historical Perspective

Eoin O'Sullivan

Introduction

This chapter provides a brief historical analysis of homelessness among women, focusing primarily on the situation in the English speaking countries of the USA, the UK and Ireland, but drawing selectively on material from other European countries. A review of the contemporary literature on homelessness suggests that homelessness among women is part of the phenomenon of the 'new homeless' that emerged in the early 1980s, when women, children and families, and particularly in the USA, African Americans were recorded as homeless in unprecedented numbers. This profile contrasted with the 'old homeless', which comprised primarily of middle-aged white men residing in decaying and derelict city-centre locations referred to as 'skid rows' (Rossi 1990; Shlay and Rossi 1992). Stoner (1983, p. 566; see also Hartmann McNamara and Flagler Whitney 2008)

E. O'Sullivan (✉)
Trinity College Dublin, Dublin, Ireland
e-mail: tosullvn@tcd.ie

emphasizes this notion, stating in the early 1980s that '[w]orkers with the homeless report that more women, elderly, and young people—particularly black women and members of other minority groups—have slipped into a population once dominated by older alcoholic white men'. However, a closer reading of texts and reports from the middle of the nineteenth century onwards demonstrates that while women were recognized as homeless, their homelessness was viewed differently to the homelessness of men. More generally, Bassuk and Franklin (1992) argue that there is much greater continuity in the characteristics of homeless people and the causes of their homelessness than the 'new homelessness' literature would suggest. To try to understand why women's homelessness was viewed differently, this chapter will explore constructions of female homelessness and service provision in the twentieth century.

The chapter tentatively suggests that, objectively, women were homeless in large numbers in the nineteenth and twentieth centuries, not simply emerging in the late twentieth century, but rendered invisible as they largely utilized a range of female-only services that were usually not formally designated as services for the homeless. Rather than using the publically provided casual wards or privately delivered lodging houses that provided communal shelter-type accommodation, females utilized a range of other sites including convents, refuges and asylums. When investigators, for example, surveyed lodging houses, hostels and shelters providing accommodation for homeless people in England, Scotland and Wales in 1965, they found 32,000 beds for men and only 2600 for women (National Assistance Board 1966). By focusing their investigative attentions largely on accommodation services formally designated as 'services for the homeless', investigators and enumerators concluded that the majority of those deemed homeless were male. Females were thus rendered relatively invisible because of the research methodologies deployed in counting the homeless. This is not an original argument: Howard M. Bahr in his work on Skid Row in New York in the late 1960s and early 1970s argued that the 'definitions of homelessness used by sociologists have been operationalized in such a way that women, for all intents and purposes, are excluded' and 'if homeless people are defined as those who participate in facilities and institutions of skid row, the probability of encountering a woman is exceedingly low' (1973, p. 176). However, Bahr's observations were not

always heeded and many contemporary interpretations of homelessness suffer from conflating the nature and extent of homelessness with measuring activity in sites designated for the 'homeless'.

Arising from this methodological blindness, the small number of women found on skid row or in accommodation designated for the homeless were usually described in exotic terms, often in terms of their lack of domesticity and deviant sexuality (Martin 1987; Merves 1992). Over the nineteenth and twentieth centuries, economic and social pressures, particularly in a context of recurrent shortages of affordable accommodation, have generated homelessness among both men and women. However, the strategies adopted by women to escape literal homelessness were more diverse than those of males and, with a range of female-specific accommodation services available to them, often organized around protecting the virtue of females and the morals of society.

The chapter concludes that the lessons from the past resonate with the present. How we define homelessness remains contested and measuring homelessness by counting bodies in those facilities designed for the 'homeless' results in an emaciated and partial understanding of homelessness that fails to see homelessness as primarily a matter of employment and residential instability, with a range of hybrid institutions and sites utilized to manage this instability (Hopper 1990). This in turn can shape how we research and respond to homelessness. A distorted and skewed understanding of homelessness emerged from the 'skid row' studies of the 1950s and 1960s and this heavily pathologized portrayal of homelessness, with its population of drunken, deviant, damaged, disaffiliated males—supplemented by a small number of 'shopping bag ladies'—persisted among the public and policymakers well after the disappearance of skid rows.

The provision of communal accommodation in the form of 'massive congregate shelters as the cornerstone of homeless relief' (Hopper 1991, p. 16) has dominated policy responses to homelessness over the past two centuries. Indeed, in the early 1930s, Sutherland and Locke (1936) coined the term 'shelterization' to describe the negative consequences of placing people in such facilities when studying shelters for homeless people in Chicago. Shelters had their origins in the early nineteenth century and their emergence was in parallel with the construction of a range of other

institutions designed to manage the poor, including workhouses, prisons and a vast array of asylums and penitentiaries. The failure of these institutions to reform or rehabilitate, to desist or to deter was clearly evident by the end of the nineteenth century, but it was to take several decades before the majority of these massive mausoleums of misery gradually fell into disuse and disgrace (Scull 2015).

Shelters for the homeless have proven to be particularly resilient despite the shattered myth of homelessness as pathological, as demonstrated by Culhane and colleagues in the USA utilizing longitudinal data (see Culhane et al. 2007; Kuhn and Culhane 1998) and it is only recently that service provision has gradually begun to shift from warehousing the homeless to providing them with housing. Culhane and colleagues demonstrated that the popular image of homelessness as persistent and long term was evident for only a minority of those using homelessness services and that the majority of individuals, in fact, permanently exited homelessness after a relatively short period of time. Recent research on the age structure of contemporary homeless populations clearly demonstrates the structural basis for the majority of those who use homelessness services (Culhane et al. 2013). These data on the structure of homelessness and the impressive retention rates in rapid re-housing projects in North America and Europe, even for those with mental health and/or addiction issues (see for example, Aubry et al. 2015; Busch-Geertsema 2013), offer compelling evidence that services for the homeless that assume a pathological basis for homelessness are fundamentally flawed.

Homelessness Research and the Absence of Women

In his preface to one of the first detailed studies of homeless women in the USA, Theodore Caplow, one of the pioneers of 'Skid Row Research' (Pittenger 2012, p. 137), claimed that 'homeless women have been something of a sociological mystery'. He went on to suggest that the factors that explained male disaffiliation and homelessness should apply equally to females and that, consequently, the numbers of homeless women

should be as numerous as males; but he then asked 'where are they to be found?' (Caplow 1976, p. xvi). Caplow was not the first sociologist to pose this question. In one of the first social scientific studies of homelessness in the USA, the Rev. Frank Laubach, in his study of 100 homeless men, remarked that '[i]t is often asked why women do not become vagrants in as great numbers as men' (Laubach 1916, p. 71). He then went on to address this question, arguing that the explanation had three components:

The first is that they do become the female kind of vagrant, namely, prostitutes, in many instances. The second answer is that society will not tolerate in females the same kind of vagrancy that it will tolerate in men. The third is that perhaps most women do not have the same roving disposition as men. It has been men who have done most of the exploring in history, who have manifested most of the spirit of adventure and love of taking chances, and who have constituted the radical wing of society, while women have been domestic and conservative. It may be that *wanderlust* is allurements to which the male sex is most susceptible. (Laubach 1916, p. 71, emphasis in original)

For Golden (1992, p. 152), who documented a history of women's homelessness in the USA and Britain, the answer to the question posed by Caplow was that homeless women were indeed to be found but were labelled other than homeless as 'bums, drifters, criminals, and (of course) prostitutes'. A similar point was made by Broder (2002) in a study of Philadelphia in the nineteenth century, when she noted the critical importance of places where one searches for homeless women. This is because of the existence of institutions other than almshouses and municipal lodging houses, institutions that may not have explicitly stated that they provided for the homeless, but their residents were objectively homeless prior to entry to these settings. Similarly, Bloom (2005, p. 916), in a review essay on the history of homelessness in the USA, noted that if sources of data only include vagrancy dockets and police lodgings and do not incorporate 'almshouses, orphanages, and charities for women', then the research findings will be skewed towards an over-representation of single men, which then informs our construction of who the homeless are.

Social Science Research and Homelessness

The early social scientific work on homelessness, which was largely North American in origin, emerged at a particular period in the history of homelessness in the USA. An initial wave of research during the first few decades of the twentieth century focused on the transitory migrant workers, often known interchangeably as hobos, tramps and bums,¹ who travelled through the country seeking work. Then a second wave of social scientific work focused on the remnants of these hobos, tramps and bums, who were by then residing in decrepit areas of major cities known as skid rows (Metraux 1999; Schneider 2004). The titles of these early social scientific works reflect these foci, with titles such as Solenberger's (1911) *One Thousand Homeless Men*, Anderson's (1923) *The Hobo: The Sociology of the Homeless Man*, and Sutherland and Locke's (1936) *Twenty Thousand Homeless Men* being examples of the first wave of research, and Bahr's (1970) *Disaffiliated Man* and Bahr and Caplow's (1973) *Old Men Drunk and Sober* emblematic of the second.

In these texts, the exclusion of women was based on the simple proposition that women were not to be found in either hobohemia or skid row. For Nels Anderson, in his description of hobohemia, 'one of its most striking characteristics is the almost complete absence of women and children; it is the most completely womanless and childless of all the city areas. It is quite definitely a man's street' (1923, p. 34). Some 50 years later, Wiseman (1970, p. 4) claimed that the inhabitants of Skid Row in San Francisco 'are men alone', while Samuel E. Wallace, in his classic study of Skid Row in the 1960s similarly noted that '[i]n the early history of skid row and up through the Great Depression there were some women and girls not only living in the skid row community, but also tramping the roads. Today there are few aged and diseased prostitutes, nothing more' (1965, p. 23). Around the same time, a report on the Chicago Skid Row in the early 1960s testified that '[t]he constant reference to the homeless man as against the "homeless woman" reflects the

¹In practice, there were important distinctions between these categories, as documented by Cresswell (2001, p. 57), in that 'a hobo was someone who travelled and worked, a tramp was someone who travelled but didn't work, and a bum was someone who didn't travel and didn't work'.

negligible number of homeless women residents in skid row' (Tenants Relocation Bureau 1961, p. 3).

Across the Atlantic, in one of the first sociological studies of homelessness in England in the mid-1970s, Archard (1979, pp. 243–244) claimed that 'there are very few women alcoholics in relation to the male population on skid row. Skid is almost exclusively a male phenomenon. The few female alcoholics that are homeless drink alone or join male drinking groups. However, the presence of a woman among men drinking on skid row is universally criticized by them, usually along the lines that they cause trouble and fail to fully participate in drinking schools by "working" (i.e. begging, thieving) for their share of drink'.

Thus, a consensus was evident from the skid row literature that Skid Row was a primarily male domain and any females located in this primeval male jungle were depicted as exhibiting deviant male traits in addition to specific female sexual deviancy. In the first book on homeless women derived from the 'Skid Row' studies in New York, Garret and Bahr (1976) argued that failure in marriage was the dominant reason why women ended up in skid row. It is perhaps significant that they proposed the argument that the reasons for women becoming homeless differed fundamentally from men:

In terms of race, nativity, educational attainment, experience of instability in the parental home, reported reason for that instability, and experience in the family of procreation, including reported problems during the marriage years, the path leading to homelessness appears to be both qualitatively and quantitatively different for women than for men. (Garret and Bahr 1976, p. 380)

Other writers were not blind to the existence of homeless women but rather they ignored them. As Solenberger (1911, pp. 190–191), in her pioneering study of 1000 homeless men in Chicago commented, '[a] most interesting chapter might be written about the tramp-women and the tramp-families on the road, figures as familiar to charity workers as men tramps, and whose restoration to normal living presents even more serious and difficult problems'. Cresswell (1999), in his history of the 'Tramp' in America, noted that a number of commentators mentioned

female tramps in their general discussion of 'the tramp problem' in the USA but found it difficult to categorize female tramps, usually assuming that they were prostitutes or lesbians. Cresswell further noted that the term tramp, usually associated with sexual promiscuity in the case of females, was used very differently for men and women. Although social science research on homeless women has moved beyond what Webb (2014, p. 152) has described as 'an also-ran in the broader studies of homeless men', it remains, in many cases, narrowly focused on violence in the lives of women as the fundamental cause of their homelessness to the exclusion of factors such as poverty, housing affordability and other structural factors (see for example, Jasinski et al. 2010 and, for a critique of the thesis that violence is the root cause of women's homelessness, see Shinn 2011). While women are now more visible in homelessness research, understanding women's homelessness remains an incomplete project characterized by a dominance of micro-level causes to the partial neglect of macro-level factors.

Governmental Inquiries and Homelessness

It was not only social scientific studies of homelessness that were blind to the presence of homeless women; a number of government reports that inquired into vagrancy in the second half of the nineteenth and first half of the twentieth centuries similarly omitted or ignored the situations of women experiencing homelessness. For example, the *Report of the Vice-Regal Commission on Poor Law Reform in Ireland* (1906) suggested that, although difficult to estimate, there were 2000 tramps in Ireland 'and the official estimate is that there are four or five males to every female' (Vice-Regal Commission on Poor Law Reform in Ireland 1906, p. 54).² The three-volume *Report of the Department Committee on Vagrancy* of 1906, with a 123-page report, 500 pages of evidence and more than 200 pages of appendices stated that '[t]he number of female vagrants is compara-

²Crossman (2013, p. 225), having examined a representative sample of workhouses in Ireland between 1850 and 1915, claims that '[m]en outnumbered women, but they did so by around three to one, significantly less than the four or five cited by the Local Government Board and the Vice-Regal Commission'.

tively small. Out of the 9,768 vagrants relieved in casual wards in England and Wales on the night of 1st January, 1905, only 887, or 9 per cent., were women' (Departmental Committee on Vagrancy 1906, p. 111). Thirty years later, the *Report of the Departmental Committee on Vagrancy in Scotland* concluded that '[v]agrancy in the case of women is relatively not a serious problem, if tinker women be disregarded. Tramping does not appeal to women and they do not readily "take to the road" even in times of stress or trouble. There are, however, women on the tramp alone or in company of men' (Departmental Committee on Vagrancy in Scotland 1936, pp. 15–16).

Sometime later, south of the border in England, the *Report of the Departmental Committee on the Relief of the Casual Poor* came to a similar conclusion, stating that '[t]he number of women in casual wards is fortunately very small ... there is a very small number of unattached women, generally of middle or of advanced age, who are habitual vagrants and present the same problems as do the men of similar age and habits of life' (Departmental Committee on the Relief of the Casual Poor 1930, p. 42). In a special investigation for the Committee conducted by Dr E.O. Lewis, it was posited that 'the women as a group were mentally inferior to the men. Several of the women accompanied men who might or might not have been their husbands: and these women manifested a docility characteristic of the feeble-minded' (Departmental Committee on the Relief of the Casual Poor 1930, p. 77).

In these various governmental accounts conducted in the first half of the twentieth century in England, Scotland and Ireland, female vagrants were represented as small in number, most often accompanying male vagrants, with the remaining 'unaccompanied' females exhibiting mental and moral deficiencies. Such government reports might be regarded as historical documents but they are not neutral; rather, they 'shape the technology of social engineering ... and become part of the discursive armoury of the political scene' (Burton and Carlen 1979, p. 6). Thus, responses to homelessness have been historically framed by the construction of the 'problem' by official inquiries and the narrow focus of their reach which, by only exploring official sites of homelessness, rendered women's homelessness a minor issue and one where public policy had only a minimal role to play.

Social Explorers and Homelessness

In addition to social scientific and governmental accounts of homelessness, a further genre is the 'slumming it' accounts, where largely middle-class social explorers and journalists descended into the abyss to document the monstrous world of the impoverished. One of the earliest and most widely read of the accounts was a series of articles in London Pall Mall Gazette documenting 'A Night in the Workhouse', a description of the casual ward in the Lambeth workhouse in London (see Koven 2004, for a detailed description and critique of these articles). For over a century, the public has been titillated by such accounts, from Flynt's (1899) *Tramping with Tramps*, which was based on his experience of tramping in the USA, England, Ireland, Germany and Russia, to more geographically restricted accounts such as Fletcher's (1966) *Down Among the Meths Men*, an account of drinkers of methylated spirits in London, Breed's *The Man Outside* (1966) (which does include a chapter on the 'women outside') on homelessness in England, Sandford's (1971a) *Down and Out in Britain*, and Page's (1973) *Down among the Dossers*, all of which have middle-class explorers descending into the degraded world of the homeless. As Sandford (1971a, p. 9) described it, 'I descended into the bilges of society'. In these usually lurid accounts, the reader is given a glimpse of a tableau of disturbed, vile, filthy, verminous, drunken female characters. For example, Fletcher (1966, p. 24) described two female methylated spirits drinkers as 'both ex-prostitutes, both old bags, fat and revolting'; Breed (1966, p. 32) provided an account of a Salvation Army hostel where 'the women in the room look apathetic, somehow past life' (1966, p. 32), while Page (1973, p. 14) described 'two fat, liberated and bra-less girls, who were dirty and spotty'.

One of the more prolific writers was Mary Higgs, author of works such as *Five Days and Five Nights as a Tramp Among Tramps* (1904), *Three Nights in Women's Lodging Houses* (1905), *Glimpses Into the Abyss* (1906), and *Where Shall She Live? The Homelessness of the Woman Worker* (1910). Higgs, along with a fellow female social explorer, Mrs Cecil Chesterton in her book *In Darkest London* (1926), was scathing of the conditions that women had to endure in public, private and charitable services and the petty rules that governed them. Higgs (1910) identified the lack of

affordable accommodation for working women as the primary driver of women's homelessness while Chesterton was moved to establish her own organization to provide accommodation for women, named Cecil Houses, which still operates today. In contrast, Sandford's (1971b) account of female homelessness in England centred on the eccentric alcoholic character of Edna, 'Edna the Inebriate Woman' being the title of the film documenting an elderly woman who tramps along an institutional circuit of hostels and psychiatric units. The best-known account of female homelessness in the USA is the autobiography of 'Boxcar Bertha',³ written by the hobo king Ben Reitman (Brunns 2001). This book confirmed earlier reformers' accounts in which 'female tramps were portrayed as serially domestic, licentious and feral; they cooked for the tribe, enjoyed sexual liaison within it, prostituted themselves for its benefit, and fought the police side by side with the boys' (Pittenger 2012, p. 82).

Thus, with some notable exceptions, from the autobiography of 'Boxcar Bertha' to the 'derivative drama documentary' (Beresford 1979, p. 158), featuring 'Edna the Inebriate Woman', homeless women, even more so than homeless men, have been portrayed in social science, government inquiries and 'slumming' literature as particularly eccentric and sexually deviant, few in number and difficult to classify.

In the US context, Weiner (1984, p. 181) has argued that while '[w]omen tramps were so deviant their existence was unthinkable to many, and their numbers relatively few', reformers of various hues paid them relatively little attention, focusing instead on 'women transients', that is, women who travelled to the cities for work and where their unsupervised accommodation was a cause of concern. For Weiner, these women transients posed a threat to society as they resided in accommodation where 'domestic virtues, community respectability and purity were imperilled' (Weiner 1984, p. 181). In response, from the late nineteenth century, supervised boarding houses were established to provide respectable accommodation for these migratory women (see Watson and Austerberry 1986 for a similar analysis in England). With the onset of the great depression in the USA, female participants in the labour force were

³ The book was also the basis of a film of the same name produced by Martin Scorsese in 1972, with Barbara Hershey playing Boxcar Bertha.

adversely affected and the limited number of shelter beds for females in cities such as New York meant that shelters were overwhelmed (Abelson 2003, p. 115). However, despite the crisis of single homeless women in the mid-1930s, responses were minimal, with Abelson arguing that '[t]he homeless woman was caught in a sex-gender system that manipulated both the ability and the willingness to see, to comprehend and to respond to the diverse realities of the category "woman". Women outside of families, women alone, without work and often without shelter, were so marginal that they were indeed nearly invisible'. (2003, p. 122).

Homeless Institutions and the Invisibility of Women

Earlier Elizabethan vagrancy codes were substantially modified in the nineteenth century to regulate those individuals, particularly tramps and beggars, who threatened social order, with the key objective of ensuring that the undeserving poor did not consume the food and occupy the shelters reserved for the deserving poor. As Cresswell (2001, p. 50) has argued, '[i]f the Poor Law was devised to manage the deserving poor, the vagrancy laws were devised to manage the undeserving poor'. To safeguard against relief programmes that could spawn the rise of a dangerous class of wanderers, laggards and parasites, casual wards separate from the workhouse were established. From both historical and contemporaneous accounts of the lives of tramps and vagrants, these facilities were punitive, degrading institutions or, as Vorspan (1977, p. 60) puts it, 'official Poor Law policy towards vagrants combined a legal recognition of their right to relief with a determination to award this relief under intensely disagreeable conditions with the result that prisons were viewed as less punitive than the Casual Wards'. Vagrancy can be viewed as a form of legally constructed 'poverty-born deviance' (Jutte 1994, p. 6). The English Vagrancy Act of 1824, which was the model of managing vagrancy utilized in many other European countries and in North America, demonstrates this clearly,

including in its ambit an extraordinary range of activities, from fortune telling to leaving one's wife.⁴

Specialist institutions for the undeserving vagrant (there being no deserving vagrants) were devised alongside the workhouse in the form of casual wards—often referred to as 'Spikes' (the term is possibly derived from the sharp implement given to inmates to pick oakum or unpick ship ropes, hence the term 'money for old rope')—in the UK, while, in the Irish system, undeserving vagrants were retained in the reception block of the workhouse. This distinction was made to ensure that the undeserving vagrants did not contaminate the deserving poor in the main workhouse block. The number of vagrants utilizing these workhouse ancillary institutions constituted the raw data used by Poor Law Commissioners and others when determining the extent and nature of vagrancy. Thus, Poor Law officials determined the extent of vagrancy on the basis of

⁴Section 4 of the Vagrancy Act, 1824—or to give the Act its full title, *An Act for the Punishment of Idle and Disorderly Persons, and Rogues and Vagabonds*—sets out the full range of activities that can lead one to be deemed a vagabond or rogue, punishable by one month's imprisonment: 'every person pretending or professing to tell fortunes, or using any subtle craft, means, or device, by palmistry or otherwise, to deceive and impose on any of his Majesty's subjects; every person wandering abroad and lodging in any barn or outhouse, or in any deserted or unoccupied building, or in the open air, or under a tent, or in any cart or waggon, not having any visible means of subsistence, and not giving a good account of himself or herself; every person wilfully exposing to view, in any street, road, highway, or public place, any obscene print, picture, or other indecent exhibition; every person wilfully openly, lewdly, and obscenely exposing his person in any street, road, or public highway, or in the view thereof, or in any place of public resort, with intent to insult any female; every person wandering abroad, and endeavouring by the exposure of wounds or deformities to obtain or gather alms; every person going about as a gatherer or collector of alms, or endeavouring to procure charitable contributions of any nature or kind, under any false or fraudulent pretence; every person running away and leaving his wife, or his or her child or children, chargeable, or whereby she or they or any of them shall become chargeable, to any parish, township, or place; ... every person having in his or her custody or possession any picklock key, crow, jack, bit, or other implement, with intent feloniously to break into any dwelling house, warehouse, coachhouse, stable, or outbuilding, or being armed with any gun, pistol, hanger, cutlass, bludgeon, or other offensive weapon, or having upon him or her any instrument, with intent to commit any felonious act; every person being found in or upon any dwelling house, warehouse, coach house, stable, or outhouse, or in any enclosed yard, garden, or area, for any unlawful purpose; every suspected person or reputed thief, frequenting any river, canal, or navigable stream, dock, or basin, or any quay, wharf, or warehouse near or adjoining thereto, or any street, highway, or avenue leading thereto, or any place, of public resort, or any avenue leading thereto, or any street, highway, or place adjacent, with intent to commit felony; and every person apprehended as an idle and disorderly person, and violently resisting any constable, or other peace officer so apprehending him or her, and being subsequently convicted of the offence for which he or she shall have been so apprehended; shall be deemed a rogue and vagabond'.

weekly returns submitted by the workhouse masters in a manner similar to today, when the extent of homelessness is frequently measured and determined by shelter usage. The number of individuals utilizing the casual wards was considerable in England and Wales, with, for example, a total of 174,362 admissions to the casual wards in the urban areas only in 1899, estimated to involve 17,005 individual casu-als (Local Government Board 1900, pp. xxxviii–xxxix).

Crowther’s (1981) history of the English workhouse noted that the number of women and children who applied for admittance to the casual wards declined from 15 per cent of all applicants in 1891 to 5 per cent by 1928. Humphreys (1999, p. 124), drawing on the *Report of the Metropolitan Poor Law Guardians’ Advisory Committee on the Homeless Poor* in 1915, noted that, while the numbers fluctuate, considerably more males than females were found ‘sleeping in streets and sitting up in shelters’ or in ‘Poor Law casual wards’. He explains, for example, that in February 1910, a total of 2510 males compared with 220 females were enumerated in the first category (sleeping in the streets or living in shelters) and 928 males and 173 females in the second (Poor Law casual wards). Forty years later, a survey of reception centres in England and Wales in January 1950 found 2302 males and 91 females. As shown in Fig. 2.1, a similar picture is evident in Ireland, with the majority of ‘casu-als’ utilizing the public workhouses being male.

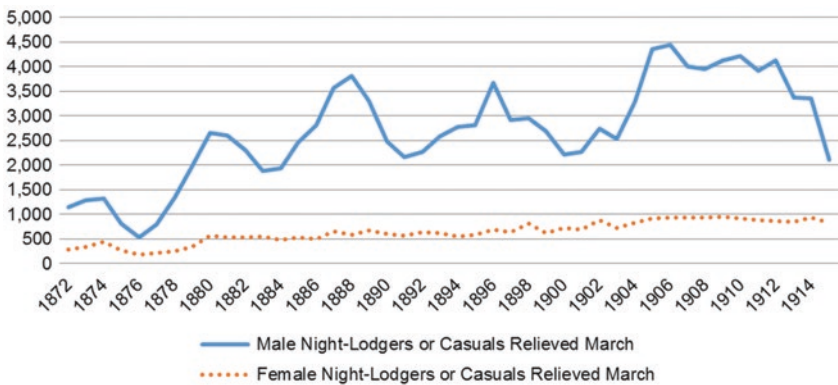


Fig. 2.1 Male and female casuals in the workhouses of Ireland, 1882–1915

A number of explanations for the relatively low number of women in casual wards in Britain have been offered by Watson and Austerberry (1986, p. 32):

homeless women would be more inclined to stay in a common lodging house, since a 'casual' was compelled to move on after two nights to another ward, often a considerable distance away. Second, women tended not to be part of the mobile labour force to the same extent as men, and third, the conditions in the workhouse proved unacceptable to many women.

However, it is not clear why women might object to the petty rules of the casual ward more than males and data from Ireland, in fact, indicate that women used the workhouse more than males (Crossman 2013). One possible answer is that in different jurisdictions—and sometimes within jurisdictions—some institutions or parts of institutions were more feared than others and were selectively utilized by those who were without accommodation. In one of the best-known accounts of the conditions within casual wards, Orwell (1933, pp. 170–171), in the classic *Down and Out in Paris and London*, described a scene outside a Spike in London where the tramps were discussing the attributes of the different Spikes; which Spikes to avoid and those where the blankets were as good as one would find in prison. Thus, strategies of survival among the destitute involved a careful appreciation of the various institutional options available to them, as individuals weighed up the merits and shortcomings of the different providers.

The other specialist institution for vagrants was the specialist labour colonies developed in a number of European countries in the late nineteenth century. Vorspan (1977, p. 75) argues that by the 1880s, labour colonies were 'promoted by every conceivable public and private organization' where 'professional tramps should be compulsorily detained for lengthy periods':

This course of action would accomplish numerous objectives. It would deter prospective vagrants, not merely from public relief but from the nomadic life altogether; it would remove vagrants from the public domain and thereby lessen the incidence of sleeping out, petty crime and begging; it would facilitate the reclamation of habitual tramps; and, finally, it would

prevent professional vagabonds from exploiting public assistance to the 'deserving'. (Vorspan 1977, p. 77)

Analogous to the casual wards, a majority of those confined in the labour colonies were male. For example, in the Netherlands, a daily average of 100 women were confined in the General State Labour Institution compared to 2700–3000 males (Weevers et al. 2012). While labour colonies gradually fell out of favour, the casual wards and allied institutions associated with the Poor Laws remained in place in many countries, surviving until the late 1960s and early 1970s. The inhabitants of these institutions were surplus to labour requirements and, hence, the application of vagrancy laws gradually dissipated. As the relationship with the labour market declined and this surplus population was contained either within Skid Row in North America or various Poor Law or charitable institutions in Europe, there was no 'need nor rationale for disciplining them' (Hopper 1990, p. 24).

Institutions for 'Fallen' Women

As noted above, the spectrum of institutions for the management of vagrancy were variously entitled penitentiaries, refuges, homes, reformatories and asylums for women. As part of the increasing specialization and classification of differing forms of deviancy in the nineteenth century (Cohen 1985), these institutions managed inebriate women, women who were pregnant but not married, 'hysterical' women, 'fallen women', and convicted women. These institutions operated across North America and Europe and were managed variously by religious communities and evangelical sects, central and local government, and lay philanthropic organizations. Some women entered voluntarily, some were coerced to enter, while others were convicted and committed. Their scale was impressive, with Mumm (1996, p. 528) recording that in 1840 'there was space for 400 women in Church of England Penitentiaries, but by 1893 more than 7000 women could be accommodated each year, primarily in institutions run by Anglican Nuns'. According to Bartley (2000, p. 26), by the beginning of the twentieth century in England, the Reformatory and Refuge

Union alone was running 320 Magdalen Institutions, a minimalist figure since it does not take account of those Magdalen Institutions run, for example, by the Church Army or the Salvation Army. In Ireland, it is estimated that 10,000 unique women entered ten Magdalen Penitentiaries between 1922 and 1996 (Inter-Departmental Committee 2013). These ten penitentiaries had a capacity to contain 1200 women and the population was relatively fluid, with nearly 50 per cent exiting the penitentiary within less than 24 weeks and only 8 per cent staying more than ten years. It can be argued that the women in these penitentiaries did not differ in any significant way from those living in the casual wards. Equally, Mumm's description of the 'penitents' of nineteenth century England could be broadly applied to many women's homelessness services today. For Mumm (1996, p. 527), 'the penitentiary, despite its penal overtones, was a therapeutic community which was not experienced as unbearably punitive. As well as reforming prostitutes, Anglican penitentiaries in Victorian Britain offered shelter to the survivors of incest and sexual violence, women fleeing abusive relationships, and female alcoholics.'

This raises the issues of classification and measurement. For Adler (1992, p. 740), in his analysis of vagrancy in the USA, '[f]emale vagrancy was related to sexual conduct; these criminals, according to municipal law enforcers, were "fallen women"'. In Sweden, Svanstrom (2006) notes a similar tendency for female prostitutes to be labelled as vagrants, with a more diversified set of activities classified as vagrancy for males. Kusmer (2002), in his history of homelessness in the USA, suggests that as the number of homeless women declined in the early twentieth century, a number of specialist charities provided shelter for them, thus rendering them even more invisible. According to Kusmer (2002, p. 110), '[at] a time when concern about the "tramp menace" was widespread, public opinion failed to even acknowledge the existence of homeless women ... to all but the police they remained largely invisible'. It is clear from this brief overview of the historical literature that, in today's terminology, the number of 'literally homeless' women, that is, the number living on the streets was always slight relative to the number of women residing in institutional, temporary and insecure accommodation. This is, however, also the case for men. The relative invisibility of women's homelessness relates to the classification of women's lack of secure housing as other

than a lack of accommodation, instead pathologizing their strategies of survival in a sexualized fashion and constructing a set of specialized institutions to manage their perceived deviancy.

Conclusion

Over the past two centuries, we can trace a relationship between elite perceptions of homeless people and the broad state response. From the beginning of the nineteenth century until the post Second World War period, the elite view of homeless people was that they were *dangerous*—a threat to compliance with the needs of industrial capitalism—thus requiring resocialization to ensure their participation in the labour market. Coinciding with the growth of welfare states, in the post-war period, the elite view of homelessness was that of *disaffiliation*. Homeless people were conceived of as mildly deviant and under-socialized, but small in number and corralled in declined skid row areas or festering in casual wards and other remnants of the institutions of the great confinement of the nineteenth century, and requiring the intervention of welfarist-type agencies, bolstered, if necessary, by the truncheon of the neighbourhood cop. From the early 1970s, coinciding with an increase in visible homelessness, the dominant view of the homeless was that they were *disturbed*—based on an assumption that they were discharged from various psychiatric institutions—and the response was to reinstitutionalize them in shelters. Despite these constant attempts to classify, pathologize, medicalize and infantilize, Crowther's (1992, p. 103) history of the tramp reminds us that '[v]agrancy, in spite of nineteenth-century efforts to link it to fecklessness and twentieth-century interpretations in terms of "social inadequacy", appears to be closely related to the state of the labour market'. Despite popular perceptions, depictions of the homeless as dangerous, disaffiliated and disturbed are not supported by robust evidence. For example, Montgomery et al. (2013) have persuasively argued that the presumed links between the deinstitutionalization of psychiatric hospitals and homelessness, and more generally, between mental illness and homelessness are not supported by studies utilizing rigorous research

designs and that there is 'nothing inherent to mental illness that leads to homelessness' (2013, p. 68).

If we understand homelessness as largely the outcome of irregular or tenuous employment and consequent residential and economic instability, we can see that economic fluctuations largely determine the rate of homelessness in that, during economic depressions, those in precarious situations migrate or 'tramp' in search of employment, seeking shelter and sustenance from municipal or charitable organizations during these periods. When employment opportunities open, as witnessed particularly during the First and Second World Wars, the numbers drop rapidly, but a residual number remain homeless or in precarious accommodation. In addition to employment conditions, for women, shifting views on domesticity, sexuality and childbirth shaped their relationship to the labour market and their ability to survive as 'women alone'.

One explanation for the broad consensus that women were rarely homeless in the past, to some degree, contemporaneously centres on the dominant methodological approaches to measuring homelessness (see Chap. 5, this volume for a detailed discussion of the range of issues that impact the measurement of women's homelessness). Two key issues are important here: the research methodology utilized and the sites of research. On the first issue, a count and classification of homeless people in homeless facilities today, often derived from a point-in-time study, would find a similar pattern to that found in previous decades, albeit the language utilized would be more nuanced. The most common research methodology utilized in homelessness research across Europe tends to be cross-sectional (that is, a snapshot approach). Cross-sectional research, primarily involving structured face-to-face interviews, provides detailed information on the characteristics—or the 'demographics and disabilities' (Snow et al. 1994, p. 462)—of homeless people, but in the process can distort our understanding of homelessness by failing to capture its dynamic nature. Cross-sectional or snapshot studies will typically overestimate the 'disabilities' of homeless people since, at any point in time, those individuals who are homeless on a long-term basis will be substantially over-represented in such research. Only longitudinal research can capture the flow of people in and out of homelessness over a prolonged

period of time and thus provide a more robust account of the dynamics of homelessness.

Longitudinal research in the USA has clearly highlighted the dynamic nature of homelessness and has demonstrated that a majority of people who become homeless in fact exit homelessness relatively speedily (Kuhn and Culhane 1998). In broad terms, Culhane and colleagues identified three subgroups of the homeless population: the transitional homeless, who rapidly exited and did not return to homelessness; individuals who had ongoing episodic bouts of homelessness; and the chronically homeless, who were long-term users of emergency services and/or rough sleepers. Significantly, approximately 80 per cent of homeless people were in the transitional category. These research findings, which broadly apply to both homeless individuals and homeless families, albeit with some important differences, demonstrate that a majority of individuals and households can and do exit homelessness on a permanent basis. Thus, while longitudinal research can demonstrate the heterogeneity of homelessness, cross-sectional research will largely capture those individuals who are chronically homeless, who remain predominantly male, thus distorting our understanding of the composition of the homeless population.

The second issue is the question of where research takes place. The sites of investigation for the skid row sociologists between the 1950s and 1970s, as well as the early reformers in the first two decades of the twentieth century, were only ever a small part of an extraordinary range of institutions that economically marginalized individuals utilized or were confined in under extreme conditions of residential instability. Casual wards, common-lodging houses and charitable shelters were components of the institutional circuit (Hopper et al. 1997) of prisons, psychiatric hospitals, workhouses, mother and baby homes, refuges, Magdalen asylums, inebriate asylums and so on, that dotted the physical landscape of late nineteenth and early twentieth century Europe and North America (Barton 2005). Furthermore, their common architectural features demonstrated that whatever their ostensible purpose, whether correcting delinquency or curing the insane, all served as sites of poverty management and containment.

Institutions for the homeless were hybrid institutions, 'emphasizing containment and control' (Hopper 1990, p. 14), architecturally similar to the madhouses and penitentiaries that made up the formally coercive circuit of regulatory institutions for the management of poverty. However, by drawing on the elements of practice in all institutions, they produced a heady combination of deterrence, degradation, punishment, reform and charity, a potent mix of tangled ideologies and practices that arguably prevail in homelessness services today.

Sites of poverty management also included skid row, and while not having the formal trappings of an institution, the corralling of marginal populations in a defined space, as well as the differential forms of arbitrary policing that characterized skid row (Bittner 1967; Schneider 1988), shares a number of similarities with closed spaces.

Much of the historical literature on homelessness, and indeed much of the contemporary research, remains focused on sites where 'homeless people' are found, but these sites are where an assemblage of interests have deemed them formally as places for the homeless. However, if we view 'homelessness as the problem of redundant people lacking sufficient resources (money or kin) to secure housing' (Hopper 2003, p. 19), then not only are the formal sites for containing homeless people—the shelters, transitional units, acquired commercial accommodation and so on—included, but a host of other places become visible. Thus, the formal sites of homelessness management are seen in their correct context, occupying only a minor niche in the overall spectrum of temporary accommodation and institutional provision that characterize the residential patterns of the poor. Those who enter the formal sites of homelessness management, therefore, represent only a minority of those who experience prolonged residential instability. Historically, a majority of these sites were established for males only and, since they were deemed to pose the greatest risk of disorder, a range of other sites were established for women.

Thus, broadening our gaze from those places and sites deemed by bureaucratic constructions as locations for the homeless, to include the multiplicity of places where those who experience residential instability survive, provides a more complex and inclusive analysis of homelessness, past and present, and of women's homelessness, in particular.

References

- Abelson, E. S. (2003). "Women who have no men to work for them": Gender and homelessness in the great depression, 1930–1934. *Feminist Studies*, 29(1), 104–127.
- Adler, J. S. (1992). Streetwalker, degraded outcasts, and good for nothing huzzies: Women and the dangerous class in Antebellum St. Louis. *Journal of Social History*, 25(4), 737–755.
- Anderson, N. (1923). *The hobo: The sociology of the homeless man*. Chicago: University of Chicago Press.
- Archard, P. (1979). *Vagrancy, alcoholism and social control*. London: Macmillan.
- Aubry, T., Nelson, G., & Tsemberis, S. (2015). Housing first for people with severe mental illness who are homeless: A review of the research and findings from the at Home—Chez soi Demonstration Project. *The Canadian Journal of Psychiatry*, 60(11), 467–474.
- Bahr, H. M. (Ed.). (1970). *Disaffiliated man: Essays and bibliography on skid row, vagrancy, and outsiders*. Toronto: University of Toronto Press.
- Bahr, H. M. (1973). *Skid row: An introduction to dissaffiliation*. New York: Oxford University Press.
- Bahr, H. M., & Caplow, T. (1973). *Old men drunk and sober*. New York: New York University Press.
- Bartley, P. (2000). *Prostitution: Prevention and reform in England, 1860–1914*. London: Routledge.
- Barton, A. (2005). *Fragile moralities and dangerous sexualities: Two centuries of semi-institutionalisation for women*. Aldershot: Ashgate.
- Bassuk, E., & Franklin, D. (1992). Homelessness past and present: The case of the United States, 1890–1925. *New England Journal of Public Policy*, 8, 67–85.
- Beresford, P. (1979). The public presentation of vagrancy. In T. Cook (Ed.), *Vagrancy: Some new perspectives* (pp. 141–165). London: Academic Press.
- Bittner, E. (1967). The police on skid-row: A study of peace keeping. *American Sociological Review*, 32(5), 699–715.
- Bloom, A. (2005). Toward a history of homelessness. *Journal of Urban History*, 31(6), 907–917.
- Breed, B. (1966). *The man outside*. Sussex: Epworth Press.
- Broder, S. (2002) *Tramps, unfit mothers, and neglected children: Negotiating the family in late nineteenth-century Philadelphia*. Philadelphia: University of Pennsylvania Press.

- Bruns, R. (2001). *The damndest radical: The life and world of Ben Reitman, Chicago's celebrated social reformer, hobo king, and whorehouse physician*. Indiana: University of Illinois Press.
- Burton, F., & Carlen, P. (1979). *Official discourse: On discourse analysis, government publications, ideology and the state*. London: Routledge and Kegan Paul.
- Busch-Geertsema, V. (2013). *Housing first Europe: Final report*. Brussels/Bremen: GISS.
- Caplow, T. (1976). Preface. In H. R. Bahr & G. R. Garrett. *Women alone: The disaffiliation of urban females* (pp. xv–xvii). Lexington: Lexington Books.
- Chesterton, Mrs C. (1926). *In darkest London*. New York: Macmillan.
- Cohen, S. (1985). *Visions of social control: Crime, punishment and classification*. Oxford: Polity Press.
- Cresswell, T. (1999). Embodiment, power and the politics of mobility: The case of female tramps and hobos. *Transactions of the Institute of British Geographers*, 24, 175–192.
- Cresswell, T. (2001). *The tramp in America*. London: Realktion Books.
- Crossman, V. (2013). *Poverty and the poor law in Ireland, 1850–1914*. Liverpool: Liverpool University Press.
- Crowther, M. A. (1981). *The workhouse 1834–1929: The history of an English Social Institution*. Athens: University of Georgia Press.
- Crowther, M. A. (1992). The tramp. In R. Porter (Ed.), *Myths of the English* (pp. 90–113). Cambridge: Polity Press.
- Culhane, D. P., Metraux, S., Byrne, T., Stino, M., & Bainbridge, J. (2013). The age structure of contemporary homelessness: Evidence and implications for public policy. *Analyses of Social Issues and Public Policy*, 13(1), 228–244.
- Culhane, D. P., Metraux, S., Park, J. M., Schretzman, M., & Valente, J. (2007). Testing a typology of family homelessness based on patterns of public shelter utilization in four U.S. jurisdictions: Implications for policy and program planning. *Housing Policy Debate*, 18(1), 1–28.
- Departmental Committee on the Relief of the Casual Poor. (1930). *Report*. London: His Majesty's Stationery Office.
- Departmental Committee on Vagrancy. (1906). *Report*. London: His Majesty's Stationery Office.
- Departmental Committee on Vagrancy in Scotland. (1936). *Report*. Edinburgh: His Majesty's Stationery Office.
- Fletcher, G. (1966). *Down among the meths men*. London: Hutchinson.
- Flynt, J. (1899). *Tramping with tramps: Studies and sketches of Vagabond life*. New York: The Century.

- Garret, G. R., & Bahr, H. M. (1976). The family backgrounds of skid row women. *Signs*, 2(2), 369–381.
- Golden, S. (1992). *The women outside: Meanings and myths of homelessness*. Berkeley: University of California Press.
- Hartmann McNamara, R., & Flagler Whitney, C. (2008). The history of homeless women in America. In R. Hartmann McNamara (Ed.), *Homelessness in America: Faces of homelessness* (Vol. 1, pp. 77–93). Westport, CT: Greenwood Publishing.
- Higgs, M. (1904). *Five days and five nights as a tramp among tramps: Social investigation by a lady*. Manchester: John Heywood.
- Higgs, M. (1905). *Three nights in women's lodging-houses*. Oldham: The Author.
- Higgs, M. (1906). *Glimpses into the Abyss*. London: P.S. King & Son.
- Higgs, M. (1910). *Where shall she live? The homelessness of the woman worker*. London: P.S. King & Son.
- Hopper, K. (1990). Public shelter as a 'hybrid institution': Homeless men in historical perspective. *Journal of Social Issues*, 46(4), 13–30.
- Hopper, K. (1991). Homelessness old and new: The matter of definition. *Housing Policy Debate*, 2(3), 755–813.
- Hopper, K. (2003). *Reckoning with homelessness*. Ithaca, NY: Cornell University Press.
- Hopper, K., Jost, J., Hay, T., Welber, S., & Haugland, G. (1997). Homelessness, severe mental illness and the institutional circuit. *Psychiatric Services*, 48(5), 659–664.
- Humphreys, R. (1999). *No fixed abode: A history of responses to the roofless and rootless in Britain*. London: Macmillan.
- Inter-Departmental Committee. (2013). *Report of the Inter-departmental Committee to establish the facts of state involvement with the Magdalen Laundries, chaired by Senator Martin McAleese*. Dublin: Oireachtas Eireann.
- Jasinski, J. L., Wesely, J. K., Wright, J. D., & Mustaine, E. E. (2010). *Hard lives, mean streets: Violence in the lives of homeless women*. Boston, MA: Northeastern University Press.
- Jutte, R. (1994). *Poverty and deviance in early modern Europe*. Cambridge: Cambridge University Press.
- Koven, S. (2004). *Shumming: Sexual and social politics in Victorian London*. Princeton: Princeton University Press.
- Kuhn, R., & Culhane, D. P. (1998). Applying cluster analysis to test of a typology of homelessness: Results from the analysis of administrative data. *American Journal of Community Psychology*, 17(1), 23–43.

- Kusmer, K. L. (2002). *Down and out, on the road: The homeless in American History*. Oxford: Oxford University Press.
- Laubach, F. C. (1916). *Why there are vagrants: A study based upon an examination of one hundred men*. New York: Columbia University.
- Local Government Board. (1900). *Twenty-ninth annual report of the Local Government Board, 1899–1900*. London: Her Majesty's Stationery Office.
- Martin, M. A. (1987). Homeless women: An historical perspective. In R. Beard (Ed.), *On being homeless: Historical perspectives* (pp. 32–41). New York: Museum of the City of New York.
- Merves, E. S. (1992). Homeless women: Beyond the bag lady myth. In M. J. Robertson & M. Greenblatt (Eds.), *Homelessness: A national perspective* (pp. 229–244). New York and London: Plenum Press.
- Metraux, S. (1999). Waiting for the wrecking ball: Skid row in postindustrial Philadelphia. *Journal of Urban History*, 25(5), 690–715.
- Montgomery, A. E., Metraux, S., & Culhane, D. (2013). Rethinking homelessness prevention among persons with serious mental illness. *Social Issues and Policy Review*, 7(1), 52–82.
- Mumm, S. (1996). “Not worse than other girls”: The convent-based rehabilitation of fallen women in Victorian Britain. *Journal of Social History*, 29(3), 527–546.
- National Assistance Board. (1966). *Homeless single persons: Report on a survey carried out by the National Assistance Board, with the co-operation of other Government Departments and Voluntary Bodies, between October 1965 and March 1966*. London: Stationery Office.
- Orwell, G. (1933). *Down and out in Paris and London*. London: Victor Gollancz.
- Page, R. (1973). *Down among the dossers*. London: Davis-Poynter.
- Pittenger, M. (2012). *Class unknown: Undercover investigations of American work and poverty from the progressive era to the present*. New York: New York University Press.
- Rossi, P. H. (1990). The old homeless and the new homeless in historical perspective. *American Psychologist*, 45(8), 954–959.
- Sandford, J. (1971a). *Down and out in Britain*. London: New English Books.
- Sandford, J. (1971b, October 21). Edna the inebriate woman. *BBC Play for Today*.
- Schneider, J. (1988). The police on skid row: A historical perspective. *Criminal Justice Review*, 13(2), 15–20.
- Schneider, J. (2004). Skid row culture and history. In D. Levinson (Ed.), *Encyclopedia of homelessness* (pp. 505–511). Thousand Oaks, CA: Sage.

- Scull, A. (2015). *Madness in civilisation: A cultural history of of insanity from the Bible to Freud, from the madhouse to modern medicine*. London: Thames and Hudson.
- Shinn, M. (2011). Is violence at the root of homelessness for women? *Sex Roles*, 64(7–8), 585–588.
- Shlay, A. B., & Rossi, P. H. (1992). Social science research and contemporary studies of homelessness. *Annual Review of Sociology*, 18, 129–160.
- Snow, D. A., Anderson, L., & Koegel, P. (1994). Distorting tendencies in research on the homeless. *American Behavioural Scientist*, 37(4), 461–475.
- Solenberger, A. W. (1911). *One thousand homeless men: A study of original records*. New York: Russell Sage Foundation.
- Stoner, M. R. (1983). The plight of homeless women. *The Social Service Review*, 57(4), 565–581.
- Sutherland, E. H., & Locke, H. J. (1936). *Twenty thousand homeless men: A study of unemployed men in the Chicago shelters*. Chicago, IL: J.B. Lippincott.
- Svanstrom, Y. (2006). Prostitution as vagrancy: Sweden 1923–1964. *Journal of Scandinavian Studies in Criminology and Crime Prevention*, 7(2), 142–163.
- Tenants Relocation Bureau. (1961). *The homeless man on skid row*. Chicago, IL: City of Chicago.
- Vice-Regal Commission on Poor Law Reform in Ireland. (1906). *Report*. Dublin: His Majesty's Stationery Office.
- Vorspan, R. (1977). Vagrancy and the new poor law in late-Victorian and Edwardian England. *The English Historical Review*, 92(362), 59–81.
- Wallace, S. E. (1965). *Skid row as a way of life*. Totowa, NJ: The Bedminister Press.
- Watson, S., & Austerberry, H. (1986). *Housing and homelessness: A feminist perspective*. London: Routledge and Keegan Paul.
- Webb, P. (2014). *Homeless lives in American cities: Interrogating myth and locating community*. Basingstoke: Palgrave Macmillan.
- Weevers, M. H. A. C., De Koster, M., & Bijleveld, C. C. J. H. (2012). Swept up from the streets and nowhere else to go? The journeys of Dutch female beggars and vagrants to the Oegstgeest state labour institution in the late nineteenth century. *Journal of Social History*, 46(2), 416–429.
- Weiner, L. (1984). Sisters of the road: Women transients and tramps. In E. H. Monkkonen (Ed.), *Walking to work: Tramps in America, 1790–1935*. Lincoln: University of Nebraska Press.
- Wiseman, J. P. (1970). *Stations of the lost: The treatment of skid row alcoholics*. New Jersey: Prentice Hall.

3

Cultural Images and Definitions of Homeless Women: Implications for Policy and Practice at the European Level

Cecilia Hansen Löffstrand and Deborah Quilgars

Introduction

A paucity of research and a resultant lack of understanding exist on women's homelessness across Europe. There is a dearth of primary comparative research at the European level and women have, in the main, been neglected in European housing policy and in the development of policies on homelessness (Edgar and Doherty 2001; Baptista 2010). This chapter applies a feminist, constructivist approach, focusing on how ideas about gender and homelessness impact on homelessness policies and services and, in turn, the situation of homeless women. Based on existing research, the chapter seeks to explore cultural images, definitions

C.H. Löffstrand (✉)

Department of Sociology and Work Science, University of Gothenburg,
Gothenburg, Sweden

e-mail: cecilia.lofstrand@socav.gu.se

D. Quilgars

Centre for Housing Policy, University of York, York, UK

© The Author(s) 2016

P. Mayock, J. Bretherton (eds.), *Women's Homelessness in Europe*,

DOI 10.1057/978-1-137-54516-9_3

and notions of women's homelessness in Europe and to identify any implications for homelessness policies and services at the European level.

The chapter starts by considering the wider role or place of women in society and its impact on understandings of, and responses to, women's homelessness. It is argued that shared images and perceptions of home, homelessness, and women in society generally impact welfare, housing and homelessness policies. Gendered images and discourses permeating policies and practices in turn affect women's risk of homelessness and their chances of exiting homelessness. This type of argument is well established in feminist research on the operation of the welfare state and gender relations. As Orloff (1996, p. 51) puts it:

Gender relations, embodied in the sexual division of labor, compulsory hetero-sexuality, discourses and ideologies of citizenship, motherhood, masculinity and femininity, and the like, profoundly shape the character of welfare states. Likewise, the institutions of social provision—the set of social assistance and social insurance programs, universal citizenship entitlements, and public services to which we refer as ‘the welfare state’—affect gender relations in a variety of ways.

As mentioned, this chapter follows a constructionist approach, asserting that knowledge is socially constructed and created over time by social actors' interactions, interpretation and language whereby meanings are embedded into society (Berger and Luckman 1966). Images of women's homelessness and definitions of homelessness—including their underlying assumptions—produce particular policy responses and practices (while others are seen as ‘unthinkable’), in turn (re)producing discursive categories such as ‘the homeless woman’. Following Taylor (1998, p. 342), such discursive categories ‘operate within discursive contexts which seek to give accounts of the nature of persons, their moral characteristics, their real or “genuine” needs, the legitimacy of their claims to welfare, and circumscribe their legal and physical access to benefits and services’.

The chapter starts by discussing prevailing ideas about home, family and women in Europe. The concept of homelessness is then examined and the extent of women's homelessness throughout Europe is discussed. The focus then turns to two recurrent themes in the literature on women's

homelessness: the first pertains to how categorization practices, particularly those associated with the presence of children, impact on the situations of homeless women and the second relates to the (resultant) perceived invisibility of women's homelessness. The chapter concludes with a discussion of the policy and practice implications of persisting cultural images of women's homelessness.

Home, Family and (Homeless) Women in Europe

A starting point for feminist research on housing policy and gender relations is the work of Austerberry and Watson undertaken in Britain during the 1980s (Austerberry and Watson 1981; Watson and Austerberry 1986). They produced a feminist critique of UK housing policy and provision, portraying the latter as 'moulding and reinforcing the patriarchal and capitalist structure of the family' (Austerberry and Watson 1981, p. 49). This hitherto largely ignored function of housing policy and provision became the key focus of a feminist analysis which demonstrated that assumptions about home, women and family have 'profound consequences for a woman's access to housing' (Austerberry and Watson 1981, p. 51).

Although not equally evident in all EU countries, over the past three decades or more there has been significant change in the social and economic position of women throughout Europe, including, for example, the relative weakening of the nuclear family and the increased share of women in the labour market. A catalyst for both of these changes was the feminist movement(s), which encouraged women to challenge and transform traditional family relationships away from their patriarchal and dependent relationships as wives, mothers and carers in male-headed households. Watson (2000), revisiting earlier findings (Austerberry and Watson 1981), noted the significant progress towards women's equality in society, highlighting the resultant decline in the (albeit still fiercely defended) significance of traditional 'family' structures since the 1970s. It has been argued that while a majority of women have benefitted from

these developments, they have simultaneously led to an increased risk of homelessness for many lone mothers in low-paid jobs, which has been linked to a broader feminization of poverty (Edgar and Doherty 2001). Watson (2000) emphasized that despite significant progress towards women's equality, women remain the primary carers of children, are marginalized in the labour market, and have low purchasing power in housing markets. She concluded that homelessness definitions and policies continue to operate on a 'gendered terrain' (Watson 2000, p. 159), with both structural and psychological factors and experiences, particularly violence and abuse, important in theorizing and understanding women's risk of homelessness.

Women's capacity to access and maintain housing depends, according to Doherty (2001), on both the ability to acquire secure and adequately paid employment and the degree of protection offered by the welfare state. Research has shown that, in Europe, the risk of poverty and housing exclusion is generally far higher for lone parents and unemployed households (Edgar 2001; Esping-Andersen 2002; Quilgars 2011). Even in Nordic countries, where the state offers a relatively high degree of protection, lone mothers find themselves in a more vulnerable position than men (Järvinen 1993; Esping-Andersen 2002; Skeivik 2006, see Chap. 4, this volume). Although the employment rate for lone mothers is exceptionally high in the Nordic countries (in contrast, for example, to very low employment rates among lone mothers in Ireland and the UK), lone mothers are more likely than other household types to be in precarious employment (that is, in low-income, part-time employment) (Esping-Andersen 2002) and to be unemployed (Skeivik 2006). The reasons may be that, as sole caregivers, lone mothers are less flexible in terms of working hours and may, therefore, be discriminated against in the labour market (Skeivik 2006, pp. 256–258).

Essentialist feminist perspectives emphasize the common characteristics, needs and experiences of (all) women, whereas anti-essentialist perspectives stress differences between women, highlighting the importance of different historical and socio-cultural contexts for the experiences of women. Doherty (2001) argues that while there is a need to recognize and take account of the heterogeneity of women's situations and needs, it is essential not to lose sight of what is common to women across Europe,

including their subordinate and disadvantaged position in a patriarchal society, which arguably increases their vulnerability to homelessness.

In contrast, Munk et al. (2001) question the perceived vulnerability of women and whether they are at increased risk of social exclusion following quite significant changes in gender relations in society. In Denmark, for example, Munk et al. (2001) claim that traditional male dominance has diminished as a result of the availability of paid work, welfare benefits, child care services, and access to health care (including contraceptives and abortion), as well as the increased protection provided by the welfare state for women who may (potentially) experience homelessness. Welfare state protection in Denmark is based on the 'principle of individuality', meaning that access to benefits is available on an individual basis (that is, not on the basis of family status), thus providing women with a certain degree of financial independence and autonomy. Furthermore, in terms of housing, divorced mothers are advantaged. The reason for their advantaged position is that, in connection to a divorce, if a couple cannot agree on how to resolve the housing situation, the authorities (either the county or the court) will favour the parent—most often the mother—who has been granted custody of the children. The implication is that the mother can continue to live in the jointly owned property (house or apartment) after the divorce while the man is likely to have to move to alternative accommodation (Munk et al. 2001, p. 120). While this privileged position encompasses only those women who were once married and have joint ownership of a property, other lone mothers are prioritized for social housing.

Munk and colleagues (implicitly) acknowledge the different conditions of Danish women compared to women in many other parts of Europe and critique comparative research based on 'a broad, structural understanding of social exclusion' on the basis that such analyses 'risk missing the true nature of the problems facing the most vulnerable in society' (Munk et al. 2001, p. 123). The most excluded or vulnerable women in Denmark are those who have a mental illness and/or are dependent users of alcohol or drugs since their accommodation options are far more limited. There is, according to Munk and colleagues (Munk et al. 2001), a need for research that examines these women's specific pathways or routes to homelessness in a way that eschews pathological or medicalized explanations of homelessness.

More recently, a number of studies on women's pathways or journeys into and through homelessness have been undertaken in the UK and Ireland (see, for example, Reeve et al. 2007; Mayock and Sheridan 2012a, b). These studies have involved the conduct of detailed biographical interviews, thereby privileging women's voices and supporting women in telling their personal stories of housing and homelessness. Broadly speaking, they follow a pathways approach to the study of housing and homelessness, which has come to prominence in the past 20 years and seeks to illuminate the changing relationship that people may have with homelessness and housing over their life span (see, for example, Casey 2002; Clapham 2003, 2005; May 2000; Tomas and Dittmar 1995).¹ Mayock and Sheridan's (2012a, b) research strongly suggests that homeless pathways have gender-specific dimensions but that, equally, there is great heterogeneity in the life histories of women who experience homelessness. According to the authors, the women's stories of becoming homeless 'resist easy categorization, highlighting the diversity and the complexity of their experiences' (Mayock and Sheridan 2012a, p. 15).

Definitions of Homelessness

Homelessness is a historically and culturally specific concept (Watson 1984, p. 61).

Homelessness is notoriously difficult to define. Part of this difficulty arises because the concept incorporates the notion of a 'home' (Watson 1984). A 'home' not only refers to a physical structure or dwelling but also to a social setting where people feel safe, secure, warm and able to live in privacy and with dignity (Padgett 2007). The notion of a home is very closely linked to that of 'family' (Watson 1984; Jones 2000; Mallett 2004), inevitably drawing upon the aforementioned culturally specific

¹ A fundamental assumption of pathways approaches is that social life and also the housing situation of a household at any given time is a result of a series of interactions. Pathways approaches thus bring human agency—both individual and institutional—into focus. Actions and interactions in turn (re)produce structural conditions. The pathway of a household is, according to Clapham (2003, p. 122), 'the continually changing set of relationships and interactions which it experiences over time in its consumption of housing'. Hence, changes in both social relations and in the housing situation are studied.

understandings of the role of women as caregivers and as 'belonging' at home (see also Passaro 1996). In contrast, homelessness may be understood as lacking a place where one can conduct and enjoy (family) life. The fact that the notions of home, family and women are so tightly bound (albeit less so than 30 years ago) is one reason why homelessness is most often associated with (single) men and that a (single) homeless women is viewed as something of an anomaly.

There is a second reason why homelessness frequently produces an image of a single man. As with many complex social phenomena, policy makers struggle to conceptualize homelessness and tend to rely on simplified definitions where a consensus can be more easily reached on the problem and how to deal with it (Loseke 2003). In most European countries, homelessness has been defined narrowly, focusing on street homelessness and those individuals without shelter (Edgar and Doherty 2001). Such homelessness, particularly rough sleeping, is highly visible and consequently may impact upon others in society and is where consensus on policy responses is most likely to occur. In some countries, this focus on visible homelessness also reflects nationally specific definitions of homelessness. For example, in France, 'homelessness' refers to people who are 'sans abri' or 'without shelter'. Consequently, policy has tended to focus on those individuals who do not have access to a 'house' or shelter rather than a 'home'.

Any definition or typology of homelessness is, by its very nature, a social, political and cultural construct or categorization, reflecting particular assumptions held by particular actors at a particular point in time. Most definitions of homelessness are also adopted and used in specific national contexts. In the mid-2000s, FEANTSA researchers developed the ETHOS (European Typology of Homelessness and Housing Exclusion) typology of homelessness, with the aim of devising 'an approach by which data can be collected by homelessness service providers on a more comparable basis' and providing 'the information necessary to improve the provision of services to prevent and alleviate homelessness' at the European and individual country level (Edgar et al. 2004, p. 3). Attempts had previously been made to define homelessness at the European level but ETHOS is arguably the best-developed and most widely adopted typology (Busch-Geertsema 2010; Pleace and Bretherton 2013). ETHOS

(discussed in detail in Chap. 5, this volume) utilizes four conceptual categories or living situations: rooflessness, houselessness, living in insecure housing, and living in inadequate housing (see Table 3.1). Rooflessness and houselessness are broadly classified as 'homelessness', while insecure and inadequate housing are categorized as 'housing exclusion'. Within houselessness, ETHOS incorporates a specific category for women escaping domestic violence who are accessing women's refuges.

It is perhaps important to note that ETHOS has been recently criticized for some conceptual weaknesses, including the arbitrary threshold between homelessness and housing exclusion. It is also claimed that the model relates only to where people are living at a given point in time and not to their specific circumstances (Amore et al. 2011). A revised version, developed in New Zealand, has addressed some of these criticisms by including women's refuges under an amended category of 'temporary accommodation' and allocating a separate category to 'sharing accommodation' (alongside 'without accommodation' and 'uninhabitable accommodation') (Amore et al. 2011).

Irrespective of the definitions utilized, it is crucial to note that men are more likely to be represented in the roofless or without accommodation categories of homelessness (that is, categorized as houseless or living in temporary accommodation). Furthermore, it is generally acknowledged that women are more likely to be represented in insecure housing or inadequate housing or other types of temporary or shared accommodation (Edgar and Doherty 2001; Baptista 2010; Hutchinson et al. 2014). This, to a large extent, reflects the fact that women are more likely than men to have children in their care when affected by housing instability or homelessness and, in most European countries, are also likely to be protected—at least to some extent—from the most severe forms of homelessness due to the presence of children (see discussion later in the chapter). As opposed to very visible rooflessness, women are also more likely to be affected by 'hidden' forms of homelessness (and, therefore, not enumerated), for example, when they stay temporarily with family members or friends or live under the threat of domestic violence, which can be classified as 'at risk' of homelessness (Amore et al. 2011).

It has been argued that the recognition of ETHOS in many European countries and more widely across the globe is a promising development

Table 3.1 ETHOS definition of homelessness

Conceptual category	Operational category	Living situation
ROOFLESS	1 People living rough	1.1 Public space or external space
	2 People staying in a night shelter	2.1 Night shelter
HOUSELESS	3 People in accommodation for the homeless	3.1 Homeless hostel 3.2 Temporary accommodation 3.3 Transitional supported accommodation
	4 People in a women's shelter	4.1 Women's shelter accommodation
	5 People in accommodation for immigrants	5.1 Temporary accommodation/reception centres 5.2 Migrant workers accommodation
	6 People due to be released from institutions	6.1 Penal institutions 6.2 Medical institutions 6.3 Children's institutions/homes
	7 People receiving longer-term support (due to homelessness)	7.1 Residential care for older homeless people 7.2 Supported accommodation for formerly homeless persons
INSECURE	8 People living in insecure accommodation	8.1 Temporarily with family/friends 8.2 No legal (sub)tenancy 8.3 Illegal occupation of land
	9 People living under threat of eviction	9.1 Legal orders enforced (rented) 9.2 Repossession orders (owned)
	10 People living under threat of violence	10.1 Police recorded incidents
INADEQUATE	11 People living in temporary/non-conventional structures	11.1 Mobile homes 11.2 Non-conventional building 11.3 Temporary structure
	12 People living in unfit housing	12.1 Occupied dwelling unfit for habitation
	13 People living in extreme overcrowding	13.1 Highest national norm of overcrowding

Source: FEANTSAs: <http://www.feantsa.org/spip.php?article120>

and could represent a first step in making women's homelessness more visible in policy arenas (Baptista 2010). However, with diminished resources available to governments and charities, policy attention is likely to remain heavily focused on rooflessness and some types of houselessness and, therefore, concentrate on forms of homelessness that are more likely to be experienced by men.

The Extent of Women's Homelessness

At present, the precise scale of women's homelessness across Europe is unknown. Many countries do not have relevant administrative or research data and, where data do exist, they tend to be collected differently, making a comparative analysis difficult. The challenges associated with measuring homelessness, generally, and women's homelessness, specifically, are discussed in detail in Chap. 5 of this volume. While these challenges significantly limit the ability to draw firm conclusions, it is important to present an overview of the estimated scale of women's homelessness across Europe based on available data in the form of homeless counts and other enumeration techniques. As Table 3.2 illustrates, most countries undertake a count of the total number of homeless persons and also estimate the proportion of women in the homeless population, which ranges from between 15 and 41 per cent in the countries listed. Importantly, however, virtually all of the estimates referenced in Table 3.2 are based on the most *visible* forms of homelessness and, therefore, only count those individuals who are sleeping rough or living in homelessness shelters. An exception is England, where data are collected primarily on homeless households accepted as in 'priority need'² of housing (known as statutory homelessness due to specific legislation in that jurisdiction), who may be living in insecure and/or inadequate housing situations. This, coupled with the priority given to households with dependent children, produces a very different picture, with approximately three-quarters of all households including a woman, the majority of whom are lone parents. These figures

² Priority need individuals include women with dependent children (and pregnant women), 'vulnerable' persons, and those who become homeless as a result of a fire or other emergencies.

Table 3.2 Extent of women's homelessness in selected European countries

	Study/Method	Definition	Data
Denmark	Enumeration of homeless people who were in contact with services in one week in 2015. Services included emergency shelters or temporary accommodation, non-custodial care, prisons, detention centres, social service authorities, community homes, treatment homes for addicts, psychiatric clinics, police, outreach activities for homeless persons, voluntary organizations, self-help groups, reception centres and drop-in centres (Benjaminsen and Hesselberg Lauritzen 2015)	Persons were homeless when: he/she does not have a dwelling or room (owned or rented), sleeps rough, depends on temporary accommodation, or lives temporarily and without a contract with family or friends. People with no place to stay on the following night are also defined as homeless	2015: 6138 homeless persons, 1325 (22 %) of them women
Germany	Estimate by the BAG W-Bundesarbeitsgemeinschaft Wohnungslosenhilfe e. V. (National Alliance of Service Providers for the Homeless)	'[H]omeless are those who do not possess a rent contract for housing'. This includes '[p]eople ... who find temporary accommodation with relatives, friends and acquaintances' (BAG W 2011, p. 129 translated)	2014: 335,000 homeless persons, 86,000 (27 %) of them women (BAG W 2015)
Ireland	Central Statistics Office (2012)	Persons residing in accommodation (emergency, transitional, long-term, mixed) providing shelter for homeless persons or identified as sleeping rough on Census Night	2011: 3800 homeless persons, 1263 (33 %) of them women
	Department of the Environment, Community & Local Government (2016)	Households accessing local authority managed emergency accommodation during the week of 18–24 April, 2016	2016: 4068 homeless persons, 1687 (41 %) of them women

(continued)

Table 3.2 continued

	Study/Method	Definition	Data
Poland	2011 National Census	<p>‘Homeless person is a person who for various reasons—financial, family or administrative—declares lack of permanent dwelling space’, excluding people homeless due to flood, fires etc.</p> <p>Category I: registered during two days by mobile teams in places (public space, parks, abandoned buildings) previously pointed out by local services, police etc.</p> <p>Category II: data provided by service providers (shelters, hostels)</p>	2011: 25,773 homeless persons, 5880 (23 %) of them women
	One night count—21/22 January 2015	<p>Definition of a homeless person:</p> <p>(1) Is not living in a regular dwelling AND (2) is not registered in a dwelling OR (3) is registered in a dwelling but cannot live there because of eviction or other court order; life-threatening conditions; other inhabitants deny access to it.</p> <p>This means people in shelters (also hospitals, emergency rooms, temporarily detained) and in inhabitable spaces are counted</p>	2015: 36,161 homeless persons, 5351 (15 %) of them women

	Study/Method	Definition	Data
Portugal	Government statistics, collected by questionnaire distributed to all municipalities. Response rate of 53 (out of 308) municipalities 2011 National Census	Official definition of homelessness as in the National Strategy which is based on ETHOS operational categories 1, 2 and 3 Covering operational categories 1 and 2 of ETHOS light (both were classified under the concept of primary homelessness used in the Census)	2009: 2 133 homeless persons, 341 (16 %) of them women 2011: 573 homeless persons, 123 (22 %) are women
Sweden	Mapping carried out by the National Board of Health and Welfare as a governmental assignment. The mapping was based on data from municipalities, authorities, institutions and NGOs	Definition of homelessness (informed by ETHOS): Situation 1 (acute homelessness): people sleeping rough or in a shelter or women's shelter Situation 2 (institutions or other type of category housing): people in penal/correctional institutions, treatment and other institutions (if to be released in three months, and have nowhere to move to) Situation 3 (long-term homeless accommodation): people in long-term accommodation arranged by the municipality where the municipality sublet training and reference apartments Situation 4 (short term and insecure housing): people temporarily lodging with family, friends and acquaintances (without contract or with a short-term second-hand lease)	2011: 34,000 homeless persons, 11,700 (34 %) of them women

(continued)

Table 3.2 continued

	Study/Method	Definition	Data
United Kingdom (England)	Government statistics, collected by English local authorities, collated centrally. https://www.gov.uk/government/statistical-data-sets/live-tables-on-homelessness (also includes time series data)	Homeless households in priority need and unintentionally homeless accepted by local authorities for rehousing	2014/2015: 54,430 households—at least 78 % of households contained women (47 % lone female parents; 10 % lone women; 21 % couples)
	Combined Homelessness and Information Network (CHAIN) database (maintained by voluntary sector organization—Broadway)	Rough sleepers in London who have been contacted by outreach teams or who have accessed accommodation for rough sleepers in London	2014/15: 7581 homeless persons, 1094 (14 %) of them women

graphically illustrate the significance of definitional and administrative categories in capturing different forms of homelessness among women.

The dearth of reliable data across Europe means that it is also difficult to draw robust conclusions about *change* in the scale of women's homelessness over time. Sweden is one of the few countries that has gathered comparable data over time and the available figures indicate increases in all forms of homelessness as well as an increase in the proportion of women found in the total homelessness population. In 2011, women accounted for 36 per cent of all homeless people, an increase from 21 per cent in 1999 (National Board of Health and Welfare 2011). Time series data also exist in England and reveal significant increases in the number of households accepted as homeless during the 1980s and 1990s, which peaked at 147,820 in 2003. Numbers then decreased steadily to one-third of this figure (49,290) in 2010, although the number did increase to 61,790 in 2013 (Wilcox et al. 2015). The overall trend towards a decrease in the number of homeless households in England from the late 1990s is generally accepted to have been impacted greatly by the introduction of targeted preventive strategies, meaning that households are assisted when they are at risk, or in the early stages, of homelessness (Pawson 2007).

Despite the challenges associated with defining and measuring homelessness, it is clear that women's homelessness is a significant social problem across Europe. Women are likely to constitute up to one-third of the total homeless population when narrower definitions of rough sleeping and living in homeless accommodation services are applied. However, the proportion of homeless women may rise steeply when hidden and/or family homelessness are included, starkly demonstrating the impact on estimates of the way(s) in which homeless women are categorized.

Categorizing Homeless Women as 'Singles', 'Families' and 'Lone Mothers'

In many Northern European countries (including the UK, Ireland, France, Luxembourg, Germany, Denmark, Sweden and Finland), homeless women with children are prioritized for local authority accommodation ahead of single women without children, couples without children

and single men (Enders-Dragässer 2001; Järvinen 1993; Kärkkäinen 2001; Löfstrand 2005a, b; May et al. 2007; Mina-Coull and Tartinville 2001; Munk et al. 2001; O'Sullivan and Higgins 2001; Pels 2001). The UK was arguably the first nation to introduce the most comprehensive protection for women with children with the introduction of the *Housing (Homeless Person) Act 1977* (consolidated by the *Housing Act 1985*), which made households with children (and pregnant women) who are at imminent risk of homelessness a priority for local authority rehousing. This legislation has helped to prevent many families from becoming homeless or, at the very least, means that homelessness is addressed at the earliest possible juncture (with families placed in temporary accommodation awaiting settled housing³). Research has identified improved outcomes across a range of domains for families following assistance from the statutory homelessness system (Pleace et al. 2008). However, in contrast, 'single' women are not usually able to receive help through the local authority homelessness system. May et al. (2007, p. 123, emphasis in original) explain:

British housing and homelessness policy has developed around a drive to protect the sanctity of the *family* rather than women, furnishing women without dependants, or not otherwise in 'priority need', no more right to accommodation or assistance from the local state when homeless than is afforded single men or childless couples.

In France, as in many other Northern European countries, homeless women with children are more advantaged than women without children in their care in terms of their access to both (appropriate) services and welfare benefits, even if they 'may find themselves entrapped in the role of mother with limited opportunities for breaking the cycle of dependency' (Mina-Coull and Tartinville 2001, p. 149). For many homeless women who are mothers, a 'bad mother' label is particularly stigmatizing, leading to further marginalization in contexts where service provision is already inadequate. According to one French study, two-thirds

³The Housing Act 1996 reduced the main duty on local authorities for securing accommodation for homeless people to a period of two years. However, the main duty to secure permanent accommodation for homeless people in priority need was restored in the *Homelessness Act 2002*.

of all homeless women under the age of 45 staying at reception centres were mothers who did not have their children living with them. These women were categorized as 'single' homeless women and stigmatized by the 'bad mother' label because they challenged stereotypical norms about femininity. Mina-Coull and Tartinville (2001, p. 147, emphasis added) discuss the implications of these gendered stereotypes:

In particular, women with children are able to access subsidized housing whereas other homeless people, especially men, without children, may remain homeless for several years, if not for the rest of their lives (Passaro 1996). By contrast, homeless women without children may be subjected to disapproval and criticism particularly if their behaviour (alcohol abuse, vulgarity, violence) challenges gender stereotypes. In this respect, it is important to underline the fact that it is *the presence of children rather than the status of motherhood* which differentiates access to services.

In Finland, single women or those who no longer have dependent children in their care are, if categorized as having 'severe substance abuse problems', seen as part of 'the least deserving group in Finnish society' (together with single men with substance abuse problems) and can, therefore, only access emergency homeless shelters (Kärkkäinen 2001, p. 192).

Mina-Coull and Tartinville (2001) question the arbitrary division of women into 'single' or 'family', arguing that many 'single' homeless women are, in fact, involved in romantic relationships but that homelessness services provide little or no accommodation for couples and that they tend not to recognize that many 'single' homeless women are mothers. This claim is supported by Swedish research (Löfstrand 2005a; Rosengren 2003, Thörn 2004), which demonstrates that mothers can be redefined as 'single' and are no longer viewed 'family' at the point when a child(ren) is placed in state care or the care of a relative (Löfstrand 2005a). Research on 'single' homeless women in Ireland has revealed that over two-thirds of the 60 women who participated in the study were mothers or expectant mothers and that the children of more than half of these mothers were currently living in either state or relative care (Mayock and Sheridan 2012a). Likewise, a UK study found that almost half of the 60 homeless women interviewed in depth were mothers and that the

children of 79 per cent of these women had either been taken into state care or adopted (Hutchinson et al. 2014). Recent research on women rough sleepers in four European countries, the UK, Hungary, Spain and Sweden, has similarly revealed that a majority of the women interviewed in all four countries were mothers who were separated from their children (Moss and Singh 2015).

In many European countries lone mothers are singled out for specific policy attention. For example, in the Irish context, O’Sullivan and Higgins (2001) argue that the recent decline in familialistic public policy has led to women’s emancipation but not to the development of public services to match women’s needs, except in the case of lone mothers. Lone parenthood may, therefore, lead to homelessness but ‘it may also prove to be a way out of homelessness’ (O’Sullivan and Higgins 2001, p. 88). As already discussed, Denmark similarly prioritizes single mothers living in social housing and in homelessness services. In contrast, however, single homeless women with high support needs, including those who have substance use and/or mental health problems and who are unlikely to have children in their care, have the fewest choices available to them in terms of places to stay (Munk et al. 2001).

Finally, in Sweden, the homeless (lone) mother, together with her child or children, is categorized as ‘family’ and generally supported as a mother *from the outset*. However, if social work services suspect that a woman has an alcohol or drug problem, and if this is not addressed, that woman is redefined as a ‘single’ homeless woman. Simultaneously, the advantages associated with the category ‘family’—particularly in terms of being prioritized for housing—are lost when a woman no longer has children in her care. The support of lone mothers (until they are ‘proven’ not to be worthy) is the result of a tradition of mother-centredness within social services and the establishment of men’s violence against women as a new area of expertise for judicial and social services during the 1990s (Lövstrand 2005a). Men’s violence against women became acknowledged as a societal problem around the same time in Sweden as in Denmark, resulting in a recognition that men’s violence against women is a leading cause of women’s homelessness (Järvinen 1992, 1993).

It is increasingly recognized that there is a strong link between women’s homelessness and men’s violence against women (see Chap. 6, this

volume), although the research literature in these two areas are quite distinct, pointing to a ‘need to learn more about the histories of all homeless people to better understand the role of victimization and violence’ (Novac et al. 1996, p. 25). A recent UK study concluded that women’s homelessness is frequently ‘rooted in histories of violence and abuse often stemming from childhood’ (Hutchinson et al. 2014, p. 4). This research clearly documents the trauma that many women had experienced from early childhood and the negative impact of these experiences on their lives. Such violence and victimization throughout the life course is arguably an ‘invisible’ dimension of women’s homelessness.

In conclusion, in many parts of Europe, homeless women with children—categorized as ‘family’—are prioritized for local authority accommodation. However, it is the presence of a child or children—not the status of motherhood—which is the main determinant of access to housing. Many of the homeless women categorized as ‘single’ are in fact mothers, but have their children placed in state or relative care (see Chap. 8, this volume, for a detailed discussion of homeless mothers who are separated from their children). When their children are living elsewhere these women are quickly reclassified as ‘single’ and are not prioritized for housing and support. They tend then, in fact, to be only eligible for a similarly low level of housing and welfare assistance as ‘single’ homeless men. Hence, the arbitrary division of women into ‘single’ or ‘family’ has a major impact on homeless women’s living conditions and their access to services.

The Invisibility of Women’s Homelessness

Women’s homelessness is so often invisible. I have no contact with my family—I had a very traumatic childhood and don’t want to see them. I did a lot of sofa surfing after I left my violent partner. But then I ran out of friends and became homeless. (Homeless woman, quoted in Hutchinson et al. 2014, p. 4)

The term ‘hidden homelessness’ was first used in Britain to refer to people without a home and living in informal living situations such as with

friends or family members on a temporary basis. As outlined earlier, the 1977 homelessness legislation in the UK prioritized homeless families, including single mothers, for rehousing. However, most single homeless people without children are not eligible for assistance of this kind. Both single homeless men and women may experience hidden homelessness but research demonstrates that some women fear and avoid homeless hostels that are designed primarily for men (Hutchinson et al. 2014; Moss and Singh 2015). As a consequence, women are likely to seek out alternative living arrangements such as ‘doubling up’ or living with friends or relatives. Research in Ireland similarly indicates that a large proportion of homeless women live for (sometimes prolonged) periods in hidden homeless situations (Mayock and Sheridan 2012a; Mayock et al. 2015b) while, in Germany, earlier research conducted by Enders-Dragässer et al. (2000) found that many women continued to live in ‘forced partnerships’, that is, in abusive home situations where they experienced domestic violence and/or sexual exploitation, because they did not have access to alternative accommodation.

Homelessness has traditionally been viewed as a largely male phenomenon that is highly visible in the public sphere, primarily affecting those sleeping rough or using homelessness shelters and, as a consequence, women’s homelessness has not been acknowledged in policy, practice or research (see Chap. 2, this volume, for a historical analysis of women’s invisibility within homelessness research and policy). As O’Sullivan and Higgins (2001, p. 77) point out, ‘[t]his is not to say that there are no homeless women’ but, rather, that women lacking housing have been ‘conceptualized as something other than homeless’. For example, in the Republic of Ireland in 2001, homeless women could access local authority accommodation when recategorized as victims of domestic violence or as parents with specific support needs.

Despite the traditional male-centred focus on rough sleepers within both research and policy, in the Nordic countries, homelessness among women came to be recognized as a specific policy problem within public debates during the 1990s and was subsequently addressed in policy, practice and research. In Denmark, a public debate about ‘the new homeless’ (Järvinen 1992, p. 118) gained a foothold during the 1990s, resulting in particular groups of homeless individuals, including homeless women

and children, becoming visible. While women had always been present in Denmark's homeless population and single women with children had been prioritized by social services, these women were henceforth recognized as *homeless* women (Järvinen 1993). Likewise, in Sweden, the public debate on homelessness has acknowledged the situations of homeless women since the 1990s. In public reports, professional discourses and in media coverage, women's homelessness is claimed to be 'private and hidden', in contrast to men's homelessness, which is claimed to be 'public and visible' (Thörn 2001). There are at least three recurrent explanations for the hidden nature of women's homelessness apparent in public reports, professional discourse and research. Firstly, there are many unrecorded cases of homelessness among women since they (more often than homeless men) stay temporarily with relatives, friends and male acquaintances; secondly, women frequently try to conceal their homelessness due to feelings of shame and; thirdly, women 'have had to live on men's terms in shelters and supported housing' (Thörn 2001, p. 220), leaving their needs as (homeless) women largely unattended. Together, these three dimensions of hidden homelessness among women produce an image of a homeless woman who is 'dependent and vulnerable', leading to the now established assumption in Sweden that homeless women need access to accommodation and services designated for women only (Thörn 2001, pp. 220–221, see also Sahlin and Thörn 2000; Thörn 2004, Löfstrand 2005a). Such services have been established but they do not accommodate all 'single' homeless women, although the reasons for this have not been systematically researched.

Recognition of the nature and extent of hidden homelessness among women has led to a number of studies on the topic in several European countries (see, for example, Watson 2000; Reeve et al. 2006, 2007). Single women lacking housing are increasingly categorized as homeless and viewed as a specific target group with specific needs that differ from those of men within homelessness services in the UK, Ireland, Sweden, Denmark and Germany (Aldridge 2001; Enders-Dragässer 2010; Järvinen 1993; O'Sullivan and Higgins 2001; Löfstrand 2005a; Thörn 2004). While the 'hiddenness' of women's homelessness varies greatly between countries throughout Europe, it now seems that women's homelessness—hidden as well as overt—has become more visible as a policy problem and acknowl-

edged in research to a far greater extent than previously (albeit not sufficiently so) in Nordic countries, as well as in Germany, Britain, Ireland and elsewhere throughout Europe. Many researchers across Europe stress the need for gender-specific homelessness policies and services aimed at meeting the specific needs of women (Baptista 2010; Edgar and Doherty 2001; Enders-Dragässer 2010; Hutchinson et al. 2014; Mayock et al. 2015a, b). However, research also shows that such services tend to be based on an image of homeless women as sexually exploited victims who need to be helped and 'fixed', reflecting commonly held attitudes in society that blame women for their situations and explain their homelessness as 'the result of substance use, mental health problems, bad choices, laziness, or simple bad luck' (Paradis et al. 2012, p. 7). Both public and professional discourses on homeless women tend to depict them as 'sexually exploited and repressed by men' (Sahlin and Thörn 2000, p. 70) and, therefore, as having needs that require them to subject themselves to specific rules and regulations. Getting rehoused can be contingent on the break-up of a relationship with a man, on women's consent to substance abuse treatment and/or on their undertaking training in traditional female activities (for example, sewing, baking and applying make-up), which are seen as essential to improving 'their lifestyle and manners', thus reinforcing traditional images of womanhood (Sahlin and Thörn 2000, p. 70; Lövstrand 2005a). This particular image of homeless women and related policy responses have sometimes led to women leaving homelessness services targeting women and/or avoiding them altogether (Thörn 2001; Paradis et al. 2012). Being portrayed as dependent, vulnerable, sexually exploited and helpless victims is stigmatizing and demeaning for homeless women, sometimes to such an extent that they may decline opportunities to access homelessness services. There is, therefore, a need to be cautious about *how* women's homelessness is made visible (Doherty 2001; Thörn 2001, 2004) since it has a major impact on service provision, women's experiences of services and providers and, ultimately, on the extent to which services can help and support women.

A recent Canadian study of 150 homeless women by Paradis et al. (2012) examined homeless women's personal experiences of homelessness as well as their views on the causes and consequences of, and solutions to, homelessness. The study is methodologically unique in that homeless

women were included as equals in the research process, thus providing a forum for them to discuss their experiences and to also propose solutions. This participatory research approach was adopted on the grounds that '[i]t takes amazing strength and resourcefulness to survive homelessness and poverty, and women have a lot of wisdom to share that can make a difference' (Paradis et al. 2012, p. 6). Other research on homeless women has similarly highlighted the importance of methods of inquiry that allow the strengths of homeless women to be witnessed 'without minimizing the reality of their plight' (Hordyk et al. 2014, p. 217). For the women in the study conducted by Paradis et al. (2012), good practice within homelessness services included access to shelter and food and also promoted and upheld women's dignity and strengths. In the words of one woman who was critical of homelessness services and providers, '[t]he way they address you, it's like a child who doesn't know anything. The way they speak to you, it's better just leaving' (Paradis et al. 2012, p. 11). The authors concluded that many homeless women had left services because their right to dignity, autonomy and self-determination had been violated, even if it meant that they had to, again, find other means of securing access to (temporary) accommodation and other material needs (see also Hoffman and Coffey 2008; Löfstrand 2005a). Research based on the biographies of homeless women in Ireland has also found evidence of the infantilization of women within homelessness services (Mayock et al. 2015a, b), as well as women's struggles with the rules and regulations dictating their movements, daily routines and their interactions with their children.

The available research on homeless women's perspectives on services (Löfstrand 2005a; Mayock et al. 2015a, b; Paradis et al. 2012; Thörn 2001, 2004) indicates that the hiddenness of women's homelessness may not only have to do with having nowhere else to go and no one else to turn to apart from an (abusive) partner or having lived on men's terms in shelters and/or supported housing, but is *also* associated with perceived oppressive practices on the part of the staff within homelessness services. These findings point to a need for research into *women's own reasons* for leaving or refusing to reside in both mixed and women-only services.

Despite the fact that homelessness as a policy problem has traditionally been equated with male rough sleeping and shelter use, women's homelessness is now increasingly recognized as a policy problem. Although

not prominent—and, in some cases, not visible within policy agendas throughout Europe—women’s homelessness has been acknowledged and addressed to some extent in Northern Europe, where women’s homelessness has become more visible. However, while homeless women with children inhabit a privileged position, at least in some European countries, little is known about the extent to which the acknowledgement of women’s homelessness as a policy problem has improved the living conditions of single homeless women. Research shows that single women who experience homelessness are not prioritized for housing support and services; they are often referred to the shelter industry but, for different reasons, are likely to seek out alternative living arrangements such as living with friends or relatives. It is for these reasons that women’s homelessness remains a ‘hidden’ problem (with many unrecorded cases). There is research evidence in the USA and also in Northern Europe of women experiencing stigmatization, infantilization and oppression within service settings to such an extent that some choose to leave both mixed and women-only services. These findings highlight a need to be cautious about *how* women’s homelessness is made visible as well as a need for research that specifically examines women’s reasons for leaving homelessness services.

Implications for Policy and Practice

Feminist analyses tend to view the welfare state either as an instrument of oppression or as a tool for the emancipation and empowerment of women (Bang et al. 2000, cited in Doherty 2001). However, it can be claimed that the welfare state has the *potential* to be both oppressive and emancipating or empowering and that whether or not the welfare state oppresses or emancipates (homeless) women is dependent on the type of gender regime and is, therefore, an empirical question (Walby 2011). Comparative European research on the experiences of homeless women is clearly needed in order to assemble the knowledge required to inform the development of appropriate policies, practices and services that aim to emancipate rather than oppress homeless women.

In this chapter the conditionality of homeless women's access to services has been made visible. Such access and, hence, the chances of women exiting homelessness appear to be largely contingent on their conduct and their preparedness to act and behave in line with norms of femininity and ideals about motherhood. Women whose behaviour challenges these gendered expectations may be exposed to sanctions as women and as mothers, including, for example, eviction from homeless accommodation and having their child/children taken into care. It is important that services for homeless women are built on 'the principles of dignity, autonomy, and self-determination' (Paradis et al. 2012, p. 11) as, otherwise, there is a risk that women will avoid services and find themselves in situations and contexts where they experience further isolation, distress and violence, in some cases.

Welfare and housing policy in Europe can be seen as protecting some categories of homeless women (particularly those with children in their care) and, simultaneously, as ignoring or disempowering others, particularly 'single' homeless women. Most often, protection or assistance is offered to a 'family' rather than a woman or mother and, when children are living elsewhere and/or have been placed in state care or care of a relative, women are quickly reclassified as 'single' and are not prioritized for help and support despite arguably having the greatest needs. In this sense, 'single' homeless women tend to be eligible for a similarly low level of housing and welfare assistance as 'single' homeless men. However, throughout Europe, assistance for homeless people without children has primarily targeted men due to their greater visibility. In contrast, single women's homelessness has largely been 'hidden' because many women seek alternative solutions to their situations, partly because of the gendered nature of homelessness service provision. In some countries, women-specific services are available but they tend to target the most vulnerable homeless women with high support needs and have been criticized for stigmatizing their situations further and for violating basic human rights such as dignity and self-determination. Women may, therefore, seek to avoid women-only homelessness services because these services are also experienced as oppressive. The reasons for women avoiding homelessness services appear to be multiple and complex, implying a need for further research. Research on the biographies and life experiences of homeless

women (and men) is also needed if the role of victimization in relation to gendered pathways into and out of homelessness is to be more fully understood.

This chapter has shown how images of family, women (and men), homelessness and home have shaped the development of policies and practices aimed at assisting women who experience homelessness. In some cases, these images and discourses have led to greater access to housing for women but, in others, the marginalization of women's experiences has served to reinforce an already hidden problem. The power of culturally specific definitions and images of homelessness is significant and it is important not to construct a singular picture of 'the homeless woman' or of women's homelessness. Arguably, also, too little research has focused on women's access to affordable, appropriate housing.

Access to homeless accommodation and other services, as well as the chances of women exiting homelessness, appear to be conditional upon the conduct of individual women. Furthermore, since the design and organization of services for homeless women on the basis of gendered stereotypes may serve to alienate many women, service providers and researchers need to include homeless women as equals to a far greater extent than previously and to be aware of the potential negative ramifications of treating women as objects of control and as research subjects. This would mean making real use of women's knowledge about homelessness in general and, in particular, the causes of and solutions to women's homelessness. While research on homeless women has tended to produce conclusions about women facing homelessness, their problems and how these could be resolved—often resulting in strategies aimed at controlling and changing women within the framework of new or existing services—homeless women themselves strongly recommend improved service provision as a means of combatting (women's) homelessness, including for example, better integration of and fewer barriers to accessing services. Furthermore, homeless women themselves tend to stress the need for improvements in the overall approach of service providers, based on the concept of empowerment (rather than control and surveillance) and which simultaneously acknowledges their 'skills, knowledge and strengths' (Mayock et al. 2015a, b; see also Paradis et al. 2012, p. 5). Unless we do this, there is a risk that the helping system

will inadvertently perpetuate—rather than work to address and resolve—homelessness among women.

Conclusion

There is a need for policymakers, practitioners and researchers to be cautious about how homelessness among women is depicted and made visible since, as evident from the research findings presented in this chapter, the power of definitions and cultural images is significant. There is a clear need for a European-wide research on homelessness services for women (including both mixed and women only services) that is participatory in orientation and privileges women's perspectives and experiences if we are to more fully understand how best to design homelessness and housing services that respect the autonomy and dignity of women. Within both policy and practice much of the focus to date has been on changing the behaviour of homeless women. Arguably, there is now a need to more critically appraise the nature of service provision for homeless women. In some parts of Europe this may mean changing existing service provision whereas, in other parts, services may need to be completely reconfigured. Finally, any reappraisal of services for homeless women must also focus on the broader contextual picture, in terms of women's access to affordable and appropriate housing, alongside a consideration of their social and economic opportunities and rights more broadly.

References

- Aldridge, R. (2001). Women and homelessness in the United Kingdom. In B. Edgar & J. Doherty, (Eds.), *Women and homelessness in Europe: Pathways, services and experiences* (pp. 91–101). Bristol: The Policy Press.
- Amore, K., Baker, M., & Howden-Chapman, P. (2011). The ETHOS definition and classification of homelessness: An analysis. *European Journal of Homelessness*, 5(2), 19–27.
- Austerberry, H., & Watson, S. (1981). A woman's place: A feminist approach to housing in Britain. *Feminist Review*, 8, 49–62.

- BAG W: Bundesarbeitsgemeinschaft Wohnungslosenhilfe e. V. (2011). *Schätzung und Prognose des Umfangs der Wohnungsnotfälle 2009–2010* [Estimation and outlook for cases in urgent need of housing, 2009–2010]. In *wohnungslos*, no. 4. (pp. 129–131). BAG Wohnungslosenhilfe e.V., Bielefeld.
- BAG W: Bundesarbeitsgemeinschaft Wohnungslosenhilfe e. V. (2015). *Zahl der Wohnungslosen* [Number of homeless]. Retrieved from http://www.bagw.de/themen/zahl_der_wohnungslosen/index.html
- Bang, H., Jensen, P. H., & Pfau-Effinger, B. (2000). Gender and European welfare states. In S. Duncan & B. Pfau-Effinger, (Eds.), *Gender, economy and culture in the European Union* (pp. 115–142). London: Routledge.
- Baptista, I. (2010). Women and homelessness. In E. O’Sullivan, V. Busch-Geertsema, D. Quilgars, & N. Pleace, (Eds.), *Homelessness research in Europe* (pp. 163–185). Brussels: FEANTSA.
- Benjaminsen, L., & Hesselberg Lauritzen, H. (2015). *Hjemløshed i Danmark 2015: National Kortlægning* [Homelessness in Denmark: National mapping]. Copenhagen, SFI—The Danish National Centre for Social Research, Report 2015: 35.
- Berger, P., & Luckman, T. (1966). *The social construction of reality: A treatise in the sociology of knowledge*. New York: Anchor Books.
- Busch-Geertsema, V. (2010). Measuring homelessness. In E. O’Sullivan, V. Busch-Geertsema, D. Quilgars, & N. Pleace (Eds.), *Homelessness research in Europe* (pp. 19–39). Brussels: FEANTSA.
- Casey, S. (2002). Snakes and ladders: Women’s pathways into and out of homelessness. In T. Eardley & B. Bradbury (Eds.), *Competing visions. Proceedings of the National Policy Conference*, Sydney, 4–6 July 2001 (pp. 75–90). Retrieved from https://www.sprc.unsw.edu.au/media/SPRCFile/NSPC01_RefereedProceedings.pdf
- Central Statistics Office. (2012). *Homeless persons in Ireland: A special census report*. Dublin: Central Statistics Office, Ireland.
- Clapham, D. (2003). Pathways approaches to homelessness research. *Journal of Community & Applied Social Psychology*, 13, 119–127.
- Clapham, D. (2005). *The meaning of housing: A pathways approach*. Bristol: Policy Press.
- Department of the Environment, Community & Local Government. (2016). *Homelessness Report April 2016*. Retrieved from file:///C:/Users/pmayock/Downloads/Department%20of%20the%20environment_homelessness_report_april_2016%20(2).pdf

- Doherty, J. (2001). Gendering homelessness. In B. Edgar & J. Doherty (Eds.), *Women and homelessness in Europe: Pathways, services and experiences* (pp. 9–20). Bristol: The Policy Press.
- Edgar, B. (2001). Women, the housing market and homelessness. In B. Edgar & J. Doherty, (Eds.), *Women and homelessness in Europe: Pathways, services and experiences* (pp. 21–45). Bristol: The Policy Press.
- Edgar, B., & Doherty, J. (2001). *Women and homelessness in Europe: Pathways, services and experiences*. Bristol: The Policy Press.
- Edgar, B., Meert, H., & Doherty, J. (2004). *Third review of statistics on homelessness in Europe*. Brussels: FEANTSA.
- Enders-Dragässer, U. (2001). Women, exclusion and homelessness in Germany. In B. Edgar & J. Doherty (Eds.), *Women and homelessness in Europe: Pathways, services and experiences* (pp. 207–218). Bristol: The Policy Press.
- Enders-Dragässer, U. (2010). Women and homelessness in Germany. *Homeless in Europe—The Magazine of FEANTSA*: 12–14. Retrieved from <http://www.feantsa.org/spip.php?article147&lang=en>
- Enders-Dragässer, U., Sellach, B., Feig, A., Jung, M.-L., & Roscher, S. (2000). *Frauen ohne Wohnung. Handbuch für die ambulante Wohnungslosenhilfe für Frauen. Modellprojekt 'Hilfen für alleinstehende wohnungslose Frauen* [Women without housing. Manual for mobile homeless women. Model project aid for single homeless women]. Schriftenreihe des Bundesministeriums für Familie, Senioren, Frauen und Jugend, Band 186: Kohlhammer, Stuttgart, Berlin, Köln.
- Esping-Andersen, G. (2002). A child-centred social investment strategy. In G. Esping-Andersen (Ed.), *Why we need a new welfare state* (pp. 27–67). Oxford: Oxford University Press.
- Hoffman, L., & Coffey, B. (2008). Dignity and indignation: How people experiencing homelessness view services and providers. *The Social Science Journal*, 45(2), 207–222.
- Hordyk, S. R., Soltane, S. B., & Hanley, J. (2014). Sometimes you have to go under water to come up: A poetic, critical realist approach to documenting the voices of homeless immigrant women. *Qualitative Social Work*, 13(2), 203–220.
- Hutchinson, S., Page, A., & Sample, E. (2014). *Rebuilding shattered lives*. London: St Mungos.
- Järvinen, M. (1992). Om Hemlösa Kvinnor i Köpenhamn [On homeless women in Copenhagen]. *Socialvetenskaplig Tidskrift*, 2, 117–130.

- Järvinen, M. (1993). *De nye hjemløse. Kvinder, fattigdom, vold* [The new homeless: Women, poverty and violence]. Holte: SOCPOL.
- Jones, G. (2000). Experimenting with households and inventing' home. *International Social Science Journal*, 52(2), 183–194.
- Kärkkäinen, S. L. (2001). Substance abuse problems and women's homelessness in Finland. In B. Edgar & J. Doherty (Eds.), *Women and homelessness in Europe: Pathways, services and experiences* (pp. 183–193). Bristol: The Policy Press.
- Lövstrand, C. (2005a). *Hemlöshetens politik—lokal policy och praktik* [The politics of homelessness—Local policy and practice]. Doctoral dissertation. Malmö: Égalité.
- Lövstrand, C. (2005b). *Making men into fathers—or fathers into men? Gendered homelessness policies in Sweden*. Paper presented at the 7th Conference of the European Sociological Association (ESA), Torun, 9–12 September 2005. Retrieved from www.ics.ul.pt/esa/papersleft/cecilia.pdf
- Loseke, D. R. (2003). *Thinking about social problems: An introduction to constructionist perspectives* (2nd ed.). New York: Aldine de Gruyter.
- Mallett, S. (2004). Understanding home: A critical review of the literature. *The Sociological Review*, 52(1), 62–89.
- May, J. (2000). Housing histories and homeless careers: A biographical approach. *Housing Studies*, 15(4), 613–638.
- May, J., Cloke, P., & Johnsen, S. (2007). Alternative cartographies of homelessness: Rendering visible British women's experiences of 'visible' homelessness. *Gender, Place & Culture: A Journal of Feminist Geography*, 14(2), 121–140.
- Mayock, P., & Sheridan, S. (2012a). *Women's 'Journeys' to homelessness: Key findings from a biographical study of homeless women in Ireland*. Women and Homelessness in Ireland, Research Paper 1. Dublin: School of Social Work and Social Policy and Children's Research Centre, Trinity College Dublin.
- Mayock, P., & Sheridan, S. (2012b). *Migrant women and homelessness: Key findings from a biographical study of homeless women in Ireland*. Women and Homelessness in Ireland, Research Paper 2. Dublin: School of Social Work and Social Policy and Children's Research Centre, Trinity College Dublin.
- Mayock, P., Parker, S., & Sheridan, S. (2015a). *Women, homelessness and service provision*. Dublin: Simon Communities in Ireland.
- Mayock, P., Sheridan, S., & Parker, S. (2015b). 'It's just like we're going around in circles and going back to the same thing...': The dynamics of women's unresolved homelessness. *Housing Studies*, 30(6), 877–900.

- Mina-Coull, A., & Tartinville, S. (2001). Homeless women in France. In B. Edgar & J. Doherty (Eds.), *Women and homelessness in Europe: Pathways, services and experiences* (pp. 141–151). Bristol: The Policy Press.
- Moss, K., & Singh, P. (2015). *Women rough sleepers in Europe: Homelessness and victims of domestic abuse*. Bristol: Policy Press.
- Munk, A., Koch-Nielsen, I., & Raun, M. (2001). Women, homelessness and the welfare state in Denmark. In B. Edgar & J. Doherty (Eds.), *Women and homelessness in Europe: Pathways, services and experiences* (pp. 115–125). Bristol: The Policy Press.
- National Board of Health and Welfare. (2011). *Hemlöshet och utestängning från bostadsmarknaden 2011—omfattning och karaktär* [Homelessness and exclusion from the housing market—Extent and character]. Stockholm: The National Board of Health and Welfare.
- Novak, S., Brown, J., & Bourbonnais, C. (1996). *No room of her own: A literature review on women and homelessness*. Ottawa: Canada Mortgage and Housing Corporation.
- Orloff, A. (1996). Gender in the welfare state. *Annual Review of Sociology*, 22, 51–78.
- O’Sullivan, E., & Higgins, M. (2001). Women, the welfare state and homelessness in the Republic of Ireland. In B. Edgar & J. Doherty (Eds.), *Women and homelessness in Europe. Pathways, services and experiences* (pp. 77–89). Bristol: The Policy Press.
- Padgett, D. (2007). There’s no place like (a) home: Ontological security among persons with serious mental illness in the United States. *Social Science & Medicine*, 64(9), 1925–1936.
- Paradis, E., Bardy, S., Cummings Diaz, P., Athumani, F., & Pereira, I. (2012). *We’re not asking, we’re telling. An inventory of practices promoting the dignity, autonomy, and self-determination of women and families facing homelessness*. Toronto: The Canadian Homelessness Research Network Press. Report housed on the Homeless Hub Retrieved from www.homelesshub.ca/Library/View.aspx?id=55039
- Passaro, J. (1996). *The unequal homelessness: Men on the streets, women in their place*. New York: Routledge.
- Pawson, H. (2007). Local authority homelessness prevention in England: Empowering consumers or denying rights? *Housing Studies*, 6(22), 867–883.
- Pels, M. (2001). Homeless women in Luxembourg: What do they expect of services? In B. Edgar & J. Doherty (Eds.), *Women and homelessness in Europe: Pathways, services and experiences* (pp. 197–206). Bristol: The Policy Press.

- Pleace, N., & Bretherton, J. (2013). *Measuring homelessness and housing exclusion in Northern Ireland: A test of the ETHOS typology*. Belfast: Northern Ireland Housing Executive. http://www.nihe.gov.uk/measuring_homelessness_and_housing_exclusion_in_northern_ireland.pdf
- Pleace, N., Fitzpatrick, S., Johnsen, S., Quilgars, D., & Sanderson, D. (2008). *Statutory homelessness in England: The experience of families and 16-17 year olds*. London: Department for Communities and Local Government.
- Quilgars, D. (2011). Housing and the environment for children. In J. Bradshaw (Ed.), *The well-being of children in the UK* (pp. 135–155). Bristol: Policy Press.
- Reeve, K., Casey, R., & Goudie, R. (2006). *Homeless women: Still being failed yet striving to survive*. London: CRESR/CRISIS.
- Reeve, K., Goudie, R., & Casey, R. (2007). *Homeless women: Homelessness careers, homelessness landscapes*. London: CRISIS.
- Rosengren, A. (2003). *Mellan ilska och hopp. Om hemlöshet, droger och kvinnor* [Between anger and hope. On homelessness, drugs and women]. Stockholm: Carlssons Bokförlag.
- Sahlin, I., & Thörn, C. (2000). *Women, exclusion and homelessness*. National Report from Sweden to the European Observatory on Homelessness 1999. Brussels: FEANTSA.
- Skeivik, A. (2006). Lone motherhood in the Nordic countries: Sole providers in dual breadwinner regimes. In A. L. Ellingsæter & L. Arnlaug (Eds.), *Politicising parenthood in Scandinavia: Gender relations in welfare states* (pp. 241–264). Bristol: The Policy Press.
- Taylor, D. (1998). Social identity and social policy: Engagements with post-modern theory. *Journal of Social Policy*, 27(3), 329–350.
- Thörn, C. (2001). (In-)visibility and shame: The stigma of being a woman and homeless in Sweden. In B. Edgar & J. Doherty (Eds.), *Women and homelessness in Europe: Pathways, services and experiences* (pp. 219–229). Bristol: The Policy Press.
- Thörn, C. (2004). *Kvinnans plats(er)—bilder av hemlöshet* [A woman's place(s)—Images of homelessness]. Doctoral Dissertation. Stockholm: Égalité.
- Tomas, A., & Dittmar, H. (1995). The experience of homeless women: An exploration of housing histories and the meaning of home. *Housing Studies*, 10(4), 493–515.
- Walby, S. (2011). *The future of feminism*. Cambridge: Polity Press.
- Watson, S. (1984). Definitions of homelessness: A feminist perspective. *Critical Social Policy*, 4(60), 60–73.

- Watson, S. (2000). Homelessness revisited: New reflections on old paradigms. *Urban Policy and Research*, 18(2), 159–170.
- Watson, S., & Austerberry, H. (1986). *Housing and homelessness: A feminist perspective*. London: Routledge and Kegan Paul.
- Wilcox, S., Perry, J., & Williams, P. (2015). *UK housing review 2015*. Coventry: Chartered Institute of Housing.

4

Women's Homelessness and Welfare States

Joanne Bretherton, Lars Benjaminsen,
and Nicholas Pleace

Introduction

This chapter discusses the relationships between women's homelessness and European welfare states. Exploring existing ideas about how the characteristics of welfare states may influence homelessness, the authors argue that the predominant thesis about the relationships between homelessness and welfare regimes has neglected gender difference. The extent to which welfare states within different welfare regimes may have an independent effect on the nature and extent of women's homelessness is discussed. It is argued that while there is an ongoing need to better understand how welfare states may influence women's homelessness, there are enough data to suggest that women's experience of homelessness can

J. Bretherton (✉) • N. Pleace
University of York, York, UK
e-mail: joanne.bretherton@york.ac.uk

L. Benjaminsen
Danish National Centre for Social Research, Copenhagen, Denmark

© The Author(s) 2016
P. Mayock, J. Bretherton (eds.), *Women's Homelessness in Europe*,
DOI 10.1057/978-1-137-54516-9_4

be at least partially determined by the design of welfare states. However, it is also the case that multiple, diverse variables may influence women's experience of homelessness, how homeless women interact with welfare states, and also how welfare states themselves operate.

The Existing Hypothesis

Better Welfare Systems Mean Less Homelessness

Esping-Andersen's typology of welfare regimes is generally the starting point for any discussion of how welfare states might influence the nature and extent of homelessness in different European countries. The original welfare regime typology advanced by Esping-Andersen (1990) has been the subject of criticism and argument ever since it first appeared. Arguments range from support for the typology as a useful conceptual tool, through to the dismissive, asserting that the typology is inherently imprecise, unravelling as soon as any two welfare states supposedly within the same category of welfare regime are examined in any detail (Powell 2015). The three worlds of welfare capitalism that Esping-Andersen identified have also been in a state of flux since 1990, as some developed economies reoriented welfare policy with the goal of making citizens develop a higher degree of self-reliance and agency (Giddens 1994). It has become common practice to take the original typology as a starting point and to add categories, with the goal of presenting a more 'accurate' typology of contemporary welfare regimes. In the European context, the resulting typology tends to look something like this (Busch-Geertsema et al. 2010; O'Sullivan 2011):

- The *social democratic regime* includes redistributive welfare states, in which employment is flexible and there are universal, extensive social welfare and unemployment benefits. Examples include Denmark, Finland, Norway and Sweden.
- The *corporatist regime* includes welfare states in which there is a pooling of risk by society, contributing to a common resource that can be accessed by those in need. These systems have less emphasis on redistribution than social democratic regimes. Examples include Austria, France and Germany.

- The *liberal regime* encompasses welfare states that provide means-tested benefits to the unemployed and those unable to work, on the assumption that most citizens should be economically active and fend for themselves. Ireland and the UK countries are examples within Europe.
- The *Southern European or Mediterranean regime* includes those welfare states operating on the basis that social support is expected to be delivered primarily by family, not by the state. Welfare systems therefore exist for when family is unavailable or unable to provide support. Within these systems, women are assumed to take caring roles, in terms of children and any adults or older people with support needs who are family members. Examples include Greece, Italy, Portugal and Spain.
- The *post-socialist regime* includes welfare states operating transfer oriented labour market measures, that is, they provide income replacement when economic activity by an individual or household does not generate enough to live on, or when someone cannot be economically active. There is some legal protection of people in employment. The extent of protection for workers and the level at which benefits are paid varies, but can be quite limited. Examples include the Czech Republic, Hungary and Slovenia and the Baltic states. The Baltic states, with their more flexible labour markets, are sometimes separately categorized as within a liberal, post-socialist welfare regime.

Meert, writing in 2005, advanced the thesis that homelessness in Nordic countries, like Denmark, was a *residual* social problem. According to Meert, an extensive welfare state offering widely accessible and generous social protection stopped homelessness occurring on a large scale. Homelessness was, according to this idea, only experienced by people who faced barriers to the extensive health, benefit and social work systems that formed an effective safety net for most of the population. Those barriers were centred on high and complex individual support needs. It was the inability of mainstream services to effectively engage with homeless people who, for example, presented with severe mental illness and problematic drug and alcohol use, that created a small group of people experiencing sustained and recurrent homelessness. This required Denmark to create homelessness programmes and specific homelessness services (Benjaminsen 2013).

Stephens and Fitzpatrick (2007) have suggested the same broad idea, asserting that homelessness is skewed by welfare regimes. According to this argument, less extensive, less generous regimes allow more homelessness to occur that is generated primarily by income poverty in combination with systemic social and economic disadvantage. By contrast, it is contended that only relatively small groups of people with complex needs, which effectively act as barriers to mainstream welfare and health services, are likely to become homeless in countries with extensive welfare systems. Becoming homeless in a country with extensive social protection systems occurs, according to this argument, because someone cannot access those systems, because their behaviour is challenging, their needs cannot be managed by orthodox services, or those services operate in ways that are unsympathetic or which make them inaccessible to certain groups of homeless people.

There is some evidence to support these arguments. Nordic countries, with their extensive and generous welfare regimes, do have less homelessness overall and also less homelessness linked largely or wholly to economic causation. Denmark has evidence, drawn from extensive administrative and survey data, that there is indeed the small, high-need homeless population that would be expected in a highly developed welfare state within the social democratic welfare regime (Benjaminsen 2015; Benjaminsen and Andrade 2015). Evidence from point-in-time counts in Finland, within the same group of states within the social democratic welfare regime, shows the same pattern (Pleace et al. 2015).

By contrast, data from France, Spain and the UK suggest the presence of people within homeless populations who have low support needs, whose homelessness appears linked to socio-economic disadvantage, alongside apparently smaller groups of homeless people with *high* support needs (Brousse 2009; Jones and Pleace 2010; Sales 2015). There is also evidence of the presence of a precariously housed, poor population in some European countries, who can fall into homelessness and then self-exit into insecure housing situations that do not ever really constitute a stable home (Meert and Bourgeois 2005).

The patterns in some European countries, such as France and the UK, appear to broadly mirror the nature, if not necessarily the extent, of the homeless populations reported in the USA and Canada. Governments

have interpreted the research evidence as homelessness in North America comprising a small, high-cost, high-risk group of 'chronically' homeless people alongside a larger group whose 'transitional' homelessness is linked primarily to socio-economic position. Academic interpretations of the data have been more nuanced, identifying three or sometimes more subgroups in the homeless population (Aubry et al. 2013; Culhane and Kuhn 1998; see Chap. 9, this volume).

European welfare states within the Southern European and post-socialist regimes, offering a comparatively restricted array of less generous support, should, according to the existing thesis on homelessness and welfare regimes, have more homelessness. Less extensive safety nets for poor individuals and households should mean more 'economic' homelessness, or at least homelessness where a primary driver of causation is poverty. Equally, lower health and social services spending should also mean that homelessness associated with unmet, high support needs would also be higher (Stephens and Fitzpatrick 2007). However, particularly in Southern Europe, higher expectations for family members to support each other when in acute need of housing may counteract the effect of weaker welfare systems, meaning that both women and men with particularly weak family ties, or who lack family, may be the most vulnerable.

There is a problem in testing whether welfare states within Mediterranean and post-socialist welfare regimes experience homelessness in different ways, or to a greater extent, than comparatively more extensive welfare states, which centres on data availability. Homelessness statistics generally become less reliable as European countries become relatively poorer, which means that less extensive welfare states often have limited data on homelessness. Some European countries with more extensive welfare states *also* lack good quality statistical data on homelessness. Testing the thesis that more extensive welfare systems reduce the level of homelessness and change the nature of homelessness is not really possible at present, as there are not enough comparable data (Busch-Geertsema et al. 2014; Domergue et al. 2015). The thesis that homelessness is influenced by welfare regimes is partially supported by some evidence (Benjaminsen and Andrade 2015), but that evidence does not describe the entirety of any national homeless population. The extent to which homelessness is influenced by welfare states, along with the wider

question as to whether welfare states within the same regime type in the Esping-Andersen taxonomy have similar forms of homelessness, is yet to be conclusively evidenced (Domergue et al. 2015).

The idea that more equitable European societies with higher quality welfare systems have less homelessness does make immediate, intuitive sense (Domergue et al. 2015). Yet, it is also the case that there are also some other limitations to this thesis that need critical consideration; it is these limitations—with a particular focus on women's homelessness—that this chapter now considers.

Homeless Women in the Existing Hypothesis

The existing hypothesis makes little or no allowance for possible effects of gender difference within homeless populations. Available data are based on surveys and administrative systems, both of which, based on what knowledge we have of women's homelessness, are inherently more likely to record homeless men than homeless women (see Chap. 5, this volume). It cannot be assumed, just because they are not recorded by administrative systems and research with narrow coverage, that women's homelessness is equivalent to only a fraction of the scale of male homelessness (Baptista 2010; Jones 1999; Mayock et al. 2015; Reeve et al. 2007). The predominant thesis about how welfare regime types relate to homelessness is therefore based on data that may well be skewed towards male homelessness and which underplay women's homelessness. The point about wider data availability has already been made but is worth reiterating; the predominant thesis is not only based on what may be data that are artificially skewed by an inadvertent focus on male homelessness, but it is also based on what are incomplete and inconsistent data on all forms of homelessness.

Homeless Women's Use of Homelessness Services

Variations in the way that women engage with homelessness services may influence their relationships to welfare states. One potential issue here is that women will not engage with homelessness services at the same

rate as men. The consequences of this may be twofold; first, women may lack access to subsistence and basic support which men use at higher rates and second, homeless women may not be able to access mainstream welfare and health services because they are not accessing homelessness services that use case management to create a conduit between a homeless person and mainstream welfare systems. Some evidence indicates that women may not engage at all with homelessness services or may delay their engagement until informal sources of support have been exhausted (Jones 1999; Reeve et al. 2007).

Existing research indicates women are more likely to use informal arrangements, relying on friends, relatives or acquaintances to keep a roof over their heads, than they are to use homelessness services. Women, particularly when on the street but also in respect of accessing some homelessness services, will avoid situations where they feel potentially unsafe, adding to the possibility that they will be less visible to surveys and, if they are not using homelessness services, will also not be recorded in administrative systems (see Chap. 5, this volume).

It can be theorized that if women who are homeless, or at risk of homelessness, are less likely to have contact with homelessness services, their homelessness could sometimes be more *strongly influenced* by their relationships to welfare states than is the case for men, particularly in relation to the potential for a *disconnect* between homeless women and welfare states. This disconnect, as noted, may exist in the sense that women access homelessness services that can create a conduit between homeless people and welfare systems that might otherwise be difficult to reach, at lower rates or at a later point.

Homeless people often tend to get at least some support from homelessness services, even in contexts where health and welfare services are relatively limited, such as in Eastern and Southern Europe. Basic subsistence needs, if not provided by welfare states, may be met by homelessness services providing food and/or shelter. Where homelessness services provide more services, or can facilitate access to services through case management, which might range from basic medical care through to mental health and drug services, homeless people using them get at least some access to treatment and care.

If use of homelessness services truly is, as some evidence does now suggest, highly gendered and women are not engaging with these services at the same rate as men, there could be negative consequences. Homeless women are often going to be more reliant on whatever informal support they can get and on those health, care and welfare services that are not specifically intended for homeless people, which as research has demonstrated can be less accessible to homeless populations than other groups (Baptista 2010; Jones 1999; Mayock et al. 2015; Reeve et al. 2007). Again, it is the potential for disconnect between homeless women and welfare systems that is the important point here. If homeless women have limited or poor support from informal sources and are not using homelessness services, they may have nothing in place to mitigate or counteract the barriers to mainstream health and welfare services that any homeless person can face, such as local connection rules (Baptista et al. 2015).

As mentioned, another possibility supported by some research evidence is that women engage with homelessness services at a later point in their homelessness, only when informal supports and arrangements have been exhausted. This pattern, reported among lone parent women families in America in the 1990s (Shinn et al. 1998), was also found among lone women parents accessing the statutory homelessness system in the UK in the mid-2000s (Pleace et al. 2008). This suggests that when homeless women do seek help from homelessness services, the effects of homelessness and other interrelated negative experiences may have already been considerable. This may mean that some homeless women are presenting to services at a point when their needs may be more acute than those of men, because they have endured homelessness and/or gone without service support for longer.

However, there is also evidence of unresolved, long-term and recurrent homelessness associated with high support needs among women, suggesting that women are not seeking help, or are unable to access help, at any point during their homelessness (Mayock and Sheridan 2012).

Women's use of homelessness services seems likely to be influenced by what those services are like. If a woman is offered a housing-led or Housing First service that provides her with her own ordinary housing in the community and mobile support, or she is offered other specialist women-only homelessness services, she is more likely to use those services.

The prospect of her own home and necessary support, or help within a safe, appropriately staffed single-site homelessness service, is a very different prospect from facing an emergency shelter, with shared sleeping areas, and minimal staffing (Bretherton and Pleace 2015; Pleace 2000).

If a woman cannot access informal support, from a friend, relative or partner, avoids using homelessness services (for example, because they are overwhelmingly used by men) and also finds herself confronted by barriers to mainstream welfare systems, the risks of her experiencing long-term and recurrent homelessness would seem set to increase (Mayock et al. 2015). There is some evidence, largely based on data on homeless men, of homeless people experiencing deterioration in their health and well-being and of their likelihood of self-exiting from homelessness falling over time. Here the failure is systemic as individual support needs, even where initially low, were not recognized and met early on leading to a sustained experience of homelessness (Culhane et al. 2013).

While both men and women can resort to friends or relatives when confronted with homelessness, particularly when they are young, women are more likely to do so (Quilgars et al. 2008). If homeless women are less likely to seek *any* type of formal assistance, or more or less likely to seek specific types of support than men, this has potentially important implications.

Homeless women may, at least in some cases, be living 'off-grid', not connected to homelessness services, domestic violence services or to mainstream welfare services, not because those services are necessarily unavailable, but because their primary strategy in response to homelessness centres on informal support. If the arguments of Shinn et al. (1998) and others are correct, it is less the case that homeless women do not engage with welfare systems, homelessness services or other formal support, but that they are much more likely to do so only when informal options become exhausted or are not available. As noted, some evidence suggests that some homeless women never engage with support services, be it homelessness services or the mainstream service provision of a welfare state (Mayock and Sheridan 2012).

If this is right, women's homelessness may be influenced by women's relative *lack of engagement* with welfare states alongside other variables. Rules, regulations, convention and the extent and nature of welfare states

remains potentially important, as does whether women have access to homelessness or domestic violence services (and what those services can offer). In this context, exploring the nature, extent and duration of the *disconnects* between welfare states and homeless women becomes important.

Moreover, homeless women may use different parts of treatment and support systems, reflecting different profiles of support needs than homeless men. Evidence from the Danish national homelessness counts show that more homeless women than men (57 vs. 47 per cent) have a mental illness, whereas more homeless men than women (69 vs. 52 per cent) have a substance abuse problem. These data also show that 28 per cent of the homeless women and 20 per cent of homeless men are in psychiatric treatment, whereas an equal share of homeless men and women (18 per cent) are in treatment for drug addiction and 10 and 9 per cent, respectively, of homeless men and women receive treatment for alcohol abuse (more detail of the health of homeless women can be seen in Chap. 7 of this volume). There are also slightly more homeless women than men (33 vs. 29 per cent) who have a mobile support worker attached (Benjaminsen and Lauritzen 2015, pp. 103–104; p. 159).

These results show that not only is there a different profile of support needs, although this is perhaps partly due to under-diagnosing of mental illness among homeless men, but there is also a gendered pattern in homeless people's use of other treatment systems, with homeless women more likely to use some other treatment and support systems than homeless men. If this pattern can be generalized to a broader group of socially vulnerable men and women at risk of homelessness, these findings may help to explain why more men than women with complex support needs apparently fall through the safety net of the welfare state and become homeless. These Danish findings do raise some questions about avoiding any simple assumptions about the relationships homeless women have with services, particularly in assuming that women will necessarily tend to make less use of formal services than homeless men in every context. At the same time there may be other explanations for these patterns, particularly homeless women presenting to services only when informal supports have become exhausted while their needs have become more acute.

While, as is often noted throughout this volume, there is a need for more research, the available evidence suggests possible patterns of lone women's experience of homelessness in relation to (all) welfare systems:

- Women using homelessness services and receiving support and who also may receive assistance with accessing other necessary services and treatment. At present, some evidence suggests that women are less likely to exhibit this pattern of behaviour than homeless men.
- Women not using homelessness services who are relying on informal support, at higher rates than homeless men, and/or on mainstream welfare services, whose access to mainstream welfare services may be restricted by barriers that can exist for any homeless person.
- Women who present to homelessness and other services when other informal options have been exhausted, whose homelessness, other negative experiences and lack of access to earlier support and treatment may have significantly undermined their health and well-being. Again, this group may be relatively larger than any equivalent group among homeless men.
- Women whose homelessness is sustained or recurrent, whose contact with both homelessness services and mainstream welfare services is restricted or non-existent, whose high and complex support needs have developed during the course of their homelessness.
- Women with high and complex support needs that predate homelessness, whose support needs created barriers to mainstream welfare and health services and led them to fall through the safety nets provided by welfare states.

It is important to note that some variation, linked to the specific operation of particular welfare states and possibly to wider patterns across sets of welfare states within each welfare regime, would still be expected to occur. Some systems will provide better, more extensive and more accessible services than others; there would, by the same logic, be some regional and municipal variation, particularly in contexts where welfare functions are devolved, with variations existing between the regions and/or municipalities given control over welfare services and policy. However, some shared patterns, linked to differential experiences of homelessness

that can be associated with gender, may exist across an array of welfare states within a range of welfare regime types. Lone homeless women in Europe may have similar or comparable experiences, despite welfare systems that surround them being markedly different.

Welfare States and Homeless Women with Children

In situations where a homeless woman has dependent children, her relationship with welfare systems can be very different. Welfare states, within all the regimes, react very differently to someone in poverty, or with support needs, if that person has a dependent child or children (Baptista 2010). The nature, extent and conditionality attached to support for a homeless woman with a child or children varies markedly between welfare states. However, there is almost always at least some support for adults with dependent children in poverty in all European welfare states (Chzhen and Bradshaw 2012).

The idea that a woman with a child or children can be *protected* from homelessness by welfare systems—that are actually designed to protect children—is quite widespread. This idea has been used as an argument to explain why there are apparently significantly fewer European homeless women than there are homeless men, although this apparent gender imbalance may be as much, or even more, a result of the poor enumeration of homeless women (Baptista 2010; see Chap. 5, this volume).

Welfare states respond to a woman's homelessness within frameworks that still define women in terms of their place within a family structure, as mother and carer. Social democratic welfare states are the most likely to provide significant support to a woman who is a lone parent. A social democratic welfare state will offer free child care if a lone woman parent wants to work, enter education, training or volunteering. Other European welfare states expect a woman to stay at home as a full-time mother, particularly if she has a child who is not old enough for school. Alternatively, liberal welfare states, like that in the UK, may attempt to effectively force lone women parents into paid work, with an expectation that they will bear at least some of the costs of child care themselves. No welfare state, within any set of welfare regimes, is free of bias in the sense

of expecting women to have set roles within society, particularly when they are a mother (Löfstrand and Thörn 2004; see Chap. 3, this volume).

Welfare states will, in extremis, remove children felt to be at risk, from a woman who is at risk of homelessness, or who has become homeless. Child protection services vary by practice, training, culture and convention, meaning a situation that results in being given a support package in one context may result in a child being removed in another context. The experience of removal of children by social workers has been frequently reported among lone women experiencing sustained and recurrent homelessness in Ireland and the UK (Jones 1999; Mayock and Sheridan 2012; Mayock et al. 2015; Reeve et al. 2007).

Despite sustained attempts to break the link, longstanding associations between childhood experience of social work or child protection services and subsequent youth and adult homelessness continue unabated in several European countries (Quilgars et al. 2008). The capacity of welfare regimes to withdraw conditional support, when homeless women with children are judged as not being able to look after them, can in some contexts mean a total or substantial loss of welfare support for a woman whose children are removed from her care. Children being removed by child protection services may sometimes function as one driver in *perpetuating* a woman's experience of homelessness (Mayock et al. 2015). Again, while this effect would be expected to vary according to how welfare states function, there may be elements of shared experiences among homeless women across different types of welfare states.

Domestic Violence Services

When women are at risk of gender-based or domestic violence, the extent to which there is specialist service provision available to them could also be a key determinant of their experience of homelessness (see Chap. 6, this volume). In European countries with extensive refuge and related services for women at risk of domestic violence, women who are homeless or at risk of homelessness due to domestic violence, have some access to a network of support services. As with homelessness services, refuges and related services can provide basic support when the welfare state

will not, and can also provide a conduit to welfare and health systems, supporting women to get the help they need through case management.

Research evidence shows clear associations between domestic violence and women's homelessness across Europe. It has been argued that homeless women are less visible than homeless men because they often use domestic violence services when they become homeless, rather than homelessness services (Baptista 2010). A UK study of domestic violence services indicated that, although specific protections for women who are homeless due to risk of domestic violence were written into the homelessness law, women who were homeless, but who had used domestic violence rather than homelessness systems, were not being *recorded* as being homeless (Quilgars and Pleace 2010).

Shared Barriers

Homeless women can also face multiple barriers to welfare states, some of which are shared with homeless men. Welfare systems can be inaccessible for *administrative* reasons, the most common of which is not having a clear local connection to a municipality, city or region (Baptista et al. 2015). There is some evidence of attitudinal barriers, with bureaucrats administering health, welfare and social housing systems blocking access to services because of preconceived, negative ideas about homeless people (Eurofound 2014; Pleace et al. 2011; Quilgars and Pleace 2003).

Migrant women, like migrant men, can face multiple barriers to welfare states because of their legal status, particularly those migrants who are undocumented and asylum seekers (see Chap. 10, this volume). Increasing controls on what welfare systems EU citizens who are economic migrants to another EU country can access also seem likely (Mayock et al. 2012; Pleace et al. 2011).

Mainstream welfare systems can be poor at handling complex needs, such as the combination of severe mental illness and problematic drug and alcohol use, which can exist in a mutually reinforcing relationship with long-term and recurrent homelessness. Women with these complex needs will face the same barriers as can be encountered by men (Dwyer

et al. 2015), although cultural norms, conventions and the logic or assumptions underpinning how welfare systems are administered may still produce experiences differentiated by gender (see Chap. 3, this volume).

It would be expected that variation exists within these broad patterns linked to the economic situation of different European countries. Greece, since 2008, has experienced massive austerity, with Spain, Italy and Portugal also experiencing extensive economic shocks. Ireland, compared to the UK, experienced greater austerity and more significant cuts to welfare and related services, although the programme of austerity in the UK is also now reaching a level where there is a clear retrenchment of the state, which is cutting social protection and health by unprecedented levels. Other countries, such as Germany, have by contrast been relatively unaffected by economic change or ideologically driven responses to economic change.

Homelessness Strategies

Another issue that could be important is whether or not a country has a specific homelessness strategy and integrated, comprehensive and effective homelessness services. Again, this cannot be predicted on the basis of the development and extent of welfare systems. Countries with highly developed welfare states can have regionally variable or limited homelessness strategies, as well as examples of the most integrated strategic responses that can be found anywhere (FEANTSA 2012; Pleace et al. 2015).

There are some broad patterns; that is, Northern European countries with more extensive welfare systems are more likely to have comprehensive, integrated homelessness strategies. Sweden does not possess an integrated homelessness strategy while the other social democratic welfare regimes do. Looking at the liberal welfare states, Ireland has a comprehensive homelessness strategy, including unified data collection that mirrors that found in Denmark. The UK has four administrations with responsibility for homelessness. England, where close to 85 per cent of the UK population live, lacks an integrated national strategy, whereas Scotland and Wales have developed national strategies including significant legislative reforms. Within corporatist regimes, France has a national strategy, whereas in Germany multiple homelessness strategies, which vary markedly, are determined at the level of

regionally elected governments. Similar variations exist in Southern Europe, although most of the post-socialist welfare regimes found in Central and Eastern Europe lacked a national homelessness strategy as of 2015.¹ There is not a consistent relationship between how different European societies respond to homelessness and types of welfare state (Busch-Geertsema et al. 2010; FEANTSA 2012).

The impact of homelessness strategies on women's homelessness could vary. One possibility is that a strategy will recognize women's homelessness and make provision to counteract it. For example, the original 1977 homelessness laws in the UK recognized both the role of male violence in causing women's homelessness and, perhaps slightly inadvertently, created a specific safety net for any family with dependent children threatened with homelessness, which protected lone women parents. The systems the law introduced were by no means perfect, but 66,650 households were accepted as homeless and entitled to rehousing between 1998 and 2015 by English municipalities, because they were at risk of domestic violence (Department for Communities and Local Government 2015).

Strategies that recognize the presence and the specific needs of women should, at least in theory, be more effective at preventing and reducing women's homelessness. In particular, many of the homelessness strategies that have been adopted in several European countries more recently have, to differing extents, promoted Housing First interventions aimed at rehousing in permanent, independent housing with support (Pleace et al. 2015). Such interventions may be more suitable to meet the needs of homeless women than temporary and emergency services that are less suited or desirable to homeless women.

By contrast, if women's homelessness is not recognized and homelessness strategies are predicated on a definition of homelessness that only includes groups of homeless people who are mainly male, such as people living rough and shelter users, there will be fewer services for homeless women. Specific services for homeless women, where they are present—and again the UK would be an example of this—tend to make the nature and extent of women's homelessness more visible, because they are recorded by women-only services or other systems designed to support homeless women.

¹ Source FEANTSA <http://www.feantsa.org/spip.php?article430>.

Housing Supply and Labour Markets in Relation to Welfare States

Housing Markets

Another complicating factor is that welfare states are themselves influenced by a range of variables. How a welfare system reacts to women's homelessness depends on the logic, cultural influences and policy intentions behind that welfare system, but also on how other related public sector systems within the country work and on how welfare states are being influenced by wider economic and social changes.

The potential influence of the interaction of labour and housing markets on homelessness has been recognized by those who argue that homelessness is shaped by differences between welfare states. The argument is that while welfare states shape homelessness, the interactions between housing and labour markets also shape homelessness, and that these effects are not uniform, because welfare states within the same regime type do not necessarily mirror one another in terms of their housing markets or their labour markets (Stephens and Fitzpatrick 2007).

Welfare states within the same type of welfare regime may have extensive or limited social housing, or no social housing at all; there may also be significant differences in the labour markets compared to other welfare states within the same regime type. Prosperity and housing markets can also vary markedly at regional level. For example, there are economic differences between regions such as South Eastern England and Northern England, between Northern and Southern Italy or the Catalan region compared to some other regions within Spain. To add to this complexity in countries such as Italy, Germany or Austria, regional governments determine welfare systems to such an extent that there is not a single model of welfare state within those countries. In a country like the UK, health and social housing systems are sufficiently devolved to create marked differences between Scotland, Wales and England.

Social housing does not exist in a consistent form within welfare states supposedly within the same regime type. Looking at the social democratic regime, social housing plays a core role in the national homelessness

strategies of Denmark and Finland, underpinning their use of Housing First services, but social housing has effectively been abolished in Sweden (which also lacks a national homelessness strategy at the time of writing). Social housing has a complex, unpredictable relationship to wider homelessness policy in other welfare states. In the liberal regime of the UK countries, social housing has been integral to the response to homelessness since the late 1970s, with a right to social housing existing for some groups of homeless people. While this role has been steadily diminishing, as much social housing has been sold to working tenants and new investment in social housing dropped to negligible levels from the 1980s onwards, the alleviation of homelessness remained a core function of UK social housing from 1977 to 2015. In France, which has to an extent mirrored UK homelessness laws, social housing may take some role in relation to alleviating homelessness, but that role is limited in the face of multiple competing demands for adequate and affordable housing from many other quarters (Ball 2012). Elsewhere, social housing may be seen as supporting economic development or urban regeneration, not as a resource that should be used as part of a strategic response to homelessness, an example being Portugal (Pleace et al. 2011). Access to social housing can also vary significantly at regional or municipal level for homeless people, again determined by political decisions and laws which may or may not create roles for social housing in relation to homelessness, and also influenced by factors such as the relative supply of social housing.

Housing markets add yet another level of complexity, in some locations, even where welfare regimes are extensive and generous. Having a low income forces compromises in where someone can live. Whether it is Helsinki, Paris, Dublin or London, a significant shortage of affordable housing supply—a structural problem throughout much of Europe—creates a context in which homelessness becomes inherently more likely.

Women tend to be poorer and thus to face more disadvantage in housing markets than men (Kennett and Kam Wha 2011). Analysis by Eurostat in 2015 has indicated that women face an effectively identical rate of overburden from housing costs to that of men in Spain, the UK, Ireland and Luxembourg. However, in Cyprus, Germany, Bulgaria, Latvia, the Czech Republic, Lithuania and Sweden, women are at a 20

per cent higher risk of housing cost overburden. Elsewhere in Europe, in countries as diverse as France, Greece, Hungary, Denmark and Italy, women are at a 9–18 per cent higher risk of housing cost overburden (Domergue et al. 2015).

These data suggest, as is argued by some of those advancing the thesis that welfare states within different regimes can help determine the nature of homelessness, that housing markets and affordability may have effects on the nature of homelessness that are independent of welfare systems (Stephens and Fitzpatrick 2007). Housing cost overburden is defined by Eurostat as households where the total housing costs, net of any housing allowances, represent more than 40 per cent of disposable income.

There are clearly limits in European capacity and willingness to subsidize the income of poor people to afford free market renting or purchasing housing (Pleace et al. 2011). The housing-related welfare benefits bill in the UK, £26.38 billion (approx. €33.92 billion) for 2013/2014,² was equivalent to 84 per cent of the defence budget for the same financial year (£31.4 billion/€40.3 billion). This has become politically unacceptable and as other EU Member States struggle with austerity and balancing their budgets, the extent to which governments help meet housing costs for poorer households is likely to decline.

Again, women, and particularly women with children, may have different experiences from men in those countries which have some social housing provision. Lone men are unlikely to be prioritized by social housing systems. In some cases, institutionalized mechanisms of housing provision favour women with dependent children. By contrast, women with dependent children may be more likely to be prioritized. In some cases, lone women at risk of domestic violence will also be prioritized by social landlords, though lone women without children are likely to face barriers to social housing (Pleace et al. 2011). In Denmark, municipalities have a right to allocate up to 25 per cent of vacancies in public housing to people in acute housing need following needs assessment. While lone men and women may get priority access through this system, it is often women or families with dependent children who are a high priority for municipalities in allocating a scarce supply of vacancies. Women with

²<http://visual.ons.gov.uk/welfare-spending/>.

dependent children also receive higher social benefits in Denmark and they will be more likely to be able to afford a housing offer that is given than single men and women without dependent children.

However, social housing has often run into difficulties as a policy response to wider housing need. The cost is increasingly seen as prohibitive and the use of social housing is often interpreted as contributing to social problems in urban space in European countries, particularly negative area effects arising from spatial concentrations of poor and marginalized people in social housing. While the nature and extent of area effects have been contested (Tunstall 2013) the belief that social housing is linked to social problems, because it concentrates people with social problems, is widespread in European social and housing policy (Pleace et al. 2011).

The role of welfare states in the causation, prevention and alleviation of women's homelessness in Europe has to be seen—to be contextualized—in a situation in which domestic housing policies are generally not working well in delivering enough decent, affordable housing for European citizens. Much of Europe has a problem with an affordable housing supply. The evidence to determine whether housing supply is something that may be more important in homelessness—and in women's homelessness—than the nature of welfare regimes has yet to be collected. Research in Finland indicates that, however well the wider welfare state is integrated within a well-resourced and coordinated homelessness strategy, strategic effectiveness is ultimately limited as soon as there is a shortage in suitable, affordable housing (Pleace et al. 2015).

Labour Markets

It has been argued by those advancing the thesis that homelessness is influenced by welfare regimes that, alongside housing markets, labour markets can also act as an independent variable (Stephens et al. 2010). In essence, the argument here is that less unemployment, if combined with adequate pay, reduces the risk of homelessness because it reduces overall socio-economic disadvantage. While labour markets have become less likely to offer well-paid full-time work, particularly in those

European countries in which manufacturing has experienced a marked decline, gender difference again has to be noted. Women tend to be disproportionately employed in lower status positions, at lower pay and with a higher degree of insecurity than men throughout the EU (Humbert et al. 2015). Drawing a clear connection between income poverty and homelessness has never been straightforward; there are far more poor people than homeless people in every European society. Nevertheless, it is the case that almost everyone experiencing homelessness is poor and that homeless people are more likely to come from a poor background (Busch-Geertsema et al. 2010).

Women's economic position is generally worse than that of men, but how far this may influence women's homelessness is difficult to determine on currently available evidence. Equally, there are again a great many other variables at play that may influence women's risks of homelessness. However, if economic position does have at least some influence on risks and experiences of homelessness, the systemically worse position of women in labour markets may be another contributing, and also confounding, variable in the causation of women's homelessness.

Problems with the Evidence

There is some evidence about women's experience of homelessness in Europe, all of which is summarized and discussed within the pages of this volume. There are enough data to raise questions about the ways in which welfare states behave towards homeless women, about how women react to finding themselves homeless and what that may mean in terms of their engagement with mainstream welfare services. Clearly, there are also important differences in women's experience compared to men's, including the presence or absence of children and whether or not, if experiencing domestic violence, they seek help from domestic violence rather than homelessness services. The nature of homelessness service provision may also influence the extent to which women engage with homelessness services, or whether they avoid homelessness services.

Clear and comprehensive evidence, which is comparable across different European countries, is obviously lacking. There is not even really a

proper understanding of the nature and extent of women's homelessness, in that while there are data suggesting more concealed or hidden homelessness among women, what that actually means in terms of numbers and the collective experience of homeless women remains unclear (Busch-Geertsema et al. 2010, 2014).

Some mention has already been made of the debates around the robustness of existing taxonomies of welfare regimes (O'Sullivan 2011). There are arguments for thinking critically about how useful the concept of welfare regimes actually is for understanding women's homelessness. A key question here is how far the nature of a welfare state matters in terms of women's experience of homelessness, in that the possibility for shared patterns of women's homelessness, partly, or possibly even largely, transcending welfare regime types, has to be at least contemplated.

It may be the case that a woman experiencing or at risk of homelessness is generally likely to be in a better position if she is living in a country with a social democratic welfare state. The basic safety nets and health and other support services, as well as homelessness services themselves, are likely to be relatively better in social democratic welfare states than in welfare states within other regime types. However, if homeless women's behaviour tends to be similar across different types of welfare state, the supposed 'advantages' of a social democratic system would not necessarily benefit a significant number of homeless women. If significant numbers of homeless women rely on informal sources of support, either on an ongoing basis or until that informal support is exhausted, rather than use welfare systems or homelessness services, the potential beneficial effects of the 'better' welfare states are lessened, as indeed are any potential benefits from those welfare states offering less extensive support. Again, the potential effects of common patterns of *disconnection* between homeless women and welfare states may, alongside differences between welfare states, be important in shaping women's homelessness.

There may be important commonalities in the relationships between welfare states and homelessness (for example, the direction that women's homelessness takes may be strongly influenced by whether or not a woman has dependent children with her) in a comparable way, across all European welfare states. Equally, women's tendency to respond to homelessness using informal support—if it is as widespread as the available

evidence suggests—may sometimes transcend the influence of welfare states. Studying women's apparently greater tendency to rely on family, friends and acquaintances, and to exhaust those options prior to seeking formal services, may provide more insight in understanding gender differences in experience of homelessness than focusing research solely on how specific types of welfare systems react to homeless women.

Conclusions

Our existing knowledge about the extent and nature of relationships between welfare states and women's homelessness is not all that it could be. There are data indicating that homeless women's relationships with welfare systems may be significantly differentiated from that of men. Questions exist about the role that the presence or absence of children can play, the greater tendency of women to rely on informal support, the variations in the extent and nature of homelessness and domestic violence services and whether women use those services or indeed engage with mainstream welfare services.

Based on the little that we do know, or can surmise with a reasonable degree of confidence, homeless women will not relate to welfare states in one set pattern. In Denmark, there is evidence of homeless women using some other treatment services at higher rates than men, which might be read as suggesting women are more likely to engage with mainstream services and less likely to fall through safety nets. Yet, there is other evidence that may also help explain that pattern, that of women exhausting informal arrangements before seeking formal help. When homelessness, other negative experiences and lack of treatment and support have taken a toll, some homeless women may need higher degrees of support at greater rates than some homeless men. More homeless women using psychiatric services, for example, may be at least partially the result of lower engagement during earlier phases of homelessness, than is the case for men. Equally, there is at least some evidence of a population of homeless women whose sustained and recurrent homelessness linked to high and complex support needs is characterized by a *lack* of successful contact with both homelessness and mainstream treatment and support services.

There is enough evidence to at least sustain the development of a hypothesis, which must of course be tested, that women's experience of homelessness is often different, that this may influence their engagement with welfare states and homelessness services and that these differences, centred on the gendered nature of homelessness, may transcend the effects of different types of welfare states on women's experience of homelessness. The fact that someone experiencing homelessness is a woman may—at least in some cases—be a bigger determinant of her trajectory than the type of welfare state in which she is experiencing homelessness.

Beyond this, the presence, absence and nature of any homelessness strategy and strategic responses to homelessness could act as further variables, as could the various barriers that women can apparently share with homeless men when seeking support from welfare states. Housing markets and labour markets may, in relation to welfare states or beyond welfare states, also be important drivers in determining the nature of women's homelessness.

Clearly, as is repeatedly stated throughout this volume, there is a need for more evidence, but while better data are always desirable, there is enough information available to start thinking more critically about the idea of a relatively straightforward relationship between welfare states, groups of welfare states in the same welfare regimes and homelessness. The question really centres on whether (1) welfare states can have a clear, measurable, consistent effect on the nature of homelessness and (2) welfare states within the same group of welfare regimes will experience homelessness in a comparable form.

The existing evidence—and the existing speculation—about the nature of the relationships between welfare states and homelessness has been reviewed in this chapter. The point that gender is neglected, or actually effectively ignored, by existing analysis and interpretation is a potentially important one, but there is another, possibly equally important point to be made about the nature of homeless women's relationships to welfare states. This second point relates to the potential complexity of the interrelationships that may determine variations in the experiences of homeless women in different European countries. This complexity stems in part from systemic variation, which should not be underestimated, not least because welfare systems are often at

least partially devolved within each single country, always a recipe for divergence, stemming from local variations in politics, bureaucracy and unevenness in distribution of resources.

Some existing work has acknowledged the potential impact of housing and labour markets alongside variation in welfare systems in shaping the nature of homelessness, but has tended to conceptualize these markets almost like single variables to be added to a relatively simple set of possible causal relationships, rather than considering the possibility of a much more complex reality. Gender, it does seem, should be added to a mix of variables to test for associations with the pattern of homelessness in individual countries, but the interplay of welfare states, specific markets, culture, politics and the wider economy, while not necessarily impenetrable, seems likely to be convoluted with relationships between causal factors that may be intricate, rather than straightforward.

References

- Aubry, T., Farrell, S., Hwang, S. W., & Calhoun, M. (2013). Identifying the patterns of emergency shelter stays of single individuals in Canadian cities of different sizes. *Housing Studies*, 28(6), 910–927.
- Ball, J. (2012). *Housing disadvantaged people? Insiders and outsiders in French social housing*. London: Routledge.
- Baptista, I. (2010). Women and homelessness. In E. O'Sullivan, V. Busch-Geertsema, D. Quilgars, & N. Pleace (Eds.), *Homelessness research in Europe* (pp. 163–186). Brussels: FEANTSA.
- Baptista, I., Benjaminsen, L., O'Sullivan, E., & Pleace, N. (2015). *Local connection rules and homelessness in Europe*. Brussels: FEANTSA.
- Benjaminsen, L. (2013). Policy review up-date: Results from the housing first based Danish homelessness strategy. *European Journal of Homelessness*, 7(2), 109–131.
- Benjaminsen, L. (2015). Homelessness in a Scandinavian welfare state: The risk of shelter use in the Danish adult population. *Urban Studies*. doi: 0042098015587818.
- Benjaminsen, L., & Andrade, S. B. (2015). Testing a typology of homelessness across welfare regimes: Shelter use in Denmark and the USA. *Housing Studies*, 30(6), 858–876.

- Benjaminsen, L., & Lauritzen, H. H. (2015). *Hjemløshed I Danmark, 2015. National kortlægning* [Homelessness in Denmark 2015. National mapping]. Copenhagen, SFI, report 15:35.
- Bretherton, J., & Pleace, N. (2015). *Housing first in England: An evaluation of nine services*. York: Centre for Housing Policy/Homeless Link.
- Brousse, C. (2009). Becoming and remaining homeless: A breakdown of social ties or difficulties accessing housing? In *F2009/06 Economie et Statistique: Special issue on the homeless* (English Version) (pp. 43–78). Paris: INSEE.
- Busch-Geertsema, V., Benjaminsen, L., Filipovič Hrast, M., & Pleace, N. (2014). *Extent and profile of homelessness in European Member States: A statistical update*. Brussels: FEANTSA.
- Busch-Geertsema, V., Edgar, W., O'Sullivan, E., & Pleace, N. (2010). *Homelessness and homeless policies in Europe: Lessons from research*. Brussels: Directorate-General for Employment, Social Affairs and Equal Opportunities.
- Chzhen, Y., & Bradshaw, J. (2012). Lone parents, poverty and policy in the European Union. *Journal of European Social Policy*, 22(5), 487–506.
- Culhane, D. P., & Kuhn, R. (1998). Patterns and determinants of public shelter utilization among homeless adults in Philadelphia and New York City. *Journal of Policy Analysis and Management*, 17(1), 23–43.
- Culhane, D. P., Metraux, S., Byrne, T., Stino, M., & Bainbridge, J. (2013). The age structure of contemporary homelessness: Evidence and implications for public policy. *Analyses of Social Issues and Public Policy*, 13(1), 228–244.
- Department for Communities and Local Government. (2015). *Statutory homelessness live tables: October to December 2015*. Retrieved from https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/509778/Statutory_Homelessness_Live_Tables_2015_Q4.xls
- Domergue, M., Derdek, N., Vaucher, A. C., de Franclieu, L., Owen, R., Robert, C., et al. (2015). *An overview of housing exclusion in Europe: 2015*. Paris: Foundation Abbe Pierre.
- Dwyer, P., Bowpitt, G., Sundin, E., & Weinstein, M. (2015). Rights, responsibilities and refusals: Homelessness policy and the exclusion of single homeless people with complex needs. *Critical Social Policy*, 35(1), 3–23.
- Esping-Andersen, G. (1990). *The three worlds of welfare capitalism*. Oxford: Oxford University Press.
- Eurofound. (2014). *Access to healthcare in times of crisis*. Luxembourg: Publications Office of the European Union.
- FEANTSA. (2012). *On the way home? FEANTSA monitoring report on homelessness and homeless policies in Europe*. Brussels: FEANTSA.

- Giddens, A. (1994). *Beyond left and right: The future of radical politics*. Cambridge: Policy Press.
- Humbert, A. L., Tamošiūnė, V. I., Oetke, N. S., & Paats, M. (2015). *Gender equality index 2015: Measuring gender equality in the European Union 2005–2012*. Italy: European Institute for Gender Equality.
- Jones, A. (1999). *Out of sight, out of mind: The experiences of homeless women*. London: Crisis.
- Jones, A., & Pleace, N. (2010). *A review of single homelessness in the UK 2000–2010*. London: Crisis.
- Kennett, P., & Kam Wha, C. (Eds.). (2011). *Women and housing: An international analysis*. Abingdon: Routledge.
- Löfstrand, C., & Thörn, C. (2004). The construction of gender and homelessness in Sweden. *Open House International*, 29(2), 6–13.
- Mayock, P., & Sheridan, S. (2012). *Women's 'Journeys' to homelessness: Key findings from a biographical study of homeless women in Ireland*. Women and Homelessness in Ireland, Research Paper 1. Dublin: School of Social Work and Social Policy and Children's Research Centre, Trinity College Dublin.
- Mayock, P., Sheridan, S., & Parker, S. (2012). Migrant women and homelessness: The role of gender-based violence. *European Journal of Homelessness*, 6(1), 59–82.
- Mayock, P., Sheridan, S., & Parker, S. (2015). 'It's just like we're going around in circles and going back to the same thing...': The dynamics of women's unresolved homelessness. *Housing Studies*, 30(6), 877–900.
- Meert, H. (2005). *Preventing and tackling homelessness: Synthesis report of the peer review of social inclusion policies, Denmark 2005*. Brussels: Directorate-General for Employment, Social Affairs and Equal Opportunities.
- Meert, H., & Bourgeois, M. (2005). Between rural and urban slums: A geography of pathways through homelessness. *Housing Studies*, 20(1), 107–125.
- O'Sullivan, E. (2011). Housing and social inequality in Europe. In I. Anderson & D. Sim (Eds.), *Housing and inequality* (pp. 81–90). London: Chartered Institute for Housing.
- Pleace, N. (2000). The new consensus, the old consensus and the provision of services for people sleeping rough. *Housing Studies*, 15(4), 481–594.
- Pleace, N., Culhane, D. P., Granfelt, R., & Knutagård, M. (2015). *The Finnish homelessness strategy: An international review*. Helsinki: Ministry of the Environment.
- Pleace, N., Fitzpatrick, S., Johnsen, S., Quilgars, D., & Sanderson, D. (2008). *Statutory homelessness in England: The experience of families and 16–17 year olds*. London: Department for Communities and Local Government.

- Pleace, N., Teller, N., & Quilgars, D. (2011). *Social housing allocation and homelessness*. Brussels: FEANTSA.
- Powell, M. (2015). 'A re-specification of the welfare state': Conceptual issues in 'the three worlds of welfare capitalism'. *Social Policy and Society*, 14(02), 247–258.
- Quilgars, D., Johnsen, S., & Pleace, N. (2008). *Review of youth homelessness in the UK*. York: Joseph Rowntree Foundation.
- Quilgars, D., & Pleace, N. (2003). *Delivering health care to homeless people: An effectiveness review*. Edinburgh: NHS Health Scotland.
- Quilgars, D., & Pleace, N. (2010). *Meeting the needs of households at risk of domestic violence in England: The role of accommodation and housing related support services*. London: Communities and Local Government.
- Reeve, K., Goudie, G., & Casey, R. (2007). *Homeless women: Homelessness careers, homelessness landscapes*. London: Crisis.
- Sales, A. (2015). How many homeless people live in Spain? Incomplete sources and impossible predictions. *European Journal of Homelessness*, 9(2), 215–231.
- Shinn, M., Weitzman, B. C., Stojanovic, D., Knickman, J. R., Jimenez, L., Duchon, L., et al. (1998). Predictors of homelessness among families in New York City: From shelter request to housing stability. *American Journal of Public Health*, 88(11), 651–657.
- Stephens, M., & Fitzpatrick, S. (2007). Welfare regimes, housing systems and homelessness. How are they linked? *European Journal of Homelessness*, 1, 201–212.
- Stephens, M., Fitzpatrick, S., Elsinga, M., Van Steen, G., & Chzhen, Y. (2010). *Study on housing exclusion: Welfare policies, housing provision and labour markets*. Brussels: European Commission.
- Tunstall, R. (2013). Neighbourhood effects and evidence in neighbourhood policy in the UK: Have they been connected and should they be? In D. Manley, M. van Ham, N. Bailey, L. Simpson, & D. Maclennan (Eds.), *Neighbourhood effects or neighbourhood based problems? A policy context* (pp. 117–194). London: Springer.

Part II

Issues, Challenges and Solutions

5

Exclusion by Definition: The Underrepresentation of Women in European Homelessness Statistics

Nicholas Pleace

Introduction

This chapter examines the state of statistical knowledge on women's experience of homelessness in the European Union (EU). It starts by describing the definitions of homelessness used in Europe and why, at multiple levels, these definitions are likely to exclude women experiencing homelessness. The processes of data collection used for statistics on homelessness in Europe are then discussed and the likelihood of current methodologies for undercounting women's homelessness is examined. Drawing on three pieces of research, the chapter then explores the extent of current statistical data on women's homelessness in the EU. The chapter concludes by discussing how the use of alternative methodologies could help to secure better statistical data on the prevalence and nature of women's homelessness in Europe.

N. Pleace (✉)
University of York, York, UK
e-mail: Nicholas.pleace@york.ac.uk

© The Author(s) 2016
P. Mayock, J. Bretherton (eds.), *Women's Homelessness in Europe*,
DOI 10.1057/978-1-137-54516-9_5

The Under-representation of Women in European Definitions of Homelessness

Definitions of Homelessness

Variations in data collection on homelessness in Europe stem primarily from variations in how homelessness is defined. Homelessness in Europe, both in policy terms and in terms of data collection, tends to be defined at one of three broad levels:

1. Level 1, where homelessness is defined simply in terms of street dwelling homeless people (people living rough) and is enumerated by estimation, street counts and/or by the collection of administrative or survey data from homelessness services working with this group of people. Initially, data collection is intended to map the extent and nature of living rough, but may then be used as a means by which to set and monitor targets to reduce overall levels (Busch-Geertsema 2010; Busch-Geertsema et al. 2014).
2. Level 2, in which people living rough and people living in emergency accommodation, which includes communal facilities providing beds and food, are both counted as part of the homeless population. Where they are present, accommodation-based services, such as single-site, congregate or communal buildings that provide support services to lone homeless people and to homeless families, may also be included in this definition. Data collection may be continuous or based on periodic surveys that homelessness service providers are asked or required to answer (Brousse 2009; Burt 2001).
3. Level 3, in which various forms of insecure, inadequate, unsafe or otherwise unsuitable housing are defined as homelessness. At this level, homelessness is defined in terms of living rough, living in single-site homelessness emergency and supported accommodation and living in housing situations so insecure or inadequate that they are defined as effective homelessness. The line between what constitutes unacceptable housing and homelessness is not a clear one. There are variations in how countries define the point at which insecurity of tenure, overcrowding, lack of adequate utilities or state of repair

crosses a line between bad housing and living in a state of effective homelessness. Exposure to, or the risk of, physical and emotional abuse, violence and threatened violence, may also be defined as a state of effective homelessness (Baptista 2010; see Chap. 6, this volume).

Level 3 data collection can, though will not always necessarily, include people in the following situations:

- Concealed, hidden or doubled-up households who are unrelated to one another, that is, two or more unrelated families living in housing designed for one family, or two or more unrelated individuals sharing housing designed for a smaller number of people. This will often include a sometimes separately defined subgroup of 'sofa' or 'couch' surfers, who share the housing of acquaintances, friends or relatives on a temporary, often precarious basis. Concealed homelessness can represent a state in which someone experiences overcrowding, inadequate or unfit housing and has no security of tenure.
- Overcrowding of related households. Overcrowding can be counted as effective homelessness when levels break laws, rules or guidance on the number of related people living in housing of a certain size. Rules about overcrowding can also include the way in which space is being shared, so, for example, a brother and sister over a certain age may not be expected to share a bedroom.
- Households and individuals living in housing which is unfit for human habitation can, under circumstances that can vary between countries, be defined as effectively homeless.
- Households and individuals living in housing in which they are unsafe. This can include women living under threats or experience of gender-based or domestic violence, who cannot be expected to remain in their current housing because they are at risk (see Chap. 6, this volume). External threats or abuse from occupants of neighbouring households may also be defined as living in a state of homelessness (Pleace and Bretherton 2013).
- Households and individuals who do not have a secure legal right to live in their housing; that is, they can be evicted by force without a judicial process being involved and have no security of tenure.

Definition and measurement of homelessness at Level 3 is closely linked to some of the key ideas around the human right to housing (United Nations 2014)¹:

- Legal security of tenure, centred on legal protection from forced eviction, harassment by landlords and other threats to having a settled home.
- Affordability, in the sense that housing costs should not be so high as to mean that food, education and access to health care are unaffordable.
- Habitability, meaning that housing is in a reasonable state of repair and will allow someone to keep warm, dry and have adequate living space.
- Availability of services, which centres on the infrastructure needed to make a house habitable, that is, sanitation, capacity to prepare and cook meals, washing facilities, storage, heating and lighting and refuse disposal facilities.
- Accessibility, including housing being useable by someone who has a physical disability or limiting illness, but also encompassing housing being made available to those who require it in a broader sense.
- Location, which is important because housing that has no access to necessary services, ranging from schooling to health care or which is remote from opportunities for paid work, is not suitable for habitation. Equally, housing should not be in environments that are so polluted as to be hazardous to health.
- Cultural adequacy, which is defined as housing respecting and taking into account the expression of cultural identity and associated ways of life; that is, housing design should reflect the ways in which different cultural groups may choose to live. In a European sense, there is a longstanding tradition of building ‘family’ homes, although the expectation that most people will live in nuclear families does not actually correspond with household composition in some EU Member States (Eurostat 2015). This links to a wider point that there should not be any expectation that a specific cultural group will always want

¹ <http://www.ohchr.org/EN/Issues/Housing/toolkit/Pages/RighttoAdequateHousingToolkit.aspx>.

to be housed in traditional ways. Traditional housing arrangements tend to assume that women will follow a specific role in a household, which might not be a living arrangement that women would choose for themselves.

Attempts at pan-European standardization of data collection, which have centred on ETHOS (the European Typology of Homelessness and Housing Exclusion) developed under the auspices of FEANTSA, the European federation of homelessness organizations, are also grounded in the idea that to be housed—and in particular to have a home—is *not* simply a matter of just having a roof over one's head (Busch-Geertsema 2010). ETHOS defines homelessness in reference to three 'domains' which are defined as constituting a 'home'. These domains are the physical domain, the social domain and the legal domain:

In order to define homelessness in an operational way, we identified three domains which constitute a home, the absence of which can be taken to delineate homelessness. Having a home can be understood as: having an adequate dwelling (or space) over which a person and his/her family can exercise exclusive possession (physical domain); being able to maintain privacy and enjoy relations (social domain) and having legal title to occupation (legal domain). (Edgar et al. 2004, p. 5)

A situation of living rough means exclusion from the physical, social and legal domains of ETHOS. Someone sleeping rough has no living space of their own over which they have any degree of control and they are excluded from the social domain because they have no private space. In addition, they are excluded from the legal domain because they have no legal title: no security of tenure to any form of housing or accommodation. This is classified in ETHOS as a state of being roofless.

Someone is also homeless, according to ETHOS, if they are excluded from both the legal and social domains. People without legal title to accommodation or private personal space are defined as experiencing a 'houseless' state, which makes them 'homeless'. This includes people living in homelessness services providing temporary accommodation and also women escaping violence in refuges or women's shelters. People who

are defined as homeless also include *potentially* homeless individuals who are *about* to leave prison, psychiatric hospitals, other hospitals or residential care and children's homes; that is, they are not yet homeless, but are defined as effectively homelessness on the basis that they are likely to become homeless (Busch-Geertsema 2010).

ETHOS also defines migrants living in temporary accommodation or reception centres and in migrant worker's accommodation as homeless on the basis that they have no security of tenure and lack privacy.

ETHOS is contentious; it has been criticized as defining exclusion from all three domains as homelessness and from the social and legal domains as homelessness, but *not* as defining exclusion from the physical and legal domains as homelessness. For example, it has been argued that ETHOS would define someone living in a makeshift shelter on illegally occupied land as in a situation of housing exclusion, not as homeless (Amore 2013; Amore et al. 2011). This has been interpreted as arbitrary and illogical, as it instinctively feels like this is a state of homelessness, even if someone has control over their (inadequate and insecure) living space and also some degree of privacy.

No country in the EU has a single definition of what constitutes an immigrant. None would accept the idea that those with no right to remain, or who are undocumented, are 'homeless'; in law and in policy terms, they are illegal immigrants who can only expect to be deported if caught. EU citizens who travel to another EU Member State and become homeless may be categorized as within a specific subgroup of homeless migrants. Their treatment may not be the same as that experienced by other homeless people, with countries including Ireland, Norway and the UK using services that actively repatriate homeless EU citizens from other countries (Pleace 2011).

ETHOS can also show some inconsistencies. For example, ETHOS defines people who are 'sofa surfing' as experiencing housing exclusion, although they lack private space (social domain) and any security of tenure (legal domain) (Amore 2013; Amore et al. 2011). Including households at *risk* of homelessness has been described as problematic. This is because *potential* homelessness that may not actually occur is being added to homelessness that is actually being *experienced*, which results in a number of 'homeless people' that includes potential homelessness that may

not actually happen (Amore et al. 2011). An alternative version, called ‘ETHOS light’, has been produced which addresses some of these criticisms, designed for use in surveys (Busch-Geertsema 2010). ETHOS light defines homelessness as people living rough, in emergency accommodation, in accommodation (single-site) services for homeless people, in institutions (where they have no housing to move into), in non-conventional dwellings due to lack of housing (caravans, temporary structures, non-domestic buildings) and staying in conventional housing, with family and friends, due to not having a home of their own (Edgar et al. 2007).

Under-representation and Exclusion by Definition

There are three ways in which current definitions of homelessness potentially and, in terms of what is suggested by recent evidence, almost certainly exclude significant numbers of homeless women:

- At Level 1, where homelessness is defined in terms of people living rough, women are less likely to be visible when they do sleep rough and more likely to use informal arrangements to avoid sleeping rough than men.
- At Level 2, where homelessness is defined in terms of people living rough and in emergency and temporary supported (single-site, communal or congregate) accommodation for homeless people, women are less likely to: (1) visibly sleep rough and (2) use homelessness services. Again, while men also use informal arrangements to avoid sleeping rough and using homelessness services, there is evidence indicating that homeless women are much more likely to do so (Jones 1999; Mayock and Sheridan 2012).
- At Level 3, women’s homelessness is more likely to be recognized and more likely to be enumerated. However, definitions can still be important. Women whose homelessness results from domestic or gender-based violence will not always be recorded as experiencing homelessness in administrative systems and women who are homeless with their children may also not be recorded.

Differing definitions can often mean that women's homelessness is not necessarily recognized as homelessness and is, therefore, incompletely enumerated (see Chap. 3, this volume). Women who have no or restricted privacy, who may not be safe from harm or abuse, who have no control over their living space, who have no legally enforceable security of tenure, who may be living in overcrowded or in poor conditions and who are restricted to 'sofa surfing' arrangements which mean they even lack their own bed are not regarded as homeless in European countries that use Level 1 and Level 2 definitions of homelessness. Since they are not regarded as homeless, they are not counted as being homeless.

Women's homelessness being 'hidden' in the sense of occurring disproportionately *within* housing and, therefore, not being defined as homelessness, no matter how unsafe, insecure or unfit, makes the most acute form of social exclusion in Europe appear, falsely, to be overwhelmingly male. Research has shown repeatedly that to try to keep physically safe, women hide when they do live rough, they avoid male dominated homelessness services and they use their own resources to persuade others to temporarily accommodate them, sometimes at considerable personal cost. Younger and sometimes older homeless men, of course, also do the same things and for the same reasons, but, on current evidence, less frequently than homeless women (Baptista 2010; Jones 1999; Mayock and Sheridan 2012; Mayock et al. 2015; Reeve et al. 2007; see Chaps. 6 and 9, this volume).

In European countries using Level 3 definitions of homelessness, women are more likely to be defined as homeless, but there can still be definitional variations that mean that not all forms of women's homelessness are fully represented. Women's experiences of homelessness may not always be classified as homelessness by welfare, health and support services. An important issue here is homelessness resulting from gender-based, domestic or intimate partner violence (see Chap. 6, this volume). A woman who has had to leave her home, her possessions and her social supports behind to escape male violence can be classified as a woman at risk of violence, rather than as homeless, in some parts of the EU (Busch-Geertsema et al. 2014).

For example, a homeless woman in the UK can be classified, recorded and recognized as homeless, if she receives help from statutory homelessness services. However, the same woman, in the same position,

could also be recorded as a woman at risk of domestic violence, and *not* as a homeless woman, if she was first assisted by a women's refuge (Quilgars and Pleace 2010). In 2012, women living in refuges were defined as homeless in the Czech Republic, Hungary, Ireland and Spain, but not in Denmark, France, Germany, Italy, Lithuania, the Netherlands, Poland, Portugal, Slovenia, Sweden or, consistently, in the UK (Baptista et al. 2012; Pleace and Bretherton 2013).

The extent to which women's homelessness is experienced and the ways in which it is experienced will be recorded by administrative systems for services. However, whether or not different forms of women's homelessness are recorded depends on the array of services available and what data they collect. For example, where there are dedicated services for homeless families, a preponderance of lone women parents experiencing homelessness may be recorded, but where no such services exist, this population will not be 'visible' in the same way (Busch-Geertsema et al. 2014; Pleace et al. 2008). If such systems are not in place, women's experience of family homelessness may not be specifically recorded. Welfare systems that are intended to protect children from the greater extremes of poverty may simply record that a woman and her children are being supported, not that a woman and her child or children are, or had been, homeless.

Exclusion and Under-representation of Homeless Women in Data Collection

Inaccurate or limited data on homelessness are the norm in the EU for two reasons; the first is inconsistency and inaccuracy in definition, and the second is the quality of data collection. Problems with data collection affect the enumeration of homelessness and the quality of almost all statistical data on homelessness that are available in Europe (Baptista et al. 2012; Busch-Geertsema et al. 2014). There are exceptions, such as Denmark, where statistical data are unusually comprehensive and robust (Benjaminsen and Andrade 2015) and, to a lesser extent, the UK, which at least has sufficient data to have some sense of the extent and nature of homelessness (Pleace and Bretherton 2013).

Women may be missed in data collection for one of five main reasons:

- *Varying definitions of homelessness used in data collection systems in the same country.* There can be inconsistency in the definitions of homelessness used within a *single* country. Academics, NGOs, public sector agencies, and municipal and regional governments may not all define homelessness in the same way (Busch-Geertsema et al. 2014).
- *Administrative variation in data collection processes.* Different parts of the public sector do not always record homelessness in directly comparable ways within a single country. For example, health or welfare services may not record homelessness in the same way as systems designed specifically for homeless people. Data collection may also not be standardized within the homelessness sector. Equally, some services, despite contact with homeless people, may not collect any data on homelessness at all. At the local level of government, cities, regions and municipalities may all vary in exactly how they define homelessness and the extent to which they collect data. London knows more about people living rough than any other part of the UK and North Rhine Westphalia collects significantly more data on homelessness than any other part of Germany. Only a few countries, such as Denmark, Finland and Ireland, have relatively unified and consistent systems for collecting homelessness data at national level, although none of these systems comprehensively records every form of homelessness (Busch-Geertsema et al. 2014).
- *Geographical variation in the perceived extent of homelessness.* This can be important in leading to inconsistencies in homelessness data collection. One point here is that homelessness tends to be better counted in those contexts where it is most visible, that is, within cities. Surveys and attempts at completing censuses of homeless people will often be focused on those urban locations where relatively extensive homelessness services create pools of homeless people, who can be relatively easily targeted, or select those urban spaces where rough sleeping is most visible (Brousse 2009; Burt 2001).
- *Resource levels.* These can also influence data collection. The best European homelessness data tend to come from richer countries in which homelessness is a *residual* social problem, experienced by a

fraction of the population, within service-rich environments and extensive health and social protection systems. These countries also tend to use a Level 3 definition, which also makes representation of women's homelessness more extensive (Baptista et al. 2012; Benjaminsen 2015; Busch-Geertsema et al. 2014; Meert 2005). Homelessness data from richer European countries are by no means universally better than those from poorer European countries; indeed, the quality of homelessness data cannot be predicted by the relative or absolute extent of welfare spending. Yet, poorer European countries are overall less likely to have an extensive data collection and more likely to have a narrower one, that is, Level 1 or Level 2 definitions of homelessness (Busch-Geertsema 2010; Busch-Geertsema et al. 2014; Fondeville and Ward 2011). Politics and ideology also influence resource levels for data collection and can determine which parts of the homeless population are recorded (Pleace and Quilgars 2003).

- *Methodological limitations.* These create problems in accurately representing women's experience of homelessness at two levels. First, where there is heavy reliance on administrative data from homelessness services to enumerate homeless people, homeless women who are not in contact with homelessness services will be missed (Benjaminsen 2015; Pleace and Bretherton 2013). Second, surveys of homeless people can be limited in their geographical coverage and may miss homeless women for other reasons; for example, people conducting a street count will tend to stick to the visible population and not look for and, therefore, not enumerate women (or men) who are deliberately hiding. In the late 1990s, it was realized that using cross-sectional (one day) surveys generated an inaccurate picture of homeless people. When data on everyone using a homeless service over the course of a year or more was examined, many homeless people with *low* support needs were found, either using services for short periods or on an infrequent basis. A very small group of lone men, with very high support needs, who were long-term or recurrently homeless were found to be making heavy use of services. This meant that a one day survey would be very likely to *oversample* long-term and recurrently homeless men with high needs, because they made heavy use of services and were most likely to be present on the day the survey took place (Benjaminsen 2015; Kuhn

and Culhane 1998). Finally, concealed or hidden homelessness is a real challenge to count, both in terms of getting the high level of resources needed, but also because hidden or concealed homeless people, who are more likely, on current evidence, to be women, tend to move around quite frequently (Baptista et al. 2012; Mayock et al. 2015; Pleace and Bretherton 2013).

Women's homelessness can be harder to count in the sense that women are less likely to be in situations in which homeless people are easy to find, that is, visibly living rough or in emergency or supported accommodation for homeless people (Jones 1999; Mayock and Sheridan 2012; Reeve et al. 2007; see Chaps. 3 and 6, this volume). Again, women living rough conceal themselves for safety, are less likely to use homelessness services and more likely to be in precarious situations of hidden homelessness.

All of this makes homeless women inherently harder to count, partly because hidden or concealed homeless populations move around, and partly because it involves counting everyone in every household—or at least getting a statistically robust sample—which takes serious time and resources to get right (Baptista et al. 2012). Even in countries where there is a national population register, which is used to understand national demographics instead of a census, accurately counting of homeless populations is challenging. Homeless people who live, for at least some of the time, off-grid and temporarily with other people, are not recorded with the accuracy of the permanently and long-term housed population (Baptista et al. 2012).

Another potential issue may be the possible under-representation of women whose homelessness is associated with very high support needs. For example, these are women whose sustained or recurrent homelessness is associated with comorbidity of severe mental illness and problematic drug and alcohol use. In this case, there is evidence that long-term and recurrently homeless women with high needs are sofa surfing and in other precarious situations of homelessness, that is, living temporarily with friends, family and acquaintances and making less use of homelessness services than men with equivalent or identical needs (see Chap. 3, this volume). As this group do not use homelessness services, or make less use of them, they may not be counted in administrative data, in surveys, or be found by researchers whose strategies for recruitment focus on homelessness services.

The Enumeration of Women's Homelessness

This part of the chapter draws on three relatively recent exercises that examined the enumeration and collection of data on homelessness in Europe (for a more detailed look at how the definitions affect the *extent* of women's homelessness, see Chap. 3, this volume). The first piece of research was an analysis of the enumeration of homelessness in the 2011 European censuses in 15 EU Member States (Baptista et al. 2012). The second was a test of the utility of the European ETHOS typology as a way of framing counts of homeless people in Northern Ireland conducted in 2013 (Pleace and Bretherton 2013). The third was a review of the quality and extent of statistical knowledge on homelessness in 15 EU Member States conducted in 2014 (Busch-Geertsema et al. 2014).

The review of the 2011 censuses in 15 Member States contained some generally worrying findings about the recording of homelessness across the EU. Of 15 countries reporting, only one, Poland, had actually followed the guidance issued on how the 2011 censuses should record homelessness.

Three difficulties were noted in collecting data on homeless people in the 2011 census. The first was that some homeless people do not live in officially recognized or accessible places; the second was that elements within a homeless population are mobile; and the third was that the homeless population is dynamic, which means some shorter-term homelessness will be missed by censuses. Inherent limitations in the use of a general population survey were also noted, in terms of whether a census is really the best way to attempt to count the dynamic populations of homeless people. In terms of women's experience of homelessness, the key messages were that the inherent limits to data collection processes within the censuses were so great in relation to homelessness, that little or no useful data on homelessness in general were collected, let alone women's experiences of homelessness (Baptista et al. 2012).

An exercise in attempting to collect data framed by ETHOS in Northern Ireland in 2013 found that, in that relatively data-rich environment, it was possible to at least produce estimates of some of the homeless populations where women would be expected to be relatively more numerous. Drawing on Housing Executive data, some

25,400 households were estimated to be homeless at any one point in Northern Ireland, a comparatively small number within a population of 1.81 million people. Of these, based on waiting lists for social housing, about 11,000 were households living temporarily with family, friends or acquaintances (about 43 per cent of total homelessness at any one point). It was also possible to report on the comparatively small numbers of women living in refuges (who are regarded as homeless in Northern Ireland), which numbered just under 200. One key finding, however, was that these data were not always broken down by gender, something that is also true of the homelessness statistics collected by local authorities in England (Pleace et al. 2008).

Thus, while concealed or hidden homelessness was recorded at least to some degree, it had not been thought useful to break down those data by how many women were experiencing these forms of homelessness. Women were recorded as homeless when living in refuges, but were not necessarily separately enumerated in other statistics, including the extent to which women were present in concealed households (Pleace and Bretherton 2013). These results are interesting, in the sense that they add a further possible dimension to the limitations in data on women's homelessness discussed earlier. There can be decisions *not to record* gender in some homelessness statistics, again potentially concealing the true nature and extent of women's homelessness. One reason for this may be the results of earlier methodologically flawed research into homelessness, which recorded homelessness as a social problem that was predominantly experienced by men with high support needs (Kuhn and Culhane 1998).

The 2014 review of the state of knowledge on homelessness in 15 EU Member States produced some more positive findings. The 2011 census had prompted some countries, such as Portugal, to begin collecting additional data on homelessness in a more systematic way. Existing data, ranging across administrative and survey data, could also be used to at least estimate the proportion of women experiencing homelessness in 13 out of 15 countries² and the results are shown in Fig. 5.1.

² Slovenia did not have sufficient data on gender; the UK reported varying levels of women, depending on which part of the homeless population was being examined.

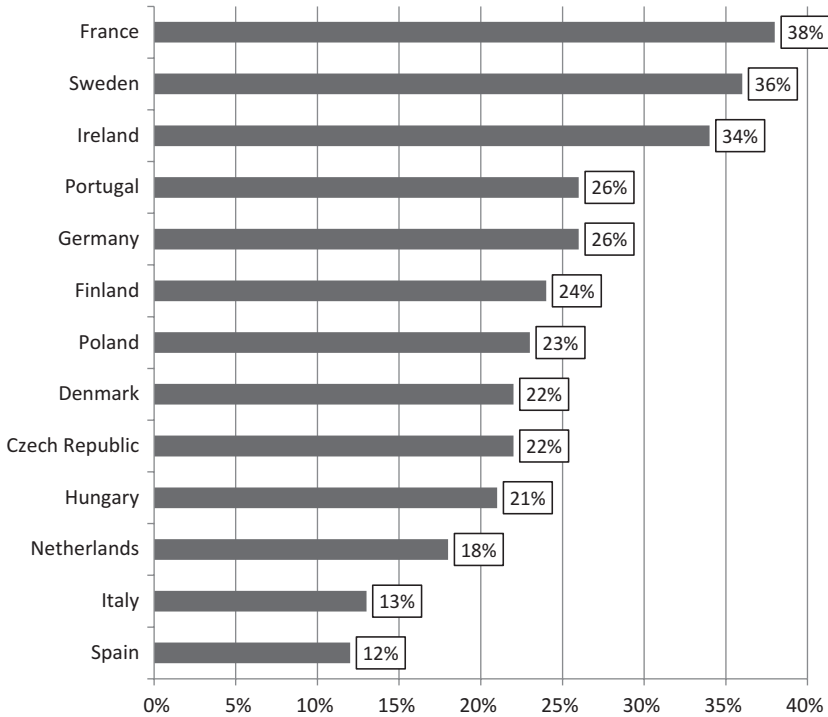


Fig. 5.1 Women's homelessness as a proportion of all homelessness in 13 EU Member States. Note: Different methodologies and data sets were used in each country, see Busch-Geertsema et al. (2014) for details: http://www.feantsaresearch.org/IMG/pdf/feantsa-studies_04-web2.pdf

There is, apparently, some variation in the level of women's homelessness. Yet, the extent of data collection and the basis of data collection could both be, potentially, *more* of an explanation as to why levels varied, even allowing for the effect of potential differences in homelessness causation or strategic or service level responses to homelessness (Busch-Geertsema et al. 2014). France probably did not have a greater proportion of women experiencing homelessness than was the case for Spain. Spanish statistics were more focused on rough sleeping and service use, forms of homelessness where other research indicates that women are less present (Bosch-Meda 2010; Busch-Geertsema et al. 2014), whereas French data explore experience of homelessness

in the general population, alongside wider coverage of more extensive homelessness services (Brousse 2009; Busch-Geertsema et al. 2014).

The 2014 review of homelessness statistics also found several reports, from the Czech Republic, Denmark and the UK, of rising youth homelessness and an increased representation of women among young homeless people. Data were also suggesting a higher representation of women in the single adult homeless populations of Finland and Portugal, although in the Portuguese case this was probably the result of enhancements to data collection methods, rather than necessarily the result of a new trend in homelessness (Busch-Geertsema et al. 2014).

In addition, there was some evidence that homeless women had better access to family and friends offering social supports, ranging from people prepared to offer at least short-term housing through to some financial support, than was the case for homeless men. This suggests that homeless women could have more options around relying, at least temporarily, on family and friends to enter the concealed or hidden homeless populations, than is the case for some homeless men (Busch-Geertsema et al. 2014).

Improving Understanding of Women's Homelessness

Women are more likely to experience poverty, face greater barriers to social and economic advancement, encounter discrimination, and be under-represented in the socio-economic elites of Europe (Bennett and Daly 2014; Esposito 2014). Poverty can, in itself, be a direct cause of homelessness when bad luck or a trigger event such as a relationship breakdown, suddenly reduces the economic resources that a woman has available to her (Burt 2001; Kuhn and Culhane 1998; O'Flaherty 2010).

Women remain systemically disadvantaged in European society, yet the idea that women may, as might reasonably be expected, experience homelessness in significant numbers has never really been properly explored. This appears to be for two reasons. First, the tendency of the political right is to define homelessness in terms of a social problem linked to high

support needs, which it can be, though to do this also requires defining homelessness *only* in terms of recurrently and long-term homeless people who *only* live rough or in homelessness services. This tendency has, in itself, made homelessness appear overwhelmingly male and undermined the case for research on women's homelessness.

Second, again linked to this same ideology, a tendency to downplay or ignore forms of homelessness that can be classified or reclassified as 'housing' problems has also reduced the apparent extent of women's homelessness. Extremes of overcrowding, inappropriate dwellings, insecurity and lack of personal safety are often defined as housing issues. Homelessness is portrayed by the political right as the result of 'personal' problems, rather than a result of failures in social protection, health and other systems, alongside the mismanagement of housing and labour markets. What right-leaning politicians and researchers do not like is evidence that structures, systems and policies, rather than individual behaviour, may be causing homelessness. This means the right has an incentive to avoid defining homelessness as including poor people in insecure, overcrowded and unfit housing (Anderson 1993; O'Flaherty 2010), which, of course, makes it more likely that homeless women will not be counted (Baptista 2010).

Some will argue that only living rough or having to live in emergency accommodation actually constitutes a situation of 'real' homelessness and these are situations that relatively fewer women than men tend to experience. Yet, if a woman who is sofa surfing, that is, experiencing concealed homelessness, has no security of tenure, no privacy, no living space of her own and does not feel physically safe, it is clearly arguable that she really is in a situation of homelessness (Baptista 2010).

The state of statistical knowledge on women's homelessness in Europe is clearly underdeveloped. This statement has to be contextualized by noting that robust, comprehensive, clear and comparable homelessness data of *any* sort are still a relative rarity in Europe, but even allowing for that, the state of data collection on women's homelessness is unacceptably poor.

There are European countries where higher quality data about homelessness are available, and Denmark, Ireland, Finland and the UK are all examples. There are also countries, such as Portugal, where data collection has recently begun to improve. Yet, in overall terms, homelessness

data remain variable, patchy and often difficult to compare. Improving data on women's homelessness is in part a question of looking at how all data on homelessness can be improved, but it also involves looking specifically at how women's homelessness can be better represented

Clearly, there is sufficient research evidence to raise some serious questions about how well women's homelessness is recorded in Europe (Baptista 2010; Jones 1999; Mayock and Sheridan 2012; Reeve et al. 2007). It seems apparent that there may well be a mismatch between the ways in which homelessness is defined, the methodologies used to record homelessness, and the experiences that many women have of homelessness. Women living rough may conceal themselves for safety's sake, which may lead to some under-representation of women's experience of the extremes of homelessness. Perhaps more importantly, the tendency, reported by multiple studies, for women to rely on friends, family and acquaintances for temporary accommodation, rather than use homelessness services, may be leading to serious undercounts of women's homelessness throughout much of Europe (Baptista 2010).

Defining homelessness in ways that exclude concealed or hidden homeless households, including sofa surfers, means at least some women's homelessness is, almost certainly, frequently missed. Women's homelessness, associated primarily with poverty, may be missed in those countries with weaker homelessness data, while difficulties in counting concealed homelessness may mean that highly vulnerable women, with acute support needs, living precariously in informal arrangements with friends, relatives and acquaintances, are also being missed (Mayock and Sheridan 2012).

Conclusion

What is lacking in Europe, with the partial exception of Denmark (Benjaminsen 2015), is a statistically robust picture of the pathways that women take through homelessness. From qualitative and ethnographic research, it is possible to get an idea of the kinds of pattern that exist, and indeed it is from these exercises that the possible extent to which women may be using informal arrangements, experiencing concealed homelessness with friends, family and acquaintances, was first realized (Baptista 2010).

However, there is a distinction between awareness that differing patterns exist in women's homelessness and being able to quantify those patterns. Socially scientific robust longitudinal research, tracking the experience of a cohort of women experiencing homelessness is required in order to get a clearer idea of what exactly is happening and to fully understand the ways in which gender may differentiate experiences of homelessness.

Longitudinal data will give an idea of where to look and what patterns are likely to exist, which is the first step in developing more robust measurement of women's homelessness. Understanding the dynamics of women's homelessness, by tracking a large cohort over time, will give a clearer idea of where and how women experience homelessness. This should in turn enable better targeting of services to prevent and reduce women's homelessness and the development of new services for homeless women. Creating an infrastructure of services that can better meet the needs of homeless women will also create an infrastructure for better data collection on women's homelessness. Building services for homeless women will create points where support can be provided and where data can be collected. Understanding of homelessness is highest in those European contexts where service arrays are most developed and record keeping is well established; homelessness is most visible when the right range of accessible services is put in place to prevent and reduce homelessness (Benjaminsen 2015).

Accurate data are essential in another sense. The potential importance of non-take up of social protection, health, mental health, drug and alcohol support and domestic or gender based violence services, is also starting to become apparent from the research that has been conducted on women's homelessness. Women are, if the patterns suggested by existing research are right, often using informal mechanisms rather than accessing formal help when they experience homelessness. This may be important in terms of looking at how to better prevent and reduce women's homelessness, with better data providing a starting point to look at where and why homeless women are not accessing, or indeed have access to, help that can potentially prevent or resolve their homelessness. Related to this, while it is known that women can and do experience the extremes of homelessness (see Chap. 9, this volume), the lack of detailed, statistically robust knowledge about the support needs of homeless women makes it difficult to determine the right service mix and wider strategic response to women's homelessness.

Women's homelessness has been neglected by omissions and failures in data collection and through the use of definitions that have resulted in women's experience of homelessness being under-represented or ignored. This situation must be improved, because it is inequitable and because current understanding and responses to homelessness are often based on unrepresentative data.

References

- Amore, K. (2013). Focusing on conceptual validity: A response. *European Journal of Homelessness*, 7(2), 233–236.
- Amore, K., Baker, M., & Howden-Chapman, P. (2011). The ETHOS definition and classification of homelessness: An analysis. *European Journal of Homelessness*, 5(2), 19–37.
- Anderson, I. (1993). Housing policy and street homelessness in Britain. *Housing Studies*, 8(1), 17–28.
- Baptista, I. (2010). Women and homelessness. In E. O'Sullivan, V. Busch-Geertsema, D. Quilgars, & N. Pleace (Eds.), *Homelessness research in Europe* (pp. 163–186). Brussels: FEANTSA.
- Baptista, I., Benjaminsen, L., Pleace, N., & Busch-Geertsema, V. (2012). *Counting homeless people in the 2011 housing and population census*. Brussels: Feantsa.
- Benjaminsen, L. (2015) Homelessness in a Scandinavian welfare state: The risk of shelter use in the Danish adult population, *Urban Studies*. doi:0042098015587818.
- Benjaminsen, L., & Andrade, S. B. (2015). Testing a typology of homelessness across welfare regimes: Shelter use in Denmark and the USA. *Housing Studies*, 30(6), 858–876.
- Bennett, F., & Daly, M. (2014). *Poverty through a gender lens: Evidence and policy review on gender and poverty*. Oxford: Department of Social Policy and Intervention, University of Oxford.
- Bosch-Meda, J. (2010). Homelessness among migrants in Spain. *European Journal of Homelessness*, 4, 139–154.
- Brousse, C. (2009). Becoming and remaining homeless: A breakdown of social ties or difficulties accessing housing? In INSEE F2009/06 *Economie et*

- Statistique: Special issue on the homeless* (English Version) (pp. 43–78). Paris: INSEE.
- Burt, M. R. (2001). Homeless families, singles and others: Findings from the 1996 national survey of homeless assistance providers and clients. *Housing Policy Debate*, 12(4), 737–780.
- Busch-Geertsema, V. (2010). Defining and measuring homelessness. In E. O’Sullivan, V. Busch-Geertsema, D. Quilgars, & N. Pleace (Eds.), *Homelessness research in Europe* (pp. 19–40). Brussels: FEANTSA.
- Busch-Geertsema, V., Benjaminsen, L., Filipovič Hrast, M., & Pleace, N. (2014). *Extent and profile of homelessness in European member states: A statistical update*. Brussels: FEANTSA.
- Edgar, B., Harrison, M., Watson, P., & Busch-Geertsema, V. (2007). *Measurement of homelessness at European level*. Brussels: European Commission.
- Edgar, B., Meert, H., & Doherty, J. (2004). *Third review of statistics on homelessness in Europe*. Brussels: FEANTSA.
- Esposito, M. (Ed.). (2014). *Poverty, social inclusion and gender in the European social fund*. Stockholm: The European Community of Practice on Gender Mainstreaming.
- Eurostat. (2015). *Household composition statistics*. Retrieved November 25, 2015, from http://ec.europa.eu/eurostat/statistics-explained/index.php/Household_composition_statistics
- Fondeville, N., & Ward, T. (2011). *Homelessness during the crisis*. Brussels: European Commission.
- Jones, A. (1999). *Out of sight, out of mind: The experiences of homeless women*. London: Crisis.
- Kuhn, R., & Culhane, D. P. (1998). Applying cluster analysis to test a typology of homelessness by pattern of shelter utilization: Results from the analysis of administrative data. *American Journal of Community Psychology*, 26(2), 207–232.
- Mayock, P., & Sheridan, S. (2012). *Women’s ‘Journeys’ to homelessness: Key findings from a biographical study of homeless women in Ireland*. Women and Homelessness in Ireland Research Paper 1. Dublin: School of Social Work and Social Policy and Children’s Research Centre, Trinity College Dublin.
- Mayock, P., Sheridan, S., & Parker, S. (2015). “It’s just like we’re going around in circles and going back to the same thing ...”: The dynamics of women’s unresolved homelessness. *Housing Studies*, 30(6), 877–900.
- Meert, H. (2005). *Preventing and tackling homelessness: Synthesis report of the peer review of social inclusion policies meeting Denmark 2005*. Brussels: EC.

- O'Flaherty, B. (2010). Homelessness as bad luck: Implications for research and policy. In I. Gould Ellen & B. O'Flaherty (Eds.), *How to house the homeless* (pp. 143–182). New York: Russell Sage Foundation.
- Pleace, N. (2011). Immigration and homelessness. In E. O'Sullivan, V. Busch-Geertsema, D. Quilgars, & N. Pleace (Eds.), *Homelessness research in Europe* (pp. 143–163). Brussels: FEANTSA.
- Pleace, N., & Bretherton, J. (2013). *Measuring homelessness and housing exclusion in Northern Ireland: A test of the ETHOS typology*. Belfast: Northern Ireland Housing Executive.
- Pleace, N., Fitzpatrick, S., Johnsen, S., Quilgars, D., & Sanderson, D. (2008). *Statutory homelessness in England: The experience of families and 16–17 year olds*. London: Department for Communities and Local Government.
- Pleace, N., & Quilgars, D. (2003). Led rather than leading? Research on homelessness in Britain. *Journal of Community and Applied Social Psychology*, 13(2), 187–196.
- Quilgars, D., & Pleace, N. (2010). *Meeting the needs of households at risk of domestic violence in England: The role of accommodation and housing related support services*. London: Communities and Local Government.
- Reeve, K., Goudie, G., & Casey, R. (2007). *Homeless women: Homelessness careers, homelessness landscapes*. London: Crisis.
- United Nations. (2014). *The right to housing*. Factsheet No. 21 UN. Retrieved June 24, 2015, from http://www.ohchr.org/Documents/Publications/FS21_rev_1_Housing_en.pdf

6

Women's Homelessness and Domestic Violence: (In)visible Interactions

Paula Mayock, Joanne Bretherton, and Isabel Baptista

Introduction

Domestic violence is a well-documented occurrence among women who experience homelessness. Research and official statistics in several European countries and in North America show that women are more likely than men to experience domestic violence and to report related loss of accommodation (Baptista 2010; FEANTSA 2007; Heslin et al. 2007; Jasinski et al. 2010; Levison and Kenny 2002; Wenzel et al. 2001). Women also face numerous economic and housing difficulties once they enter homelessness or domestic violence service systems which,

P. Mayock (✉)

Trinity College Dublin, Dublin, Ireland

e-mail: pmayock@tcd.ie

J. Bretherton

University of York, York, UK

I. Baptista

Centro de Estudos para a Intervenção Social, Lisbon, Portugal

© The Author(s) 2016

P. Mayock, J. Bretherton (eds.), *Women's Homelessness in Europe*,

DOI 10.1057/978-1-137-54516-9_6

in addition to the effects of domestic violence, appear to decrease their chances of making speedy transitions to stable and sustainable housing.

This chapter examines the relationship between women's homelessness and domestic violence. It focuses specifically on violence experienced by women in the domestic sphere—that is, in their homes—perpetrated by an intimate male partner. Women who experience homelessness may encounter and become victims or survivors of violence, abuse and/or exploitation in other settings including, for example, on the street or in homeless service settings dominated by men (May et al. 2007; Radley et al. 2006; Smith 1999) or in the context of engaging in sex work (Harding and Hamilton 2009; Reeve et al. 2009). Large numbers of homeless women also report violence and abuse, including sexual violence, during childhood and/or adolescence (Jones 1999; Mayock and Sheridan 2012a; Reeve et al. 2006). However, violence from an intimate male partner in the domestic context is frequently cited as one of the strongest contributors to women's homelessness (Jasinski et al. 2010; May et al. 2007; Moss and Singh 2015). Domestic or intimate partner violence may involve different acts of physical, sexual and economic violence and abuse, including acts of physical aggression, psychological abuse, sexual coercion and controlling behaviours (World Health Organization 2002, p. 89). It is important to note that domestic violence is viewed and responded to in different ways across different EU countries. However, in the research literature, and in a growing number of policy documents, domestic violence is conceptualized as a multidimensional phenomenon, occurring in the private sphere and encompassing different acts of physical, emotional and sexual violence or abuse as well as economic abuses and/or threats of abuse. Domestic violence, as understood in this chapter, relates to all of these acts as they occur within the family or domestic unit perpetrated by former or current male spouses or partners.

The chapter starts by discussing the relevance of the concept of 'home' for a fuller and more nuanced understanding of the dynamics of domestic violence and homelessness and highlights intersectionality as a useful framework for understanding the structural underpinnings of the relationship. The intersections of domestic violence and homelessness are then interrogated with specific attention to the

complex dynamics surrounding women's paths 'out of home' and their subsequent experiences of homelessness and housing. The focus then shifts to a discussion of service responses to domestic violence and considers how, historically, domestic violence and homelessness services have been separated. The consequences of this divide for women are highlighted and more recent policy innovations, particularly in the UK context, are examined. The chapter concludes by highlighting possible directions for future research on the role and impact of domestic violence and its relationship to women's homelessness.

Framing the Debate on Conceptual Approaches to Homelessness and Domestic Violence

Homelessness is more than 'houselessness' or the lack of a physical structure (Edgar et al. 2004; Neil and Fopp 1994; Somerville 1992). Apart from the absence of an adequate dwelling, homelessness is associated with poor emotional and physical well-being, a lack of social relationships, an absence of privacy and security, and diminished control over one's life and future (Cloke et al. 2008; Parsell 2012; Watson and Austerberry 1986). Research has documented the profound negative impact of becoming homeless on individuals and it also appears that the impact, as well as individuals' responses, may differ according to gender. For example, May's (2000, p. 755) biographical study of male night shelter and hostel residents in a large town on the south coast of England found that their transience led to powerful feelings of displacement and isolation, leading to what was termed a "'hollowed out" sense of place'. By contrast, the women in Tomas and Dittmar's (1995) study of homeless women, also conducted in the south of England, viewed street homelessness, initially at least, as a solution to their housing problems since it provided an escape from an abusive domestic environment. Homeless women have also been demonstrated to experience stigma (Wardhaugh 1999), extreme stress (Reeve et al. 2006), and an erosion of their perceived role as mothers, particularly when their children are not in their care (Mayock et al. 2015b; see also Chaps. 3 and 8, this volume).

Over the past two decades in particular, research has examined the social, cultural and political meaning of home and house, frequently emphasizing the centrality of control, security, protective boundaries, social relations and sense of belonging underpinning dominant conceptualizations of home (Dupuis and Thorns 1998; Kellett and Moore 2003; Mallet 2004; McDowell 1997; Moore 2000, 2007; Somerville 1997; Tomas and Dittmar 1995; Watson and Austerberry 1986). Drawing on Dupuis and Thorns' (1998) work on the meaning of home, Padgett (2007) identified four key 'markers' of ontological security among recently housed mentally ill homeless persons, including home as a place of constancy, privacy, control and identity construction, and as a place where daily routines are established and maintained. Women's capacity to achieve and maintain these conditions of ontological security is seriously compromised by the experience of domestic violence: home becomes a place of social and personal upheaval, rather than a place of constancy, and a place where women have little or no control over their lives; it is a space where surveillance is ever-present; home becomes a social environment that can devastate the foundations of a woman's identity (Nunan and Johns 1996). The ways in which a lack of control undermines home has been discussed by feminist scholars who have highlighted the (sometimes) problematic nature of housing as control. For women and children who experience abuse in the home, their houses are no longer a place where they exercise and enjoy control, an experience that has been likened to 'homeless at home' (Wardhaugh 1999; Watson and Austerberry 1986). Furthermore, privacy—one of the core conditions of ontological security—may serve to conceal acts of violence against women and also legitimate non-intervention by agencies of the state and by society at large (Malos and Hague 1997; Parsell 2012).

The subordinate economic, social and cultural positions of women who experience domestic violence have come into clearer focus within ongoing conceptual debates on intersectionality (Bograd 1999; Crenshaw 1989, 1993, 1994). The concept of intersectionality emphasizes the relational character of the inequalities that impact women's social positions, highlighting the 'simultaneous, multiple and interlocking oppressions of individuals' (Mann and Grimes 2001, p. 8). This literature includes perspectives that emphasize the lived reality of women who experience

violence in their homes as well as the social, structural underpinnings of domestic violence in culturally diverse communities (Sokoloff and Dupont 2005). By shifting from a 'needs-based focus' and directing attention to the 'situatedness' of women in relation to a number of forms of violence, a 'more analytic focus on how women are positioned along intersecting axes of power' is mobilized (Kelly 2013, p. 4). As stated at the outset of this chapter, domestic violence has been identified as a common feature of the lives of women who experience homelessness and housing instability (Hellegers 2011; Marpsat 2008; Mayock and Sheridan 2012a, b; Mayock et al. 2012; Moss and Singh 2015; Reeve et al. 2007). Furthermore, women's trajectories of homelessness and domestic violence are shaped by diverse inequities, including gender inequality. However, intersectional approaches to domestic violence challenge gender inequality as the primary or only factor needed to understand domestic violence, particularly among marginalized women, such that gender inequality 'is only part of their marginalized and oppressed status ... and modified by its intersection with other systems of power and inequality' (Sokoloff 2004, p. 139). This is because society and the social contexts and locations in which people live are created by the intersections of systems of power (for example, class, race, gender, sexual orientation) and oppression (in the form of prejudice, gender inequality, heterosexist bias and so on) (Bograd 1999; Sokoloff and Dupont 2005). A critical implication of intersectional approaches is that public policies must address the structural root causes of domestic violence. As Bogard (1999, p. 276) writes, '[i]ntersectionalities color the meaning and nature of domestic violence, how it is experienced by self and responded to by others; how personal and social consequences are reproduced, and how and whether escape and safety can be obtained'.

Analyses that focus on understanding the multiple oppressive contexts that characterize the gendered experiences of women who are enmeshed in homeless and domestic violence trajectories emphasize the diversity of women's positions, circumstances and experiences within and across societies. This focus can enhance understanding of the complex interactions between different kinds of structural factors (related, for example, to the social divisions of gender, race and class) implicated in the intersections of homelessness and domestic violence. This is because both phenomena

are conceptualized as multidimensional and as depriving women from the full enjoyment of their rights. Women who experience violence are given voice while still focusing on the structural inequalities that shape and constrain their lives and choices.

The Relationship between Homelessness and Domestic Violence

The Intersections of Domestic Violence and Homelessness

As stated earlier, an association between domestic violence and women's homelessness is now relatively well documented throughout Europe, although much of the available evidence comes from the UK (FEANTSA 2007; Jones et al. 2010; Moss and Singh 2015; Office of the Deputy Prime Minister 2005; Quilgars and Pleace 2010). Jones' (1999) qualitative study of women's experience of homelessness in four English cities found that domestic violence was the most commonly cited reason given by women for their present episode of homelessness. More recently, Reeve et al. (2006) found that 20 per cent of the 134 homeless women they surveyed had become homeless because they were experiencing violence from someone they knew, whether a partner or a family member. For women aged 41–50, domestic violence was the most common trigger for homelessness, with 40 per cent of women in this age group reporting that they had left their last settled home to escape violence from a partner. Similarly, Pleace et al.'s (2008) analysis of families accepted as homeless by English local authorities found that nearly two in five (41 per cent) of all adult respondents—the vast majority of them women—reported that they had experienced domestic violence at some stage in their lives while, in Portugal, a qualitative study of the use of supported accommodation by homeless people in the cities of Lisbon and Porto found that almost half of the women interviewed had left home to escape violence from an intimate partner (Baptista et al. 2005). Research in Ireland has also documented high rates of domestic and other forms of gender-based violence among homeless women. Mayock and Sheridan's (2012a) qualitative

study of 60 homeless women in Dublin and two other Irish cities found that two-thirds ($n = 40$) had experienced intimate partner violence as adults; 28 (40 per cent) reported sexual abuse during childhood and over half (55 per cent) of the women had experienced some form of violence or abuse during *both* childhood and adulthood. A majority of the women had, therefore, experienced some form of violence or abuse during their lifetimes. For those women in the sample with histories of long-term or recurrent homelessness, leaving the homeless service system and entering or re-entering abusive relationships emerged as an enduring pattern in the lives of a considerable number (Mayock et al. 2015b). Finally, Moss and Singh's (2015) comparative research on women rough sleepers in four European countries documented extremely high rates of partner abuse, with 100 per cent of Spanish, 93 per cent of Swedish, 70 per cent of UK and 50 per cent of Hungarian women reporting that they had been abused by an intimate partner.

While these research findings may present a quite compelling case to assume a strong causal link between domestic violence and women's homelessness, research evidence at a European level is in fact patchy and localized. Furthermore, the lack of comparable data on homelessness and domestic violence means that it is not possible to draw clear-cut conclusions about the prevalence of domestic violence among women who experience homelessness throughout Europe. Additionally, most existing studies are small scale in nature and they differ in their specific aims as well as in their methodological approaches. The findings of (primarily qualitative) research in a number of countries indicate that the proportion of homeless women who have experienced domestic violence ranges from up to 40 per cent in the UK and Ireland to 50 per cent in Portugal and Hungary, with higher rates of 100 and 93 per cent recorded in (albeit small samples) of homeless women in Spain and Sweden, respectively. These figures suggest that a large proportion of women who access homelessness services and/or have experience of rough sleeping in these countries will have experienced domestic violence at some stage in their lives. Research in the USA, Canada and Australia has similarly recorded high rates of domestic and other forms of gender-based violence among homeless women (Baker et al. 2003; Jasinski et al. 2010; Novac 2006; Pavao et al. 2007; Sev'er 2002; Wright et al. 1998).

The apparent association between women's experience of domestic violence and homelessness has led some to claim that violence, often in the form of intimate partner violence, is a leading cause or primary reason for women's homelessness. Those who assert a causal relationship argue that the two processes are inextricably linked because of women's need to flee an abuser for their personal safety and the safety of their children. For example, in the USA, Jasinski et al. (2010) found high rates of victimization across the life course among a survey sample of 737 women recruited from homeless shelters in four Florida cities, leading them to depict violence as a major cause of homelessness among women. In the European context, Moss and Singh's (2015, p. 170) recent research on women rough sleepers in the UK, Spain, Hungary and Sweden, which uncovered high rates of intimate partner abuse, led them to conclude that 'perhaps the most significant finding is the number of women whose homelessness is directly attributable to partner abuse'. Others, however, argue that some studies exaggerate 'the causal role of violence in homelessness among women, and de-emphasize structural causes' (Shinn 2011, p. 585). Rather than claiming a direct relationship between domestic violence and homelessness or housing instability, becoming homeless is depicted by other scholars as a process rather than a single or abrupt event (Mayock and Sheridan 2012a, b; Wesley and Wright 2005; Williams 1998), involving a complex interplay between structural and individual factors resulting in women's loss of accommodation (Shinn 2010). Furthermore, a number of studies have emphasized that the link between domestic violence and women's homelessness is non-linear and *not* necessarily experienced by all women in the same way (Mayock and Sheridan 2012a; Mayock et al. 2012; Wesley and Wright 2005). For example, while two-thirds of the women in Mayock and Sheridan's (2012a) study reported intimate partner violence, not all linked the experience of domestic violence with the events and circumstances leading *directly* to their homelessness. Thus, while domestic violence emerged as a strong and recurring theme in the women's narratives, their perceptions of the impact of violence on their lives and its role in precipitating their homelessness varied quite considerably. Additionally, a large number of the women interviewed had in fact become homeless on several separate occasions, with the experience of violence precipitating some

homeless episodes but not others. For migrant women who experienced homelessness, this same study highlighted the structural underpinnings of the relationship between domestic violence and homelessness, 'demonstrating migrant women's responses as intimately linked to broader factors—economic, social, legal and cultural—within which their lives are played out and ultimately bound' (Mayock et al. 2012, p. 77). This and other research locates domestic violence within a matrix of intersecting factors that contribute to the process of becoming homeless, and which simultaneously act as barriers to women's ability to exit homelessness and access stable housing. In this sense, violence and abuse are closely linked to women's social and economic circumstances as well as to broader processes of inequality, exclusion and marginalization.

Thus, while an *association* between domestic violence and homelessness among women is relatively well documented, understanding of the *nature* of the relationship is far from complete. In fact, it appears that a complex range of issues surround the link between violence and homelessness and that the relationship is not always a direct one. As Baker et al. (2010, p. 431) point out, there is a need for additional research 'that moves beyond simply documenting the association between the two but also attempts to understand why such an association exists'. The following observation directs attention to a broader tendency for research on domestic violence to neglect or overlook the experiences of homeless women.

Homeless women provide a classic example of a group of women who do not fit into our spatial imagination regarding domestic violence. Indeed research on domestic violence that refers to homelessness usually examines homelessness as a *consequence* of domestic violence (rather than homelessness being a pre-existing characteristic of it) ... Women who are already homeless for a variety of reasons (particularly economic) may form a group whom are overlooked in analyses of domestic violence ... (Meth 2003, p. 321, emphasis in original)

The invisibility of domestic violence clearly presents methodological and practical challenges for researchers. Nonetheless, insight into the complex ways in which domestic violence impacts women's housing situations and their risk of becoming homeless can be gleaned from studies that have examined women's responses to domestic violence.

Domestic Violence and the Dynamics of Becoming Homeless

It is widely recognized that women who live in abusive home situations have to negotiate coercion, power and control (Williamson 2010) and that they often feel entrapped in abusive relationships (Moe 2007). As a consequence, women often remain in abusive relationships for a considerable period of time (Anderson et al. 2003; Bostock et al. 2009; FEANTSA 2007). Enander and Holmberg's (2008) research on women accessing domestic violence shelters in different parts of Sweden documents the layered complexities associated with women's decisions to leave abusive relationships and, like other studies (Anderson and Saunders 2003; Kelly 1999; Moe 2009; Ponice et al. 2011), this research characterizes leaving as a complex and multidimensional process. Likewise, Bostock et al.'s (2009) qualitative study of women who had contact with voluntary sector services in Northern England found that domestic violence can be prolonged by the limited options available to women for support and protection in their communities and by women not having sufficient resources, including money and housing, to enable them to leave abusive relationships. Practically all of the participants in this study experienced marked financial hardship as a result of leaving relationships and incurred debts in the process of trying to re-establish a home. Thus, housing instability and the risk of homelessness increase significantly for women *after* leaving a violent or abusive partner.

The control exerted over women by abusive partners frequently continues beyond the point of leaving the relationship and women and their children may remain unsafe even after they leave their homes (Bowstead 2015). Furthermore, many women return to their partners, often on more than one occasion for economic, social or emotional reasons (Moe 2009). The challenges for women in setting up an independent household play a significant role in the decision to stay with, or return to, abusive partners. Women who have experienced violence may have limited social and economic resources and may, therefore, return to their abusers for reasons such as having no money, feeling lonely, or in an effort to escape the environment of homeless hostels (Mayock et al. 2015b;

Moe 2009). Thus, while domestic violence often leads to homelessness, being without a secure home and/or the economic resources to access and maintain housing may subsequently lead women to return to their abusive partners.

Women's ability to secure stable housing may be further affected by the physical, social and emotional impact of domestic abuse. The harmful consequences of violence and abuse are well documented and can include injury, depression, post-traumatic stress syndrome, anxiety, low self-esteem and social isolation (Anderson et al. 2003; Bostock et al. 2009; Campbell 2002; Dutton et al. 2006). These effects can have longlasting consequences and prevent or hinder women's attempts to re-establish themselves in housing after leaving their abuser (Anderson and Saunders 2003; Campbell 2002). Women with young families are particularly vulnerable since they not only have to worry about themselves but also about the well-being of their children. The negative impact on children and young people of exposure to domestic violence is well documented and can endure even after measures have been taken to secure their safety (Holt et al. 2008; Stanley et al. 2012). Women and their children may also be at risk of repeated and/or prolonged bouts of homelessness after they enter homelessness or domestic violence services because of the economic difficulties they face and their restricted access to sustainable and secure housing.

Women, Domestic Violence and Housing

In the UK context, Malos and Hague (1997) have argued that due to the more central position of the home in women's lives, the *loss of a home* is a significant element of the trauma experienced by women leaving a violent relationship. This study included interviews with 80 women in four local authority areas in England and Wales and found that the complex ideas bound up in the notion of home make it difficult to 'disentangle the sense of loss' experienced by the women who left abusive partners (Malos and Hague 1997, p. 401). As highlighted earlier in this chapter, notions of home are a powerful marker of ontological security and they are also highly gendered. Watson (1988, p. 134)

noted that for the homeless women she interviewed, home implied a 'set of social relations ... strongly linked to a notion of family'. Leaving 'home' therefore carries meanings that extend far beyond the loss of a physical housing structure, even if securing housing—and avoiding homelessness—are key challenges for women at the point of leaving abusive home environments.

Housing has long been recognized as one of the vehicles through which gender relations are mediated and sustained (Davis 2001; Edgar and Doherty 2001; Vickery 2012). A recent international analysis of housing processes and systems in nine countries in Europe (including Spain, Sweden and the UK), East Asia, the USA and Australia has highlighted women's continued structural discrimination and disadvantage within housing markets and their limited opportunities to achieve their housing rights (Kennett and Kam Wah 2011). This volume recognizes the intersectionality of power relations and identifies significant structures, processes, ideologies and institutions as impacting on women's experience of housing. According to Kam Wah and Kennett (2011, p. 1), housing systems and opportunities 'are embedded within structured and institutionalised relations of power which are gendered'. The implication is that all women may be susceptible to structural discrimination linked to the gendered nature of housing processes. However, women who experience domestic violence are up to four times more likely to report housing instability than women in the general population (Pavao et al. 2007). In a context of shrinking social housing provision in many countries across Europe (Scanlon et al. 2015), women may have to rely to a far greater extent than previously on the private rented sector, a market that in some European countries, including the UK and Ireland, is increasingly excluding individuals and families on lower incomes because of rising rental rates (Lalor 2014; Vickery 2012; Walsh and Harvey 2015).

As discussed earlier, the experience of domestic abuse significantly diminishes women's economic resources, making them financially dependent on their abusive partner and extremely vulnerable to poverty should they decide to leave. Furthermore, threats of losing one's home by their partners may be inherent to the abuses that women experience (Tutty et al. 2013). There is no clear path to housing for women who

experience domestic violence and, for some abused women, leaving often becomes a path to homelessness. As Davis (2008, p. 4) puts it, '[w]ith fear driving potential or actual homelessness, the only common thread running through their options is that their housing circumstances will deteriorate in the short and, possibly, the longer term'. Homelessness may, therefore, be an inevitable consequence for many women who flee domestic violence (Browne and Bussuk 1997) and the economic consequences of leaving an abusive relationship are severe for most (Mayock et al. 2015a, b).

Affordable housing is an essential 'first step' in addressing homelessness (Metraux and Culhane 1999). However, women's transitions out of abuse are frequently blocked, leading to further marginalization and simultaneously rendering them invisible in realms of homelessness and housing. Women who experience domestic violence confront strong barriers to housing stability after they exit abusive relationships and enter homelessness or domestic violence services and systems. These difficulties include a lack of affordable housing, poor rental history due to numerous moves (associated with their efforts to escape violence), housing market discrimination and the exclusion of large numbers of women, particularly marginalized women, from the labour market (Baker et al. 2003, 2010; Mayock et al. 2015a, b; Metraux and Culhane 1999; Netto et al. 2009; Richards et al. 2010). Issues including ongoing violence and safety add further complexity to women's housing instability after leaving an abusive partner (Ponic et al. 2011). In the case of migrant women, these barriers intersect with poverty and race to produce layered disadvantages as they attempt to access and secure housing (Mayock et al. 2012; see also Chap. 10, this volume). If the issues and challenges raised by domestic violence are to be addressed, responses need to recognize the link between 'the *structured* subordination of women in their most intimate and personal relationships' as well as in the 'overtly public arenas of society', including the housing market (Malos and Hague 1997, p. 407, *emphasis added*). As intersectionality scholars would argue, violence against women cannot be read and addressed through the lens of gender without responding to the intersecting factors and circumstances that shape the lived experience of women affected by domestic violence.

Service Responses to Domestic Violence

The Separation Between Domestic Violence and Homelessness Services

While an association between homelessness and domestic violence has become increasingly clear, policy and service responses to homelessness and domestic violence have remained largely or wholly distinct. Historically, across many European nations, service responses to domestic violence and service responses to homelessness have been separate in their organization, structure and aims (Baptista 2010). For women who have experienced or who are at risk of domestic violence the most obvious form of support is to access an accommodation-based domestic violence service such as a refuge. Women's refuges can provide safe places for those households fleeing domestic violence (Jones et al. 2010). Confidentiality of refuge locations and their service users is a fundamental aspect of these services so as to protect households at risk of domestic violence and buildings are often modified to ensure physical security.

As demonstrated by a recent UK domestic violence service mapping exercise carried out by Quilgars and Pleace (2010, p. 38), refuges remain the predominant form of specialist accommodation-based provision for households at risk of domestic violence. Refuges and other supported housing services for women at risk of domestic violence remain operationally and strategically distinct from homelessness services in the UK, despite homelessness laws dating back to the 1970s that explicitly recognize the links between homelessness and domestic violence (Quilgars and Pleace 2010). Elsewhere in the EU, the operational and strategic distinction between domestic violence and homelessness services appears to be equally pronounced (Baptista 2010; Mayock et al. 2015a).

Research has shown that households living in refuges can experience stress and anxiety due to having to share facilities with others and the stigma that can often accompany a stay in a refuge (Baptista et al. 2002; Jones et al. 2010; Quilgars and Pleace 2010). Such stays in refuges are almost always crisis driven and necessitate the sudden upheaval of women and any children involved. Children already traumatized by violence or the threat of violence may be required to move schools and away from

friends, family and their communities. Difficulties can also be faced by ethnic minority women and women with a disability. Racial hostility towards ethnic minorities residing in refuges and refuge settings that are ill-equipped to cater for the needs of those with physical disabilities have been noted in previous research (Netto et al. 2009). Beyond this, domestic violence services have historically been underfunded (Ishkanina 2014) and there is some research that suggests there are simply not enough services to meet need (Quilgars and Pleace 2010; SAFE Ireland 2016).

A relatively well-documented feature of domestic violence services is that they are often unwilling to accept women with mental health problems (Davis 2005, cited in Netto et al. 2009), those with substance misuse issues or individuals who exhibit antisocial behaviour (Mayock et al. 2015a; Quilgars and Pleace 2010). Consequently, women with complex support needs, including some women with high support needs who have families (Pleace et al. 2008) and who are at risk of domestic violence, may be unable to access specialist domestic violence accommodation services such as refuges. Recent research in Portugal has additionally revealed increased difficulties for older women in accessing refuge provision (Baptista et al. 2013). Cultural and popular attitudes towards a situation of homelessness may also block access to specialist domestic violence services, as a study of service responses to victims of domestic violence in the Swedish context reveals. In an analysis of local homelessness policy in two Swedish municipalities, gender constructs were found to influence access to domestic violence services. In general, women who were homeless were presumed to have issues with substance misuse and were not perceived to be self-evident 'victims'. On the other hand, those who had experienced domestic violence and did not engage in any form of substance misuse were considered 'deserving victims' and assisted (Löfstrand 2005, p. 349). Beyond the issue of (some) women's limited access to domestic violence services, it is perhaps important to acknowledge that refuge and other supported housing services may have a necessary focus on immediate protection. However, one consequence of this may be that they do not fully record or recognize the extent of the homelessness among the women they are supporting because these services have long been seen as 'domestic violence' rather than as 'homelessness' services.

Women fleeing domestic violence may find themselves in mainstream homelessness services due to the loss of their accommodation and this can be a direct result of experiencing rejection or having had a bad experience in refuge-type accommodation, often linked to their prior experiences of sleeping rough, substance use or mental health issues. Once in a generic homelessness service that is not aimed towards supporting victims of domestic violence women can experience further stress and anxiety since mainstream homelessness services are frequently occupied predominantly by men. Already vulnerable women may be at risk of further violence and abuse in male-dominated service environments such as emergency shelters, direct access services or even supported housing services. Also, the type and level of support offered in generic homelessness services is generally not adequate for those women who have been made homeless due to domestic violence. Homelessness services usually cannot offer the kinds of specialist supports that are available and accessible in domestic violence services. Furthermore, there is little assurance of safety, security and privacy for women in general homelessness services, all of which are fundamental support needs for those escaping domestic violence since the perpetrator of the violence may be both able to track the victim down and also access the building in which she is living. It has been argued that, in particular, staff members in mainstream homelessness services should be trained to recognize the needs of women fleeing violence and have the knowledge and facilities to provide sufficient support to this group of women (FEANTSA 2007; Mayock et al. 2015a; Moss and Singh 2015). As with domestic violence services, it may be that the orientation towards homeless populations means that some homelessness services do not fully recognize, record or respond to the presence of experiences of domestic violence among the women they support.

In summary, the disjunction between service provision and issues related to access means that women who are homeless due to domestic violence sometimes access domestic violence services that may not be ideally suited to address their homelessness; conversely, women can find themselves in homelessness services that are not really designed to meet the needs of women who have experienced, or are at risk of, domestic violence. Women's needs around homelessness and around domestic violence may also not be fully recognized and recorded by services. There are also barriers to accessing some domestic violence services for some groups of

homeless women, centred on cultural attitudes, support needs and also, sometimes, around prejudice. Women at immediate risk of violence may be unable to access refuge services because of issues such as challenging behaviour, addiction and severe mental illness and end up in low-threshold emergency shelters, environments that are occupied primarily by men and ill-equipped to meet their specific needs (Quilgars and Pleace 2010).

Housing Rights as a Response to Homelessness Associated with Domestic Violence

If we consider the structural barriers to housing for women outlined earlier in the chapter, the UK is unusual in having laws that give housing rights to women who are homeless due to domestic violence. Under UK homelessness legislation (Part 7 of the *Housing Act 1996*), suitable accommodation must be secured by local authorities for those who are 'eligible' for assistance, 'unintentionally homeless' and in 'priority need'. Those with dependent children are a priority need group as are those who are vulnerable due to the threat of violence and who have to leave their accommodation as a result. Lone women parents with experience of domestic violence and whose homelessness was caused by domestic violence are prominent among the families assisted by the legislation, yet the presence of children is an automatic trigger for acceptance if a household is unintentionally homeless (Pleace et al. 2008).

Research evidence has, however, demonstrated that within the UK statutory system, women can encounter negative responses when they present to local authorities as homeless due to domestic violence, suggesting that attitudinal barriers exist that are similar to those found by some Swedish research (Löfstrand 2005). Homelessness caseworkers in the UK have been described as conducting 'upsetting' and 'intrusive' interviews with women who present as homeless, which in some cases can lead to women seeking help elsewhere (Pascall et al. 2001). There can also be long waits in temporary accommodation for some households at risk of violence in situations where suitable social or private rented accommodation is difficult to secure at an affordable rent, as in London and the South East of England (Fitzpatrick and Pleace 2012).

There is an additional issue associated with the adequacy of a housing rights response when support needs are evident. For some women with experience of domestic violence, there is evidence from the UK and the USA that simply providing them with secure and affordable housing provides a lasting solution to homelessness (Pleace et al. 2008; Shinn 1997). Prioritizing the housing needs of women escaping domestic violence has also been applied in Portugal, where access to affordable rented housing has been facilitated for those who exit refuge accommodation (Baptista et al. 2013). For others, a ‘housing only’ response will not be sufficient and extensive support needs may need to be met—sometimes for a prolonged period—through mobile support workers and case management if housing is to be sustained (Jones et al. 2002). Again, generic support services may not be adequate and there may be a requirement for specialist support to meet the needs of women who have experienced, or are at risk of, domestic violence.

Within the UK the picture does appear to be changing. More recently, housing policy responses to women facing the loss of accommodation due to domestic violence have occurred within the context of a wider drive towards a more pro-active interventionist approach to homelessness prevention (see Communities and Local Government 2005; Jones et al. 2010; Netto et al. 2009; Pawson 2007). This new policy emphasizes that households experiencing, or at risk of, domestic violence, where appropriate, should be supported to remain in their own homes.

Innovation in Service Responses: The Development of Sanctuary Schemes

Local authorities in England are increasingly turning to the use of ‘Sanctuary Schemes’ (Communities and Local Government 2006) as one option available to women experiencing domestic violence or the threat of domestic violence or abuse. First set up in 2002, the central features of the Sanctuary model are additional security measures installed in the family home of those affected by domestic violence. These can range from the installation of a Sanctuary room (also referred to as a *panic room*) where the household members can escape to and lock themselves

in, waiting for the police, at a time of potential risk, to the addition of more simple security measures such as reinforced doors and windows, fire safety equipment or security lights to a home (Jones et al. 2010). In addition to these physical aspects of securing the home, Sanctuary properties are known to the Police and Fire Service and support from specialist domestic violence services is offered to households within the programme. This is sometimes combined with the management and supervision of the perpetrator. Arguably, the main benefit of Sanctuary is that victims of domestic violence are able to remain in their own homes. Maintaining already existing support networks and access to facilities, such as GPs and schools for children, can be a crucial step in mitigating the impact of domestic violence at a time of great emotional and physical threat (Jones et al. 2010). In 2008/2009, a total of 3820 households at risk of domestic violence were prevented from homelessness by remaining in their own home with the usage of Sanctuary scheme measures (Quilgars and Pleace 2010, p. 17).

However, criticisms have been levelled against the Sanctuary model response. The main argument is that, along with other techniques of 'homelessness prevention', women may only be given this option even though a woman with children under threat of domestic violence is legally entitled to being accommodated elsewhere by the local authority (Netto et al. 2009). Staying at the residence where the risk or event of domestic violence occurred, even with Sanctuary measures in place, could still, in some circumstances, leave the household at risk of a repeat attack.

Therefore, while Sanctuary schemes are a viable option for women who wish to remain in their own homes, they should not be viewed as a panacea for responses to homelessness that result from domestic violence. Having said that, Sanctuary schemes could still be considered the most innovative response to addressing homelessness due to domestic violence and while clearly caveats are in place in using this model few, if any, other services respond directly and simultaneously to the support needs emanating from a violent relationship and the threat of homelessness. Sanctuary, it could be argued, provides an equal response. It does not restrict access due to complex support needs, a criticism that has been levelled at refuge provision, nor does it offer support based on constructs of gender as has been found in the Swedish context. Sanctuary can

provide not only physical safety and deliver homelessness prevention but also ontological security, where freedom within, and enjoyment of, the home had been lost (Padgett 2007).

There is evidence of problems in strategic planning, coordination and equity of access to types of service provision that are more divided and far less integrated than they ought to be. Another way to help meet the needs of homeless women at risk of domestic violence is through housing rights law, but with the caveat that both a suitable housing supply and any necessary support services still need to be in place. Finally, there is scope for innovation in tackling homelessness through using Sanctuary schemes that, if properly managed, can give women a greater degree of choice and control and minimize the risk of homelessness and other disruption to their lives because of the trauma of being faced with domestic violence.

Conclusion

Understanding and addressing both women's homelessness and domestic violence demands exploring the ways in which women's experiences are shaped by diverse exclusionary and intersecting processes. Domestic violence is a complex social and power relationship and, at a global scale, differs in prevalence and in cultural and institutional responses. Intersections between domestic violence and homelessness are complex and may not always be a simple matter of cause and effect whereby violence leads *directly* to homelessness. Rather the relationship between domestic violence and homelessness is complicated by the material nature of housing, the availability of multiple housing types and living arrangements, and wider political, economic and cultural factors. Furthermore, a complex interplay of issues affect women's risk of housing instability and homelessness after separating from their partners, including their economic, social and personal resources, availability of affordable housing and potential housing discrimination.

Across many European nations, policy and service responses to domestic violence and service responses to homelessness have been separate in their structure and aims. However, more recently this appears to be changing with, for example, a movement towards housing as a priority for women experiencing domestic violence in Portugal and innovations

such as Sanctuary schemes in the UK. What remains for research is to ascertain a more explicit understanding of the experiences and perceptions of women who engage with these services across Europe.

In many European countries there is clearly strong evidence that domestic violence is linked to homelessness, albeit in complex ways and in a manner not necessarily shared by all women who experience homelessness *and* domestic violence. Currently, however, there is not adequate, robust information about how many homeless women are affected by the experience of domestic violence. Nonetheless, the strength of the association provides a strong case for further, detailed exploration of the intersections of homelessness and domestic violence from a comparative European perspective. Quantitative data are needed from all European countries in order to more comprehensively and confidently map the scale of the problem and qualitative data are required to further enhance understanding of the *nature* of the relationship between domestic violence and homelessness and its intersections with economic, social, racial and gender inequalities.

References

- Anderson, D., & Saunders, D. (2003). Leaving an abusive partner: An empirical review of predictors, the process of leaving, and psychological well-being. *Trauma, Violence & Abuse, 4*(2), 163–191.
- Anderson, M. A., Gillig, M. P., Sitaker, M., McCloskey, K., Malloy, K., & Grigsby, N. (2003). "Why doesn't she just leave?" A descriptive study of victim reported impediments to her safety. *Journal of Family Violence, 18*(3), 151–155.
- Baker, C. K., Billhardt, K. A., Warren, J., Rollins, C., & Glass, N. E. (2010). Domestic violence, housing instability, and homelessness: A review of housing policies and program practices for meeting the needs of survivors. *Aggression and Violent Behaviour, 15*(6), 430–439.
- Baker, C. K., Cook, S. L., & Norris, F. H. (2003). Domestic violence and housing problems: A contextual analysis of women's help-seeking, received informal support, and formal system response. *Violence Against Women, 9*(7), 754–783.
- Baptista, I. (2010). Women and homelessness in Europe. In E. O'Sullivan, V. Busch-Geertsema, D. Quilgars, & N. Pleace (Eds.), *Homelessness research*

- in Europe: Festschrift for Bill Edgar and Joe Doherty* (pp. 163–185). Brussels: FEANTSA.
- Baptista, I., Neves, V., Silva, A., & Silva, M. (2002). *Estudo sobre a Violência contra as Mulheres no Concelho de Cascais* [Study on violence against women in Cascais]. Cascais: Câmara Municipal de Cascais.
- Baptista, I., Silva, A., & Silva, M. (2005). Quartos, pensões e hospedarias: a realidade do alojamento apoiado em Lisboa e no Porto [Rooms, hostels and guest houses: The reality of supported accommodation in Lisbon and Oporto]. In *Instituto da Segurança Social Estudo dos Sem-Abrigo* [Homelessness study]. Lisboa: ISS.
- Baptista, I., Silva, A., & Silva, M. (2013). *mARCA—Qualificação e formação de profissionais que intervêm em Casas de Abrigo: resultados da implementação do modelo de avaliação de resultados* [mARCA—Qualification and training of practitioners working in women's refuges: Results from the implementation of NA outcome evaluation model]. Unpublished report submitted to the Comissão para a Cidadania e Igualdade de Género.
- Bograd, M. (1999). Strengthening domestic violence theories: Intersections of race, class, sexual orientation, and gender. *Journal of Marital and Family Therapy*, 25(3), 275–289.
- Bostock, J., Plumpton, M., & Pratt, R. (2009). Domestic violence against women: Understanding social processes and women's experiences. *Journal of Community & Applied Social Psychology*, 19(2), 95–110.
- Bowstead, J. C. (2015). Why women's domestic violence refuges are not local services. *Critical Social Policy*, 35(3), 327–349.
- Browne, A., & Bussuk, S. S. (1997). Intimate partner violence in the lives of homeless and poor housed women: Prevalence and patterns in an ethnically diverse sample. *American Journal of Orthopsychiatry*, 67(2), 261–278.
- Campbell, J. C. (2002). Health consequences of intimate partner violence. *The Lancet*, 359(9314), 1331–1336.
- Cloke, P., May, J., & Johnsen, S. (2008). Performativity and affect in the homeless city. *Environment and Planning D: Society and Space*, 26(2), 241–263.
- Communities and Local Government. (2005). *Sustainable communities: Settled homes, changing lives*. London: Office of the Deputy Prime Minister. Retrieved from <http://www.communities.gov.uk/publications/housing/sustainablecommunitiessettled>
- Communities and Local Government. (2006). *Options for setting up a sanctuary scheme*. London: Communities and Local Government.
- Crenshaw, K. (1989). Demarginalizing the intersection of race and sex: A black feminist critique of antidiscrimination doctrine, feminist theory and antiracist politics. *University of Chicago Legal Forum*, 140, 139–167.

- Crenshaw, K. (1993). Race, gender, and violence against women. In M. Minow (Ed.), *Family matters: Readings on family lives and the law* (pp. 230–232). New York: New Press.
- Crenshaw, K. (1994). Mapping the margins: Intersectionality, identity politics and violence against women of color. In M. Fineman & R. Mykitiuk (Eds.), *The public nature of private violence* (pp. 93–118). New York: Routledge.
- Davis, C. (2001). Gender and housing. In M. Harrison & C. Davis (Eds.), *Housing, social policy and difference*. Bristol: The Policy Press.
- Davis, C. (2008). *Women, domestic violence, 'social' housing and community cohesion*. Paper presented at the Housing Studies Association Spring Conference, University of York, April 2–4.
- Dupuis, A., & Thorns, D. (1998). Home ownership and the search for ontological security. *Sociological Review*, 46(1), 24–47.
- Dutton, M. A., Green, B. L., Kaltman, S. I., Roesch, D. M., Zeffiro, T. A., & Krause, E. D. (2006). Intimate partner violence, PTSD, and adverse health outcomes. *Journal of Interpersonal Violence*, 21(7), 955–968.
- Edgar, B., & Doherty, J. (Eds.). (2001). *Women and homelessness in Europe: Pathways, services and experiences*. Bristol: The Policy Press.
- Edgar, B., Doherty, J., & Meert, H. (2004). *Third review of statistics on homelessness in Europe*. Brussels: FEANTSA.
- Enander, V., & Holmberg, C. (2008). Why does she leave? The leaving process(es) of battered women. *Health Care for Women International*, 29(3), 100–226.
- FEANTSA. (2007). *Homelessness and domestic violence: Tailoring services to meet the needs of women who are homeless and fleeing domestic violence*. FEANTSA Policy Statement, Brussels.
- Fitzpatrick, S., & Pleace, N. (2012). The statutory homelessness system in England: A fair and effective rights-based model? *Housing Studies*, 27(2), 232–251.
- Harding, R., & Hamilton, P. (2009). Working girls: Abuse or choice in street-level sex work? A study of homeless women in Nottingham. *British Journal of Social Work*, 39(6), 1118–1137.
- Hellegers, D. (2011). *No room of her own—Women's stories of homelessness, life, death and resistance*. New York: Palgrave.
- Heslin, K., Robinson, P. L., Baker, R. S., & Gelberg, L. (2007). Community characteristics and violence among homeless women in Los Angeles County. *Journal of Health Care for the Poor and Underserved*, 18(1), 203–218.
- Holt, S., Buckley, H., & Whelan, S. (2008). The impact of exposure to domestic violence on children and young people: A review of the literature. *Child Abuse & Neglect*, 32(8), 797–810.

- Ishkanina, A. (2014). Neoliberalism and violence: The big society and the changing politics of domestic violence in England. *Critical Social Policy*, 34(3), 333–353.
- Janinski, J. L., Wesely, J. K., Wright, J. D., & Mustaine, E. (2010). *Hard lives, mean streets: Violence in the lives of homeless women*. Boston, MA: Northeastern University Press.
- Jones, A. (1999). *Out of sight, out of mind? The experiences of homeless women*. London: CRISIS.
- Jones, A., Bretherton, J., Bowles, R., & Croucher, K. (2010). *The effectiveness of schemes to enable households at risk of domestic violence to stay in their own homes*. London: Department of Communities and Local Government.
- Jones, A., Pleave, N., & Quilgars, D. (2002). *Shelter's homeless to home: An evaluation*. London: Shelter.
- Kam Wah, C., & Kennett, P. (2011). Introduction: Women and housing systems. In P. Kennett & C. Kam Wah (Eds.), *Women and housing: An international analysis* (pp. 1–10). Abingdon: Routledge.
- Kellett, P., & Moore, J. (2003). Routes to home: Homelessness and home making in contrasting societies. *Habitat International*, 27(1), 123–141.
- Kelly, L. (1999). *Domestic violence matters: An evaluation of a research project*. Home Office Research Study 19. London: Home Office.
- Kelly, L. (2013). Moving in the shadows: Introduction. In Y. Rehman, L. Kelly, & H. Siddiqui (Eds.), *Moving in the shadows: Violence in the lives of minority women and children* (pp. 1–11). Farnham: Ashgate Publishing.
- Kennett, P., & Kam Wah, C. (Eds.). (2011). *Women and housing: An international analysis*. Abingdon: Routledge.
- Lalor, T. (2014). Enabling access to the private rented sector? The role of social rental agencies in Ireland. *European Journal of Homelessness*, 8(2), 177–190.
- Levison, D., & Kenny, D. (2002). *The provision of accommodation and support for households experiencing domestic violence in England*. London: The Office of the Deputy Prime Minister.
- Löfstrand, C. (2005). *Hemlöshetens politik—lokal policy och praktik* [The politics of homelessness—Local policy and practice]. PhD dissertation, Égalité, Malmö.
- Mallet, S. (2004). Understanding home: A critical review of the literature. *The Sociological Review*, 52(1), 62–89.
- Malos, E., & Hague, G. (1997). Women, housing, homelessness and domestic violence. *Women's Studies International Forum*, 20(3), 397–409.
- Mann, S. A., & Grimes, M. (2001). Common and contested ground: Marxism and race, gender and class analysis. *Race, Gender and Class*, 8(2), 3–22.

- Marpsat, M. (2008). An advantage with limits: The lower risk for women of becoming homeless. In M. Marpsat, (Ed.), *The INED research on homelessness, 1993–2008* (Vol. 1, pp. 147–185). Paris: Institut National des Études Démographiques.
- May, J. (2000). Of nomads and vagrants: Single homelessness and narratives of home and place. *Environment and Planning D: Society and Space*, 18(6), 737–759.
- May, J., Cloke, P., & Johnsen, S. (2007). Alternative cartographies of homelessness: Rendering visible British women's experiences of 'visible' homelessness. *Gender, Place and Culture*, 14(2), 121–140.
- Mayock, P., & Sheridan, S. (2012a). *Women's 'Journeys' to homelessness: Key findings from a biographical study of homeless women in Ireland*. Women and Homelessness in Ireland, Research Paper 1. Dublin: School of Social Work and Social Policy and Children's Research Centre, Trinity College Dublin.
- Mayock, P., & Sheridan, S. (2012b). *Migrant women and homelessness: Key findings from a biographical study of homeless women in Ireland*. Women and Homelessness in Ireland, Research Paper 2. Dublin: School of Social Work and Social Policy and Children's Research Centre, Trinity College Dublin.
- Mayock, P., Sheridan, S., & Parker, S. (2012). Migrant women and homelessness: The role of gender-based violence. *European Journal of Homelessness*, 6(1), 59–82.
- Mayock, P., Parker, S., & Sheridan, S. (2015a). *Women, homelessness and service provision*. Dublin: Simon Communities of Ireland.
- Mayock, P., Sheridan, S., & Parker, S. (2015b). "It's just like we're going around in circles and going back to the same thing ...": The dynamics of women's unresolved homelessness. *Housing Studies*, 30(6), 877–900.
- McDowell, L. (Ed.). (1997). *Undoing place? A geographical reader*. London: Arnold.
- Meth, P. (2003). Rethinking the 'domus' in domestic violence: Homelessness, space and domestic violence in South Africa. *Geoforum*, 34(3), 317–327.
- Metraux, S., & Culhane, D. P. (1999). Family dynamics, housing and recurring homelessness among women in New York City homeless shelters. *Journal of Family Issues*, 20(3), 371–396.
- Moe, A. (2007). Silenced voices and structured survival: Battered women's help-seeking. *Violence Against Women*, 13(7), 676–699.
- Moe, A. (2009). Battered women, children, and the end of abusive relationships. *Affilia*, 24(3), 244–256.
- Moore, J. (2000). Placing home in context. *Journal of Environmental Psychology*, 20(3), 207–218.

- Moore, J. (2007). Polarity or integration? Towards a fuller understanding of home and homelessness. *Journal of Architectural and Planning Research*, 24(2), 143–159.
- Moss, K., & Singh, P. (2015). *Women rough sleepers in Europe: Homelessness and victims of domestic abuse*. Bristol: Policy Press.
- Neil, C., & Fopp, R. (1994). *Homelessness in Australia: Causes and consequences*. Melbourne: Australian Housing Research Institute.
- Netto, G., Pawson, H., & Sharp, C. (2009). Preventing homelessness due to domestic violence: Providing a space or closing the door to new possibilities? *Social Policy & Administration*, 43(7), 719–735.
- Novac, S. (2006). *Family violence and homelessness: A review of the literature*. Ottawa: National Clearing House on Family Violence.
- Nunan, C., & Johns, L. (1996). *Raising the roof on women's homelessness—A framework for policy development*. Canberra: WESNET.
- Office of the Deputy Prime Minister. (2005). *The causes of homelessness among ethnic minority populations*. London: OPDM.
- Padgett, D. (2007). There's no place like (a) home: Ontological security among persons with serious mental illness in the United States. *Social Science & Medicine*, 64(9), 1925–1936.
- Parsell, C. (2012). Home is where the house is: The meaning of home for people sleeping rough. *Housing Studies*, 27(2), 159–173.
- Pascall, G., Lee, S., Morley, R., & Parker, S. (2001). Changing housing policy: Women escaping domestic violence. *Journal of Social Welfare and Family Law*, 23(3), 293–309.
- Pavao, J., Alvarez, J., Baumrind, N., Induni, M., & Kimerling, R. (2007). Intimate partner violence and housing instability. *American Journal of Preventive Medicine*, 32(2), 143–146.
- Pawson, H. (2007). Local authority homelessness prevention in England: Empowering consumers or denying rights? *Housing Studies*, 22(6), 867–883.
- Pleace, N., Fitzpatrick, S., Johnsen, S., Quilgars, D., & Sanderson, D. (2008). *Statutory homelessness in England: The experience of families and 16–17 year olds*. London: Department for Communities and Local Government.
- Ponic, P., Varcoe, C., Davies, L., Ford-Bilboe, M., Wuest, J., & Hammerton, J. (2011). Leaving ≠ moving: Housing patterns of women who have left an abusive partner. *Violence Against Women*, 17(12), 1576–1600.
- Quilgars, D., & Pleace, N. (2010). *Meeting the needs of households at risk of domestic violence in England: The role of accommodation and housing-related support services*. London: Communities and Local Government.

- Radley, A., Hodgetts, D., & Cullen, A. (2006). Fear, romance and transience in the lives of homeless women. *Social & Cultural Geography*, 7(3), 437–461.
- Reeve, K., Casey, R., Batty, E., & Green, S. (2009). *The housing needs and experiences of homeless women involved in street sex work in Stoke-On-Trent*. Centre for Regional Economic and Social Research, Sheffield Hallam University. Retrieved from <https://www.shu.ac.uk/research/cresr/sites/shu.ac.uk/files/housing-needs-exp-women-sex-work-stoke.pdf>
- Reeve, K., Casey, R., & Goudie, R. (2006). *Homeless women: Still being failed yet striving to survive*. London: CRISIS.
- Reeve, K., Goudie, R., & Casey, R. (2007). *Homeless women: Homelessness careers, homelessness landscapes*. London: CRISIS.
- Richards, T. N., Garland, T. S., Bumphus, V. W., & Thompson, R. (2010). Personal and political? Exploring the feminization of the American homeless population. *Journal of Poverty*, 14(1), 97–115.
- SAFE Ireland. (2016). *The state we are in 2016: Towards a safe Ireland for women and children*. Athlone, Co. Westmeath: SAFE Ireland.
- Scanlon, K., Fernández Arrigotia, M., & Whitehead, C. M. E. (2015). Social housing in Europe. *European Policy Analysis*, 17, 1–12.
- Sev'er, A. (2002). A feminist analysis of flight of abused women, plight of Canadian shelters: Another road to homelessness. *Journal of Social Distress and the Homeless*, 11(4), 307–324.
- Shinn, M. (1997). Family homelessness: State or trait? *American Journal of Community Psychology*, 25(6), 755–769.
- Shinn, M. (2010). Homelessness, poverty, and social exclusion in the United States and Europe. *European Journal of Homelessness*, 4, 19–44.
- Shinn, M. (2011). Is violence at the root of homelessness for women? *Sex Roles*, 64(7–8), 585–588.
- Smith, J. (1999). Gender and homelessness. In S. Hutson & D. Clapham (Eds.), *Homelessness: Public policies and private troubles* (pp. 108–132). London: Cassell.
- Sokoloff, J. (2004). Violence at the crossroads: Violence against poor women and women of color. *Women's Studies Quarterly*, 32(3/4), 139–147.
- Sokoloff, J., & DuPont, I. (2005). Domestic violence at the intersections of race, class, and gender. *Violence Against Women*, 11(1), 38–64.
- Somerville, P. (1992). Homelessness and the meaning of home: Rooflessness or rootlessness? *International Journal of Urban and Regional Research*, 16(4), 529–539.

- Somerville, P. (1997). The social construction of home. *Journal of Architectural and Planning Research*, 14(3), 226–245.
- Stanley, N., Miller, P., & Richardson Foster, H. (2012). Engaging with children's and parents' perspectives on domestic violence. *Child & Family Social Work*, 17(2), 192–201.
- Tomas, D., & Dittmar, H. (1995). The experience of homeless women: An exploration of housing histories and the meaning of home. *Housing Studies*, 10(4), 493–515.
- Tutty, L. M., Ogden, C., Giurciu, B., & Weaver-Dunlop, G. (2013). I built my house of hope: Abused women and pathways into homelessness. *Violence Against Women*, 19(12), 1498–1517.
- Vickery, L. (2012). Deepening disadvantage in housing markets for women. *Local Economy*, 27(8), 796–803.
- Walsh, K., & Harvey, B. (2015). *Family experiences of pathways into homelessness: The families' perspective*. Dublin: Housing Agency.
- Wardhaugh, J. (1999). The unaccommodated woman: Home, homelessness and identity. *The Sociological Review*, 47(1), 91–109.
- Watson, S. (1988). *Accommodating inequality: Gender and housing*. Sydney: Allen & Unwin.
- Watson, S., & Austerberry, H. (1986). *Housing and homelessness: A feminist perspective*. London: Routledge and Kegan Paul.
- Wenzel, S. L., Leake, B. D., & Gelberg, L. (2001). Risk factors for major violence among homeless women. *Journal of Interpersonal Violence*, 16(8), 739–752.
- Wesley, J. K., & Wright, J. (2005). The pertinence of partners: Examining intersections between women's homelessness and their adult relationships. *American Behavioral Scientist*, 48(8), 1082–1101.
- Williams, J. C. (1998). Domestic violence and poverty: The narratives of homeless women. *Journal of Women Studies*, 19(2), 143–165.
- Williamson, E. (2010). Living in the world of the domestic violence perpetrator: Negotiating the unreality of coercive control. *Violence Against Women*, 16(12), 1412–1423.
- World Health Organization. (2002). *World report on violence and health*. Geneva: World Health Organization.
- Wright, J. D., Rugin, B., & Devine, J. A. (1998). *Beside the golden door: Policy, politics, and the homeless*. Hawthorne, NY: Aldine de Gruyter.

7

The Health of Homeless Women

Judith Wolf, Isobel Anderson, Linda van den Dries,
and Maša Filipovič Hrast

Introduction

This chapter addresses the issue of the health of homeless women, which is an under-researched theme that has received little dedicated research attention in EU Member States. Research evidence from across the globe indicates that maintaining good health and accessing health care services is a major challenge for homeless women. Research on all aspects of the lives of homeless women in Europe is scarce (Baptista 2010) and research on the health of women who experience homelessness or housing instability is even rarer. Being homeless increases health risks (Muñoz et al. 2005), decreases

J. Wolf (✉) • L. van den Dries
Radboud University Medical Centre, Nijmegen, The Netherlands
e-mail: Judith.Wolf@radboudumc.nl

I. Anderson
University of Stirling, Stirling, Scotland

M.F. Hrast
Faculty of Social Sciences, University of Ljubljana, Ljubljana, Slovenia

© The Author(s) 2016
P. Mayock, J. Bretherton (eds.), *Women's Homelessness in Europe*,
DOI 10.1057/978-1-137-54516-9_7

personal safety (Wenzel et al. 2004) and results in higher morbidity and mortality (Morrison 2009; Nielsen et al. 2011). In addition, homeless persons often do not have the financial resources to meet their health care needs, as many lack appropriate health insurance (Stein et al. 2007).

Women-specific studies indicate that gender is one of the strongest predictors of poor health among the homeless (Riley et al. 2007). However, although many researchers include both sexes in their studies, results often do not differentiate between homeless men and women (Joly et al. 2011; Jones and Pleace 2010), possibly due to the relatively smaller number of women counted (see Chap. 5, this volume) which prohibits statistical analyses of differences. In addition, homeless women may not be included in national health surveillance systems and data sets. This lack of data on the health of homeless women is unfortunate given (1) the relatively large absolute number of these women (see, for example, Jones and Pleace 2010) and (2) the higher prevalence of some risk factors for mental illness among homeless women compared to homeless men, such as histories of sexual child abuse and domestic violence by an intimate partner (Jonker et al. 2012; Stoltenborgh et al. 2011).

When speaking of the health (needs) of homeless women it is important to define the two main concepts of homelessness and health. For both concepts, broad definitions are applied. As elsewhere in this volume, for homelessness, FEANTSA's ETHOS definition is used (Edgar and Meert 2005), which consists of 13 divisions grouped under four categories: *roofless*, *houseless*, *insecure accommodation* and *inadequate accommodation*. Although we wish to adopt a broad understanding of homelessness, it is important to note that in the majority of studies on homelessness and health, and consequently in the studies presented in this chapter, homelessness is more narrowly defined (see Jones and Pleace 2010 and Chap. 5, this volume) and often includes only those individuals who are residing in shelters (Caton et al. 2013; Wilson 2005), sleeping rough or those who are vulnerably housed (Dealberto et al. 2011). Moreover, in some studies it is not clear to which ETHOS category the women that are included belong.

Although it is not feasible to fully address all aspects of the health of homeless women, a wide definition of health is adopted in this chapter in order to provide insight into various dimensions of health. The definition of health used includes physical and mental health and the health consequences of substance use. Within the EU, health policy increasingly

adopts such a broad definition. The World Health Organization places universal health coverage at the forefront of achieving good health and well-being, taking a broad view of the services needed, from clinical care for individuals to public services that protect the health of whole populations (World Health Organization 2013).

This chapter presents an overview of the available evidence on the health of homeless women and their access to health care in different national health care systems and types of welfare. We then consider some of the limitations of the evidence base in terms of understanding the health of homeless women in Europe and identify some implications for future research.

Health Problems of Homeless Women

In this section we present an overview of research on the health of homeless women from studies conducted in Europe during the period 2003–2013. However, since the European research evidence base is limited, we also draw on studies from further afield (mainly from North America), acknowledging that studies may not be directly comparable depending on local contexts, policies and the care systems in different countries. We do not include studies of women experiencing interpersonal violence; these women are not always defined as homeless and, in many EU countries, there are separate service systems for women experiencing domestic violence (see Chap. 6, this volume). Homeless women are prone to a diverse array of health problems, often interrelated. Here we focus on three key aspects: physical health, mental health, and problematic drug and alcohol use.

Physical Health

Homeless women experience a wide variety of health problems, such as infectious and lifestyle diseases, many of which are related to their life on the streets (Muñoz et al. 2005). In Spain, the most prevalent health problems experienced by homeless women in the past 12 months

(Muñoz et al. 2005) were circulatory problems (37.1 per cent), flu or cold symptoms (33.3 per cent), skeletal problems (30.6 per cent) and respiratory problems (27.8 per cent). The health problems that were less frequently mentioned included tuberculosis (5.6 per cent) and diabetes (2.9 per cent). In the Netherlands, 86 per cent ($n = 138$) of homeless female young adults using shelters for homeless youths reported physical health problems in the past 30 days, including headaches and stomach problems (Altena et al. 2009).

Many studies on the physical health of homeless women, especially in the USA, assess the prevalence of sexually transmitted infections (STIs), including HIV and sexually transmitted diseases (STDs) because of concerns about high rates of HIV among homeless populations which are partly related to the high-risk sexual and drug-using behaviour in this population (Robertson et al. 2004). The reported prevalence of STIs and STDs varies greatly between studies, probably due in part to diverging target populations, recruitment sites and sampling strategies (Robertson et al. 2004). For example, in a sample of women recruited from Russian homelessness centres, 75 per cent of the women were diagnosed with an STI (Shakarishvili et al. 2005) and 2.4 per cent were HIV positive. In a Spanish study, 5.6 per cent of 36 sheltered and rough-sleeping women had an STD and 11.4 per cent had received a diagnosis for hepatitis or jaundice. In this same sample, almost a quarter of the women (22.2 per cent) had HIV/AIDS (Muñoz et al. 2005). In a sample of 329 homeless women recruited from 28 family or single adult shelters in New York City, chlamydia and gonorrhoea were found in 6.7 and 0.9 per cent of the women, respectively, and 0.6 per cent of the women had been diagnosed with HIV (Caton et al. 2013). Finally, in a subsample of 190 single homeless women also in New York City, 36 per cent had HIV or an STI (Houston et al. 2013), while 16.8 per cent of women who were homeless due to relationship conflict and residing in shelters for homeless women in the Midwest had an STD (Wilson 2005).

Despite the limited comparability of studies due to diversity in settings, populations and research methods, research evidence points to the poor physical health of homeless women, emphasizing circulatory problems, skeletal problems (for example, arthritis), respiratory problems (chronic bronchitis, asthma), cardiovascular risk factors (diabetes, hypertension or obesity), and experience of STIs or STDs.

Mental Health

Several studies show disproportionately high rates of psychiatric disorders and mental health problems in homeless women (Nielsen et al. 2011; Robertson and Winkleby 1996). However, since studies often measure related but not identical aspects of women's mental health¹ in divergent samples using various measuring instruments, drawing clear-cut conclusions about the prevalence of mental health problems among homeless women (or comparing homeless women with other groups or the general population) is difficult. In this section findings are reported from a selection of studies on general mental health and on specific aspects of mental health, namely post-traumatic stress disorder (PTSD), depression, schizophrenia and suicidal ideation.

In Denmark, a large cohort study of homeless people, aged 16 years and older, reported registered psychiatric disorders in 58.2 per cent of the 9671 homeless women included in the Danish Homelessness Register (Nielsen et al. 2011). In this study no general population comparison figure was provided. In the UK, 77.8 per cent of 72 statutorily homeless women living in council-run temporary accommodation for homeless families scored within the clinical range on the General Health Questionnaire, indicating the likelihood of mental health problems (Tischler and Vostanis 2007).

In line with the high rates of histories of abuse, ongoing traumatic events and revictimization typically evidenced in samples of homeless women throughout Europe and in the USA, rates of PTSD have been found to be high in both adult and youth homeless populations, particularly among women (Stewart et al. 2004; Taylor and Sharpe 2008). However, the prevalence of PTSD varies enormously between the various studies. For instance, in the USA, Edens et al. (2011) found lifetime rates of PTSD of around 8 per cent among adult chronically homeless women whereas Crawford et al.'s work (2011) revealed a far higher rate of 51.8 per cent for histories of PTSD among 83 unaccompanied young homeless women.

¹ Constructs used to measure general mental health vary from the prevalence of lifetime mental health problems (Edens et al. 2011) to the occurrence of mental illness (Zugazaga 2004) or the presence of mental disorders (Strehlau et al. 2012).

Other studies have found high rates of depressive symptoms among homeless women (as high as 62 per cent in Tucker et al.'s (2005) sample of US women with a history of homelessness). Similarly, more than half (58 per cent, $n = 138$) of the homeless female young adults using Dutch shelters for homeless youths reported depressive symptoms, as measured using the Centre for Epidemiological Studies Depression Scale (CES-D) (Altena et al. 2009).

Rates of schizophrenia in populations of homeless women have been found to be high. In a Swedish study of homeless patients admitted to hospital care for mental disorders, 15 per cent of the 340 women had schizophrenia, either as a primary or secondary diagnosis (Beijer and Andreasson 2010). Women in this study were almost three times as likely to have schizophrenia compared with their homeless male counterparts and their risk of schizophrenia was 38 times higher than in a control group of women from the general population. A large-scale study, based on the Danish Homelessness Register, reported a slightly lower rate of diagnosed schizophrenia, with 11.6 per cent of 9671 women having a diagnosis of a schizophrenia spectrum disorder (Nielsen et al. 2011). Furthermore, recent Canadian and American studies reported rates of schizophrenia among homeless women at 16 per cent and 18 per cent, respectively (Dealberto et al. 2011; Edens et al. 2011).

Suicidal thoughts and ideation are common among homeless women. Using the General Health Questionnaire–28, Muñoz et al. (2005) reported suicidal thoughts in 42.6 per cent of 36 homeless women studied in Spain, but 12.9 per cent for a control group of 31 women *at risk* of homelessness (using services for the homeless, such as a soup kitchen, but still housed). In the Netherlands and also in Canada, actual suicidal attempts were studied among homeless women. In homeless female young adults in the Netherlands ($n = 138$) 37 per cent had attempted suicide (Altena et al. 2009). In Canada, in a population of homeless women living in shelters or on the streets, this percentage was higher at 50 per cent (Torchalla et al. 2011).

Again, there are constraints and limitations that do not permit firm conclusions to be drawn. Studies have used different methodological approaches and included different target groups. A standard definition of mental health is lacking and different measures have been used to assess the prevalence of mental health disorders. Nonetheless, the available data

demonstrate disproportionately high rates of mental health problems among homeless women, including high rates of depressive symptoms, depressive disorders, PTSD and schizophrenia as well as a high occurrence of suicidal thoughts and suicidal attempts.

Substance Use

It is widely acknowledged that the prevalence rate of substance use in the homeless population is higher than in the housed population (Kemp et al. 2006; McVicar et al. 2015) and that substance use can be a predictor of, or reason for, becoming homeless (Mayock and Sheridan 2012; McVicar et al. 2015). In addition to being one possible cause of homelessness, (increased) substance use can also be a result of living on the streets or in homelessness hostels (Mayock et al. 2015). Research that specifically focuses on homeless women has found relatively high levels of alcohol and drug use in the samples studied, although notable variations by subgroups of homeless women exist (Wright and Tompkins 2006). Compared to housed women, Wenzel et al. (2004) found that women living in homelessness shelters² were three times more likely to have used drugs in the past 12 months and 13 times more likely to have been alcohol or drug dependent.

The findings of a number of European studies on homeless women suggest that women frequently initiated drug and alcohol use early (often during their teenage years) but that their consumption typically increased after they became homeless or when their housing situations were threatened (Anderson et al. 1993; Mayock and Sheridan 2012). In addition, alcohol or drug use frequently emerges as playing either a direct or indirect role in women becoming homeless (Mayock and Sheridan 2012; O'Carroll and O'Reilly 2008). The results of one large Danish study demonstrate high levels of reported substance use among homeless women. In this study, 36.9 per cent ($n = 3564$) of the almost 10,000 homeless women included in the Danish Homelessness Register had a substance abuse diagnosis (Nielsen et al. 2011).

²In this US study, women were defined as 'sheltered' when they 'were sampled from facilities with a simple majority of homeless residents (persons who would otherwise live in the streets or who sleep in shelters and have no place of their own to go)' (Wenzel et al. 2004, p. 618).

Some small-scale EU studies also show high substance use rates. In Spain, Muñoz et al. (2005) studied homeless women's drug use in the past 6 months and reported use rates for sedatives (22.9 per cent), heroin (17.1 per cent), cocaine (14.3 per cent), cannabis (5.7 per cent), and other substances (8.3 per cent). In Ireland, Smith et al. (2001) reported that while drug abuse had been a feature of the lives of many homeless young women with children, the majority were availing of drug treatment services. Forty-seven per cent of the women in this study had used heroin, 44 per cent had used cannabis, and ecstasy had been used by 36 per cent. In a more recent Irish study (Mayock and Sheridan 2012), 60 per cent of homeless women interviewed reported a current or past substance abuse problem, while in a Dutch sample of female homeless young adults 26 per cent used drugs (mainly cannabis) on an almost daily basis (Altena et al. 2009).

The Added Impact of Homelessness

Many of the physical, mental and substance-related health problems experienced by homeless women are not unique to poor women experiencing homelessness. A higher prevalence of health problems, compared to, for example, women with a high socio-economic status, is also present in housed women living in poverty (Muñoz et al. 2005) and among housed women who (ab)use substances (Center for Substance Abuse Treatment 2009). These similarities may be related to shared risk factors, such as poverty and substance use. This raises the questions of how far the poor health of homeless women is due to their homelessness, and how far it is associated with other risk factors, which may also have played a role in their homelessness. The literature provides several explanations as to why homelessness *itself* can be an important risk factor for poor health.

First, becoming homeless means losing one's home, neighbours, social roles and, perhaps even, friends and family. These traumatic losses can cause psychological trauma (Goodman et al. 1991). For some women, becoming homeless happens alongside being separated from their children (see Chap. 8, this volume). This separation can overwhelm women with feelings of loss (Barrow and Laborde 2008, cited in Paquette and Bassuk 2009) and distress (Mayock et al. 2015). Second, poor living conditions

on the street may make homeless people more vulnerable to physical health problems and may exacerbate the already poor mental health of some women (Goodman et al. 1991; Muñoz et al. 2005). Living on the streets means that women have to endure the physical hardships, such as harsh weather conditions, threatened or actual physical or sexual abuse, a lack of sufficient food and the absence of basic facilities for personal care. In addition, they may experience feelings of loneliness, a lack of social support, and a loss of safety, predictability and control (Goodman et al. 1991; Muñoz et al. 2005). Women who live in homelessness shelters also experience life as extremely unpleasant, describing hostel life as chaotic and stressful, where women lack privacy, (sometimes) feel infantilized by staff members and have difficulty, in a general sense, coping with everyday life (Mayock et al. 2015). The high prevalence of stressful life events experienced by homeless women (for example, assault, victimization and rape) also negatively impact health (Muñoz et al. 2005).

Analysis of the added impact of homelessness on health necessitates comparing homeless people with those who share some key characteristics, but are housed. Muñoz et al. (2005) compared the health status of homeless women in Spain to poor, housed women who used homelessness services such as soup kitchens, demonstrating the impact of homelessness on several, but not all, aspects of women's health. In both groups, similar percentages of women had tuberculosis, respiratory problems, skeletal problems, hepatic problems, STDs, hepatitis, jaundice and symptoms of anxiety. However, important differences were also present. Six to seven times more homeless women reported AIDS/HIV and skin disorders, compared to the at-risk women who were housed; and circulatory problems were present in almost three times as many women in the homeless population. The homeless women reported a significantly higher number of health problems and more homeless women reported depressive symptoms and suicidal thoughts. During the previous six months, the homeless women had used heroin five times more frequently, compared to the at-risk women, while percentages of women using cocaine, cannabis, sedatives and other substances were comparable.

Other studies confirm the added effect of homelessness and its implications for health. For example, Rayburn et al. (2005) studied the influence of traumatic events on the mental health of both sheltered homeless

and low-income housed women and found that living in a homelessness shelter was associated with a twofold increase in the risk of depression, which the authors attributed to the condition of homelessness itself. Although several studies suggest an added effect for homelessness, it is almost impossible to be certain that homelessness itself either causes or exacerbates the health problems of homeless women. For example, the poor mental and physical health of homeless people may, at least in part, be a delayed consequence of the disadvantageous conditions they experienced prior to becoming homeless. Similarly, previous periods of homelessness may have a lifelong negative effect on the health of housed people but their poor health cannot always be directly linked to previous homelessness. Finally, homelessness itself appears to be an important obstacle in accessing and receiving appropriate treatment and health care, as discussed in the next section.

Access to Health Services for Homeless Women

The effectiveness with which the health care needs of homeless women are met will be a function of the nature of national health services (often determined by wider welfare regimes), the success with which homeless women can access these services, and the efficacy of those services in meeting the specific health care needs of homeless women. The degree of integration of health, housing and homelessness services at strategic and implementation levels will also influence the effectiveness of outcomes. This section considers the significance of national health and welfare systems for the health of homeless women and assesses the evidence available on the barriers they may face in accessing services to meet their health care needs.

Since World War II, health care systems have been a core pillar of welfare provision in many European countries with resultant typologies of 'the health care state' identified as useful for analysing health policy (Burau and Blank 2006). International bodies such as the Organisation for Economic Co-operation and Development (OECD) have characterized national systems according to the mix of private and public finance and service provision (Anderson et al. 2006). National systems for health care

are likely to reflect wider welfare regimes (for a more detailed analysis of welfare regimes and women's homelessness, see Chap. 4, this volume) but, as with housing systems, may not align perfectly with the standard typology of universal, corporate, liberal, Southern European and post-socialist structures. For example, Anderson et al. (2006) reported the range of systems, which are shown in Table 7.1.

In the above systems, homeless women (and men) largely have the same entitlement to health care services as the majority population in settled housing. However, the extent to which they can effectively access these services may vary across health and welfare systems. Where homeless people face barriers to general health services, alternative 'specialist' services, such as the delivery of health care in day centres or temporary accommodation, may emerge. As might be expected, access to general health services appears to be most universal in the Nordic states. For example, in Norway, any specialist health care services tend to be provided on the basis of health care need (such as for substance use) rather than because of any homelessness status (Anderson and Ytrehus 2012). Similarly, in Slovenia, research indicates that the majority of homeless persons were able to access health care services (Razpotnik and Dekleva 2009a, b). In contrast, despite Ireland's liberal welfare regime, homeless people's exclusion from health care has been recognized even in a period of national economic boom (O'Carroll and O'Reilly 2008).

Although there is evidence from a number of countries that homeless people may well experience exclusion from health services to which they are entitled, there is a lack of evidence in relation to gender, other than the extent to which men and women, or different household types, may be treated equally or differently within national health and welfare systems. For example, services developed to serve a historic 'male breadwinner' family model may disadvantage non-nuclear households and employment-based insurance systems may disadvantage women if they face structural disadvantage in the labour market. In the UK, Anderson et al. (1993) reported that, among single homeless people in England, there was little difference between men and women in the extent to which they were registered with a general practitioner (GP) or knew of a medical centre they could go to if they were unwell. In Jones' (1999) study of homeless women in England, many women who slept rough or stayed

Table 7.1 Health care systems in selected European countries

Country	Welfare regime	Health care system	Health care for homeless people
United Kingdom	Liberal	Universal	Universal entitlement to mainstream services, but barriers to access result in some specialist service provision
Denmark	Universal	Universal	Mainstream services
Portugal	Southern European	Universal	Acknowledgement of difficulty in guaranteeing access to health care for excluded groups
Netherlands	Corporate/universal	Insurance based	Homeless people are officially entitled to general health care services, but in practice also use local services (aimed at vulnerable groups) which maintain/enhance the safety net
Greece	Southern European	Public and private mix	Homeless people are entitled to public services, supplemented by NGO services specifically for homeless people
Austria	Corporate	Insurance based	Health services are accessible to all, with or without insurance, apart from retention for administration and hotel costs of hospital care
Slovenia	Post-socialist	Insurance based (Compulsory and voluntary insurance)	The majority of homeless people, if they have permanent residence and receive cash benefits, are entitled to use the regular health system

Source: Summarized from Anderson et al. (2006, pp. 14–16); information on Slovenia added by chapter authors

with friends close to their former home were registered with their own GP, while others who moved around more were not registered with a GP. Few women reported problems accessing health services and, although many did not seek services if they did not feel ill or in need of treatment, one participant described the substantial difficulties she encountered:

It was being homeless that made me drink and led to my health problems. I've also got a really bad chest and chilblains. The only doctor available was at ... a drop in service ... and it was disgusting; infested, blood and needles on the floor. Some day centres had all sorts coming in—alternative therapists. There's not much health care for the homeless. I had to go to hospital when I was ill ... they can be funny like 'Why don't you go to see your own GP?' 'Because I don't have one' 'Why don't you have one?' 'Because I haven't got a home' ... they left me waiting for ages. I still didn't have a GP, I was treated in Outpatients. (from 'Trish, aged 27, London', in Jones 1999, pp. 60–63)

There may be a number of reasons why homeless people may not effectively access general health services. Cultural barriers to accessing health services may include feelings that staff stigmatize homeless people as well as differing expectations of health and care services or negative experiences in the past. More personal or individualized barriers could include low self-esteem associated with homelessness, and lack of organizational skills or capacity associated with cognitive impairments, substance use or other health conditions which impact on ability to keep appointments.

Research from the UK indicates that key factors acting as barriers to accessing GP services include administrative systems such as how health services operate according to catchment areas; use of a fixed address for registration systems; reluctance to engage with patients assumed to be drug users; and low self-esteem and stigmatization among homeless people (Pleace et al. 2000). As noted, one of the consequences of homeless people's exclusion from mainstream health services has been the development of alternative provision. Specialist services are often delivered through accommodation or specialist clinics for homeless people. In an international review, Pleace and Quilgars (2004) identified adaptations to existing services, specialist primary care services, and specialist complementary services (for example, alcohol and drug support, dentistry, podiatry and optical care), but found limited evaluative evidence of their

effectiveness. There has been considerable debate around the necessity of specialist services compared to the need to better ensure homeless people's inclusion in mainstream services (Anderson et al. 2006; FEANTSA 2006, 2011; Joly et al. 2011; Jones and Pleace 2010; O'Carroll and O'Reilly 2008), with Anderson and Ytrehus (2012) concluding that specialist health care provision for homeless people should be transitional and ultimately designed to aid reintegration into mainstream services.

There has been little explicit consideration of homeless women's access to health care services, but homeless women may well have particular needs (for example, linked to contraception, pregnancy and motherhood, and to domestic violence) that need to be addressed differently than the health needs of homeless men (Gelberg et al. 2004; Mayock and Sheridan 2012). Consequently, the types of intervention needed and accepted might differ from the male homeless population. In Smith et al.'s (2001) study of health service use by homeless women and their children in Dublin, use of health services appeared high, but many of the problems reported by women remained untreated and there was confusion about free service entitlement and service access. The high levels of physical and sexual abuse experienced by women meant that providing adequate strategies for intervention and care was particularly challenging, and the health and educational needs of children were compromised by the living conditions of their homeless mothers.

The need for more effective interagency work across housing, homelessness and health services is increasingly recognized as a requirement for improving homeless people's access to health care services (Anderson and Ytrehus 2012; Cornes et al. 2011; Joly et al. 2011). Although there is a lack of evidence on the specific experiences of women, research from Ireland has illustrated that health interventions, such as discharge from (and repeated admission to) psychiatric hospitals, can contribute to women's homelessness (Mayock et al. 2015). Policies and practice interventions that have developed in response to acknowledgement of the health care needs of homeless people and the barriers they face in accessing health care services can be illustrated in examples from two insurance-based health care systems (the Netherlands and Slovenia) and one universal system (the UK).

In the Netherlands, homeless people who have basic health insurance can access basic medical care, but health care outside the basic package may be out of reach. Dutch Municipal Health Services (MHSs) have developed a wide range of care for socially vulnerable groups, including needle exchange surgeries for homeless women working as sex workers. The Strategy Plan for Social Relief (Netherlands Ministry of Health 2006) provided roofless people with treatment and rehabilitation packages as part of addiction policies and psychiatric services and the plan was implemented by local authorities responsible for homelessness, including women's homelessness shelter services. Similar to the Netherlands, in Slovenia homeless people also have access to basic medical care based on health insurance and a majority of homeless people report health services as accessible to them when needed (Razpotnik and Dekleva 2009a, b). Barriers identified by some of those in this Slovenian study included: not providing for the specific needs of the homeless (for example, post-acute care, treatment of those with substance use problems); the prejudices of medical personnel; limited working schedule of GPs; poor skills among medical practitioners for working with those with complex needs; and not having health insurance. Emergency health care services have developed in larger Slovenian cities, including, for example, gynaecology and paediatric care, which address the health needs of women and mothers. However, homeless people became a minority of emergency service users as one visible effect of the economic crisis in Slovenia was the increasing number of non-homeless people who had difficulties accessing regular health care (STA 2012).

Health policy is a devolved matter in the UK, and the Scottish Parliament developed a strategic approach to addressing the health care of homeless people after the Homelessness Task Force (2002) recognized their exclusion from mainstream health services. The health needs of homeless people were recognized as part of the national goal of reducing health inequalities (Health Scotland 2004) and, in 2005, Health and Homelessness Standards were introduced (Scottish Executive 2005), although there was no performance requirement relating specifically to homeless women. By 2015, homelessness prevention was increasingly recognized as a public health issue and a research review resulted in a renewed focus on the health service contribution to reducing the health

inequalities faced by homeless people (Hamlet and Hetherington 2015). Although this broad review did not make specific recommendations in relation to homeless women, the continuing equalities approach to addressing the health issues faced by homeless people implies scope to develop gender-specific responses for meeting health care needs.

Available evidence on access to health care for homeless women suggests that, while it is widely acknowledged that under all health and welfare systems some homeless people face considerable barriers to accessing care, there remains a lack of detailed evidence on the differing experiences of men and women. Similarly, while policy and practice initiatives to enhance health care and successful rehousing for homeless people can be identified, there is a lack of robust data on the extent to which they have a positive impact on the health of homeless and formerly homeless women.

The Health of Homeless Women in Europe: Assessing the Research Evidence

This chapter has presented an overview of European, supplemented by US-based, research on the health problems of homeless women and the issues that influence their access to health services. In this section we assess findings and limitations of the evidence base in relation to the experiences of homeless women in Europe.

There is undoubtedly considerable evidence of relatively poor health among homeless women in the international literature. While the prevalence of specific health issues varies between subgroups of homeless women (Teruya et al. 2010), the available evidence paints a rather bleak picture of homeless women's health, including widespread experience of circulatory problems, skeletal problems (for example, arthritis), and respiratory problems; high prevalence of cardiovascular risk factors; and experience of STIs and STDs. Studies also demonstrate disproportionately high rates of both major mental disorders and other mental health problems among homeless women. Some studies have linked substance use to coping strategies and also to other issues such as sex work. The most common substances used by homeless women seem to be alcohol

and cannabis, although a number of studies have also revealed high rates of heroin and cocaine use. The prevalence rates for alcohol use and especially drug dependence are higher in samples of street homeless women, with higher rates of crack cocaine and heroin use also found in street homeless populations. Participants in the studies discussed in this chapter's overview include a diversity of women with respect to age, marital status, race and ethnicity, duration of homelessness and role (being a mother, a sex worker and so on), but the evidence suggests that those who were young, single, roofless, long-term homeless or sex workers were among the most vulnerable within the populations of homeless women studied (Arangua et al. 2005; Hwang et al. 2013).

Although there is extensive international research literature on homelessness and health, knowledge about the health problems of homeless women in Europe is far more limited for a number of reasons. Relatively few studies have specifically examined the health of homeless women, while other studies frequently fail to differentiate between the health status of homeless men and women. Research on health characteristics may be undertaken quite separately from research into other dimensions of homelessness and housing; and definitions of health and homelessness vary between studies. There is also considerable variation in the methodological approaches used, particularly in relation to the measures deployed to assess the physical and mental health status of homeless research participants. There is also a lack of research which addresses issues of cause and effect in relation to the specific impact of homelessness on health (as opposed to a general association between homelessness and certain health conditions), although the study by Muñoz et al. (2005) in Spain indicates some added impact of homelessness on women's health.

Within Europe, research on the health of homeless women is mostly concentrated in the UK and other Northern or Western European countries. With the notable exception of the Muñoz et al. (2005) Spanish study, there is less evidence available from Southern, Central and Eastern European countries. The international evidence base is therefore heavily dominated by studies conducted in North America and the extent to which the findings of these studies are applicable to the European context is difficult to gauge. The studies reviewed in this chapter were mainly national studies or smaller scale local studies and there seems to

be a significant lack of international comparative research on the health of homeless women.

In the European context, the ETHOS typology of homelessness situations has been widely adopted to facilitate international comparison, but sampling strategies in studies of the health characteristics of homeless women do not necessarily fit or address the ETHOS categories. Most studies have included samples of women sleeping rough or women residing in different types of shelter, thus focusing only on the two ETHOS categories that represent the most visible forms of homelessness (rooflessness and houselessness). The two broader ETHOS categories, that is, those living in insecure housing and inadequate housing (living temporarily with friends, in unfit dwellings, under threat of eviction, and so on) are rarely included and, for this reason, comparative insight into the impact of these housing circumstances (including different forms of housing exclusion and/or poverty) on the health of women is lacking.

This chapter attempted to apply a wider understanding of health, encompassing physical and mental health, substance use and also general well-being. However, the research evidence base tends to focus on issues of physical and mental health and substance use, rather than the general well-being of women, which remains a topic that needs greater research attention.

The use of health care services by the homeless population has been linked to predisposing factors (such as demography and psychological distress), enabling factors (for example, insurance and sources of care) and need (Stein et al. 2007). Although limited, existing research indicates that differences among homeless women (for example, single women or mothers and racial differences) should be taken into account when developing preventive or treatment approaches (Teruya et al. 2010; Zugazaga 2004).

The effectiveness with which the health care needs of homeless women are met depends to a large degree on enabling factors such as the nature of national health services and their general accessibility. There remains a lack of data on specific barriers that homeless women face when accessing health care and on the effectiveness of approaches for improving homeless women's access to health care.

Conclusion

This chapter has revealed a somewhat patchy picture of the health of homeless women in Europe and their exclusion from health care services, irrespective of differing health and welfare state systems. There is considerable scope for further research within and across European countries to better establish how women's homelessness affects their health and how homeless women experience health care services across Europe. New research within Europe could usefully incorporate the broader ETHOS categories of women living in insecure and inadequate housing (as well as those of street homelessness and hostel accommodation) to ascertain whether significant differences in health issues emerge when a broader definition of homelessness is applied. Future research could also adopt a broader conception of health as well-being, as opposed to focusing on specific medical conditions. The development of more robust evaluative methods would enable research to better inform the planning and delivery of integrated interventions to address the health and well-being of homeless women. Overall, there remains scope for a much more substantive European evidence base on the health of women experiencing homelessness and housing exclusion within the context of evolving housing and health care systems across Europe.

References

- Altena, A., Jonker, I., & Wolf, J. R. L. M. (2009). *Onderzoek naar meiden en moeders in de residentiële opvang. Houvast: De ontwikkeling van een passende interventie voor dakloze jongeren* [Study on girls and mothers in residential care. Houvast: The development of an appropriate intervention for homeless youth]. Nijmegen: UMC Radboud.
- Anderson, I., Baptista, I., Wolf, J. R. L. M., Edgar, B., Sapounakis, A., & Schoibl, H. (2006). *The changing role of service provision: Barriers of access to health services for homeless people*. Brussels: FEANTSA.
- Anderson, I., Kemp, P., & Quilgars, D. (1993). *Single homeless people*. London: HMSO.

- Anderson, I., & Ytrehus, S. (2012). Reconceptualising approaches to meeting the health needs of homeless people. *Journal of Social Policy*, 41(3), 551–568.
- Arangua, L., Andersen, R., & Gelberg, L. (2005). The health circumstances of homeless women in the United States. *International Journal of Mental Health*, 34(2), 62–92.
- Baptista, I. (2010). Women and homelessness in Europe. In E. O'Sullivan, V. Busch-Geertsema, D. Quilgars, & N. Pleace (Eds.), *Homelessness research in Europe* (pp. 163–186). Brussels: FEANTSA.
- Beijer, U., & Andreasson, S. (2010). Gender, hospitalization and mental disorders among homeless people compared with the general population in Stockholm. *European Journal of Public Health*, 20, 511–516.
- Burau, V., & Blank, R. (2006). Comparing health policy: An assessment of typologies of health systems. *Journal of Comparative Policy Analysis*, 8(1), 63–76.
- Caton, C. L. M., El-Bassel, N., Gelman, A., Barrow, A., Herman, D., Hsu, E., et al. (2013). Rates and correlates of HIV and STI infection among homeless women. *AIDS and Behaviour*, 17(3), 856–864.
- Center for Substance Abuse Treatment. (2009). *Substance abuse treatment: Addressing the specific needs of women. Treatment Improvement Protocol (TIP) Series 51*. HHS Publication No. (SMA) 09-4426. Rockville, MD: Substance Abuse and Mental Health Services Administration.
- Cornes, M., Joly, L., Manthorpe, J., O'Halloran, S., & Smyth, R. (2011). Working together to address multiple exclusion homelessness. *Social Policy and Society*, 10(4), 513–522.
- Crawford, D. M., Trotter, E. C., Hartshorn, K. J. S., & Whitbeck, L. B. (2011). Pregnancy and mental health of young homeless women. *American Journal of Orthopsychiatry*, 81(2), 173–183.
- Dealberto, M. C. C., Middlebro, A., & Farrell, S. (2011). Symptoms of schizophrenia and psychosis according to foreign birth in a Canadian sample of homeless persons. *Psychiatric Services*, 62(10), 1187–1193.
- Edens, E. L., Mares, A. S., & Rosenheck, R. A. (2011). Chronically homeless women report high rates of substance use problems equivalent to chronically homeless men. *Women's Health Issues*, 21(5), 383–389.
- Edgar, W., & Meert, H. (2005). *Fourth review of statistics on homelessness in Europe. The ETHOS definition of homelessness*. Brussels: FEANTSA.
- FEANTSA. (2006). *The right to health is a human right: Ensuring access for people who are homeless*. Brussels: FEANTSA.

- FEANTSA. (2011). Homeless health, health and homelessness: Overcoming the complexities. *Homeless in Europe*, Spring Issue, p. 2–3. Brussels: FEANTSA.
- Gelberg, L., Browner, C., Lejano, E., & Arangua, L. (2004). Access to women's health care: A qualitative study of barriers perceived by homeless women. *Women & Health*, 40(2), 87–100.
- Goodman, L., Saxe, L., & Harvey, M. (1991). Homelessness as psychological trauma: Broadening perspectives. *American Psychologist*, 46(11), 1219–1225.
- Hamlet, N., & Hetherington, K. (2015). *Restoring the public health response to homelessness in Scotland*. Edinburgh: Scottish Public Health Network.
- Health Scotland. (2004). *Delivering health care to homeless people: An effectiveness review* (Research in Brief, 13). Edinburgh: NHS Health Scotland.
- Homelessness Task Force. (2002). *An action plan for prevention and effective response: Homelessness task force final report*. Edinburgh: Scottish Executive.
- Houston, E., Sandfort, T. G. M., Watson, K. T., & Caton, C. L. M. (2013). Psychological pathways from childhood sexual and physical abuse to HIV/sexually transmitted infection outcomes among homeless women: The role of posttraumatic stress disorder and borderline personality disorder symptoms. *Journal of Health Psychology*, 18(10), 1330–1340.
- Hwang, S. W., Chambers, C., Chiu, S., Katic, M., Kiss, A., Redelmeier, D. A., et al. (2013) A comprehensive assessment of health care utilization among homeless adults under a system of universal health insurance. *American Journal of Public Health*, 103(S2), S294–S301.
- Joly, L., Goodman, C., Froggatt, K., & Drennan, V. (2011). Interagency working to support the health of people who are homeless. *Social Policy and Society*, 10(04), 523–536.
- Jones, A. (1999). *Out of sight, out of mind? The experiences of homeless women*. London: Crisis.
- Jones, A., & Pleace, N. (2010). *A review of single homelessness in the UK 2000–2010*. London: Crisis.
- Jonker, I. E., Sijbrandij, M., & Wolf, J. R. L. M. (2012). Toward needs profiles of shelter-based abused women: A latent class approach. *Psychology of Women Quarterly*, 36(1), 38–53.
- Kemp, P., Neale, J., & Robertson, M. (2006). Homelessness among problem drug users: Prevalence, risk factors and trigger events. *Health and Social Care in the Community*, 14(4), 319–328.
- Mayock, P., & Sheridan, S. (2012) *Women's Journeys' to homelessness: Key findings from a biographical study of homeless women in Ireland*. Women and

- Homelessness in Ireland, Research Paper 1. Dublin: School of Social Work and Social Policy and Children's Research Centre, Trinity College Dublin.
- Mayock, P., Sheridan, S., & Parker, S. (2015). 'It's just like we're going around in circles and going back to the same thing ...': The dynamics of women's unresolved homelessness. *Housing Studies*, *30*(6), 877–900.
- McVicar, D., Moschion, J., & van Ours, J. (2015). From substance use to homelessness or vice versa? *Social Science and Medicine*, *136–137*, 89–98. doi:10.1016/j.socscimed.2015.05.005.
- Morrison, D. S. (2009). Homelessness as an independent risk factor for mortality: Results from a retrospective cohort study. *International Journal of Epidemiology*, *38*(3), 877–883.
- Muñoz, M., Crespo, M., & Perez-Santos, E. (2005). Homelessness effects on men's and women's health. *International Journal of Mental Health*, *34*(2), 47–61.
- Netherlands Ministry of Health, Welfare and Sport. (2006). *Strategy plan for social relief of 4 major cities*. The Hague: Ministry of Health, Welfare and Sport.
- Nielsen, S. F., Hjorthøj, C. R., Erlangsen, A., & Nordentoft, M. (2011). Psychiatric disorders and mortality among people in homeless shelters in Denmark: A nationwide register-based cohort study. *Lancet*, *377*(9784), 2205–2214.
- O'Carroll, A., & O'Reilly, F. (2008). Health of the homeless in Dublin: Has anything changed in the context of Ireland's economic boom? *European Journal of Public Health*, *18*(5), 448–453.
- Paquette, K., & Bassuk, E. (2009). Parenting and homelessness: Overview and introduction to the special section. *American Journal of Orthopsychiatry*, *79*(3), 292–298.
- Pleace, N., Jones, A., & England, J. (2000). *Access to general practice for people sleeping rough*. York: Department of Health/University of York.
- Pleace, N., & Quilgars, D. (2004). *Delivering health care to homeless people: An effectiveness review*. Edinburgh: Health Scotland.
- Rayburn, N. R., Wenzel, S. L., Elliott, M. N., Hambarsoomians, K., Marshall, G. N., & Tucker, J. S. (2005). Trauma, depression, coping, and mental health service seeking among impoverished women. *Journal of Consulting and Clinical Psychology*, *73*(4), 667–677.
- Razpotnik, Š., & Dekleva, B. (2009a). Homelessness and the accessibility of the health care system. *Socialna Pedagogika*, *13*, 111–130.

- Razpotnik, Š., & Dekleva, B. (2009b). *Brezdomstvo, zdravje in dostopnost zdravstvenih storitev* [Homelessness, Health and Availability of Health Services]. Ljubljana: Ministrstvo za zdravje.
- Riley, E. D., Weiser, S. D., Sorensen, J. L., Dilworth, S., Cohen, J., & Neilands, T. B. (2007). Housing patterns and correlates of homelessness differ by gender among individuals using San Francisco free food programs. *Journal of Urban Health: Bulletin of the New York Academy of Medicine*, 84(3), 415–422.
- Robertson, M. J., Clark, R. A., Charlebois, E. D., Tulskey, J., Long, H. L., Bangsberg, D. R., et al. (2004). HIV seroprevalence among homeless and marginally housed adults in San Francisco. *American Journal of Public Health*, 94(4), 1207–1217.
- Robertson, M. J., & Winkleby, M. A. (1996). Mental health problems of homeless women and difference across subgroups. *Annual Review of Public Health*, 17, 311–336.
- Scottish Executive. (2005). *Health and homelessness standards*. Edinburgh: Scottish Executive.
- Shakarishvili, A., Dubovskaya, L. K., Zohrabyan, L. S., St Lawrence, J. S., Aral, S. O., Dugasheva, L. G., et al. (2005). Sex work, drug use, HIV infection, and spread of sexually transmitted infections in Moscow, Russian Federation. *The Lancet*, 366(9479), 57–60.
- Smith, M., McGee, H. M., Shannon, W., & Holohan, T. (2001). *One hundred homeless women: Health status and health service use of homeless women and their children in Dublin*. Dublin: Health Services Research Centre Department of Psychology & Royal College of Surgeons in Ireland.
- STA, Slovenska tiskovna agencija [Slovene Press Agency]. (2012). It is 10 years since the beginning of ambulant for uninsured persons, 17.1.2012. Retrieved August 19, 2013, from http://www.siol.net/novice/zdravje/2012/01/mineva_deset_let_od_zacetka_delovanja_ambulante_za_nezavarovane_osebe.aspx
- Stein, J. A., Andersen, R., & Gelberg, L. (2007). Applying the Gelberg-Andersen behavioural model for vulnerable populations to health services utilization in homeless women. *Journal of Health Psychology*, 12(5), 791–804.
- Stewart, A. J., Steiman, M., Cauce, A. M., Cochran, B. N., Whitbeck, L. B., & Hoyt, D. (2004). Victimization and posttraumatic stress disorder among homeless adolescents. *Journal of the American Academy of Child Psychiatry*, 43(3), 325–331.

- Stoltenborgh, M., Van IJzendoorn, M. H., Euser, E. M., & Bakermans-Kranenburg, M. J. (2011). A global perspective on child sexual abuse: Meta-analysis of prevalence around the world. *Child Maltreatment, 16*(2), 79–101.
- Strehlau, V., Torchalla, I., Li, K., Schuetz, C., & Kraus, M. (2012). Mental health, concurrent disorders, and health care utilization in homeless women. *Journal of Psychiatric Practice, 18*(5), 349–360.
- Taylor, K. M., & Sharpe, L. (2008). Trauma and post-traumatic stress disorder among homeless adults in Sydney. *Australian and New Zealand Journal of Psychiatry, 42*(3), 206–213.
- Teruya, C., Longshore, D., Andersen, R. M., Arangua, L., Nyamathi, A., Leake, B., et al. (2010). Health and health care disparities among homeless women. *Women Health, 50*(8), 719–736.
- Tischler, V. A., & Vostanis, P. (2007). Homeless mothers: Is there a relationship between coping strategies, mental health and goal achievement? *Journal of Community & Applied Social Psychology, 17*(2), 85–102.
- Torchalla, I., Strehlau, V., Li, K., & Krausz, M. (2011). Substance use and predictors of substance dependence in homeless women. *Drug and Alcohol Dependence, 118*(2–3), 173–179.
- Tucker, J. S., D'Amico, E. J., Wenzel, S. L., Golinelli, D., Elliott, M. N., & Williamson, S. (2005). A prospective study of risk and protective factors for substance use among impoverished women living in temporary shelter settings in Los Angeles County. *Drug and Alcohol Dependence, 80*(1), 35–43.
- Wenzel, S. L., Tucker, J. S., Elliott, M. N., Hambarsoomian, K., Perlman, J., Becker, K., et al. (2004). Prevalence and co-occurrence of violence, substance use and disorder, and HIV risk behaviour: A comparison of sheltered vs. low-income housed women in Los Angeles County. *Preventive Medicine, 39*(3), 617–624.
- Wilson, M. (2005). Health-promoting behaviours of sheltered homeless women. *Family & Community Health: The Journal of Health Promotion & Maintenance, 28*(1), 51–63.
- World Health Organization (WHO). (2013). *World health report 2013: Research for universal health coverage*. Geneva: WHO.
- Wright, N. M. J., & Tompkins, C. N. E. (2006). How can health services effectively meet the health needs of homeless people? *British Journal of General Practice, 56*(525), 286–293.
- Zugazaga, C. (2004). Stressful life event experiences of homeless adults: A comparison of single men, single women, and women with children. *Journal of Community Psychology, 32*(3), 643–654.

8

Mothers Who Experience Homelessness

Linda van den Dries, Paula Mayock, Susanne Gerull,
Tessa van Loenen, Bente van Hulst, and Judith Wolf

Introduction

This chapter examines family homelessness in Europe, with particular attention to women who are mothers and in living situations of homelessness, either with or without their children in their care. The latter group of mothers is included because they are far less visible—and often not

Linda van den Dries

Radboud University Medical Center, Nijmegen, The Netherlands
e-mail: Linda.vandenDries@radboudumc.nl

P. Mayock (✉)

Trinity College Dublin, Dublin, Ireland

T. van Loenen • J. Wolf

Radboud University Medical Center, Nijmegen, The Netherlands

S. Gerull

Alice Salomon University of Applied Sciences, Berlin, Germany

B. van Hulst

Tilburg University, Tilburg, The Netherlands

© The Author(s) 2016

P. Mayock, J. Bretherton (eds.), *Women's Homelessness in Europe*,

DOI 10.1057/978-1-137-54516-9_8

recognized as mothers—within a range of service settings where they are counted and treated as ‘single’ women. The chapter starts by providing an overview of family homelessness in Europe, highlighting the diversity of family forms and the extent to which families headed by a single mother are represented within populations of homeless families. This is followed by a discussion of mothers’ routes into homelessness and the explanations or causes of family homelessness that have come to prominence in several European countries, particularly in recent years. A number of key characteristics and experiences of homeless mothers are then examined in order to more fully elucidate their circumstances and the challenges many are likely to face in seeking a route to stable housing. The focus then shifts to the topic of homelessness and motherhood, including a discussion of the challenges associated with parenting in the context of homelessness. Lastly, the chapter provides an overview of some of the dominant characteristics of service provision for homeless mothers in Europe; conclusions are drawn and possible directions for future research are discussed.

Family Homelessness in Europe

The number of families becoming homeless and accessing homelessness services has increased in recent years in many European countries, including France, Ireland, Belgium, the UK, Sweden and the Netherlands (De Boyser et al. 2010, Department for Communities and Local Government 2015a; Nordfeldt 2012; Planije et al. 2014; Vandentorren et al. 2016; Walsh and Harvey 2015). While the techniques and methodologies of enumerating homeless persons generally and women, in particular, clearly vary throughout Europe (see Chap. 5, this volume), key indicators nonetheless suggest that family homelessness is a pressing social problem across the EU and that the number of families entering into situations of homelessness has increased significantly in some countries. For example, figures published in Sweden indicate that the number of homeless families in the city of Stockholm increased from 160 in 2008 to 225 in 2010 (Stockholms stad 2011). More dramatic increases have been recorded in recent years in other countries, including Ireland, where the number of families accessing emergency accommodation has grown considerably. Coined a ‘crisis of family homelessness’, the period from

mid-2014 has seen a steady increase in the number of adults accessing homeless accommodation and a key feature of this increase has been the number of adults presenting with dependent children (Walsh and Harvey 2015). While 364 families (with 567 dependent children) were homeless in Dublin—where the problem of homelessness is concentrated—in June 2014, this figure had risen to 790 (with 1616 dependent children) in February 2016 (Department of the Environment, Community and Local Government 2016; Dublin Region Homeless Executive 2016a), representing an increase of 117 per cent. In the UK, although the number of statutorily homeless households peaked at the end of September 2004 before falling sharply until the end of 2010, recently published figures indicate an increase of 8 per cent in the number of households accepted as homeless between January 1st and March 31st 2015 compared to the same period in 2014 (Department for Communities and Local Government 2015a). In the Netherlands, in 2012, most municipalities reported an increase in the number of homeless families accessing shelter facilities. The magnitude of this increase, however, is not known because the various municipalities define homeless families differently and use different registration methods (Tuynman et al. 2013).

In many countries, information is available on the composition of homeless families and the data in several countries signal some notable gender dimensions to the problem of family homelessness. Perhaps most significantly, across Europe, a majority of homeless families are headed by a single woman. While figures and percentages vary between countries—and are not necessarily amenable to direct comparison because of the lack of gendered statistics in many countries—the number of households headed by women with dependent children is significant and appears to be rising. Recent figures from the UK indicate that, in 2015, 52 per cent of homeless family households were lone parent households with dependent children (Department for Communities and Local Government 2015a). Similarly, in France, a 2013 survey of homeless sheltered families found that half were female-headed single parent families (Vandentorren et al. 2016) while, in Sweden, single-mother families were found to constitute the largest group of homeless families in Stockholm, making up 60 per cent of all families counted in a 2011 survey (Stockholms stad 2011). Figures from other countries, including Ireland, Germany and Norway, have similarly consistently recorded a large proportion

of families headed by a single parent—most often a mother—in their populations of homeless families (Department of the Environment, Community and Local Government 2016; Dyb and Johannassen 2013; Gerull and Wolf-Ostermann 2012). In most countries, data pertaining to homeless families headed by a single mother suggests that these women are young—very often in their late twenties or early thirties—with one or two, and far less commonly more than three, dependent young children, typically under the age of ten years (Department for Communities and Local Government 2015a; Dyb and Johannassen 2013; Pleace et al. 2008; Mikolajczyk 2016; Smith et al. 2001).

These statistics strongly suggest that, throughout Europe, gender intersects with motherhood to produce particular vulnerabilities to housing instability and further point to single parenthood as a specific risk for homelessness. Across countries in Europe, research has long since established that single parent households are more likely to be poor than two-parent households and that single mothers face higher poverty risks than single fathers (Brady and Burroway 2012; Gornick and Jäntti 2009; Maldonado and Nieuwenhuis 2015). It is also well recognized that children are more likely to be poor if they live with only one parent (Atkinson and Marlier 2010; Robson and Berthoud 2003). Moreover, the socio-economic transformations that have led to women's greater participation in labour markets have simultaneously brought about 'increased risks of vulnerability, which are particularly challenging to women and female-headed households' (Baptista 2010, p. 168; see also Edgar and Doherty 2001).

In a number of European countries, single motherhood and its intersection with immigration status also features prominently in the available statistics on family homelessness. This is the case in France, where a survey of homeless families in the Paris region found that 94 per cent of the families—half of them headed by a single female—were born outside France (Vandentorren et al. 2016). The findings of this Paris-based survey indicate that those individuals born in other countries had lived in France for an average of five years and that, upon arrival, most did not have a home, with 30 per cent relying on sheltered accommodation at that point. In Sweden, survey-based research on homeless families in Stockholm has similarly highlighted the predominance of single mothers *and* immigrants, with 74 per cent

of the homeless families surveyed having an immigrant background (Stockholms stad 2011). An over-representation of Black and Black British people is also a key feature of the characteristics of homeless families in England, where lone parent families represent 65 per cent of all families accepted as homeless (Pleace et al. 2008). More broadly, research and commentary at a European level has highlighted immigrant families' higher risk of homelessness and housing instability (Edgar et al. 2004; Pleace 2010; see Chap. 10, this volume).

It is important to emphasize that in most European countries the precise size of the population of homeless mothers is not known. This is due in part, as stated earlier, to the lack of gendered statistics in many countries but also to the often hidden nature of women's homelessness generally and homelessness among mothers, in particular (see Chaps. 3 and 5, this volume). Recent research on family homelessness in a number of countries has, quite pointedly, signalled the propensity for homeless families to avoid contact with homeless service systems, certainly initially, and to instead rely on accommodation provided by family members or friends. In Ireland, a recent qualitative study of the experiences of 30 homeless families at different stages in their journeys through homelessness found that the families had typically spent periods in highly unstable accommodation—including living with relatives or friends—prior to approaching homelessness services (Walsh and Harvey 2015). Similarly, an analysis of a random sample of families accepted as homeless between January and June 2005 (including 2053 adult respondents and 450 child respondents) in England found that a large majority (85 per cent) of all adult respondents had undertaken 'one or more actions to try to prevent or address their homelessness before approaching a local authority for help' (Fitzpatrick and Pleace 2012, p. 241). These families had sought the help and assistance of family or friends for accommodation (43 per cent), tried to secure housing in the private rented sector (33 per cent), or attempted to gain access to the social rented sector (30 per cent). Furthermore, a majority of adult respondents reported at least one concern about applying and registering as homeless, frequently related to fears that they would have to live in a 'rough' or undesirable area or that they would be provided with poor quality accommodation. According to the authors, 'the statutory system is generally a last resort for low-income families when they have run out of all other viable housing options' (Fitzpatrick and Pleace 2012,

p. 242). Moreover, since women often avoid homelessness services because they fear for their safety in these settings (Jones 1999; May et al. 2007; Moss and Singh 2015), official figures and statistics from shelters and other accommodation types are likely to underestimate the extent of women's homelessness. Thus, at any given time, a considerable number of families (comprised primarily of single mothers) may not be counted as homeless because they have not yet accessed services or registered as 'homeless' with service systems. Others with tenuous or no ties to the housing market because they are living with relatives or friends, or 'doubling up' in rented accommodation where they have no formal lease, will not be fully visible in statistics (Nordfeldt 2012). Apart from the undercounting of families and mothers living in situations of hidden homelessness, enumeration is further complicated by the fact that many homeless mothers do not have their children in their care at the point of entry to the homeless service system (Hutchinson et al. 2014; Mayock and Sheridan 2012a; Mayock et al. 2015; Moss and Singh 2015) and are therefore not counted as *mothers*. In any case, homeless mothers are often not surveyed or enumerated because they do not necessarily experience long-term homelessness and, instead, spend short periods in service settings or experience homelessness episodically (FEANTSA 2007).

Family homelessness clearly comes in different forms. However, the available data from several countries throughout Europe suggest that mothers with young children represent a significant and growing segment of the homeless population. The most common profile of a homeless family is one headed by a young woman (in her late twenties or early thirties) with approximately two children, typically under the age of ten years. While all families who become homeless are likely to struggle financially and to face numerous barriers to housing stability, single mothers with dependent children will face additional challenges related to their parenting roles and responsibilities, opportunities for labour market participation, and issues associated with their physical and mental health and the health and well-being of their children. There are also mothers who are homeless and who do not have their children in their care and these women have specific vulnerabilities that often go unrecognized. These issues will be discussed in detail later in this chapter. First, however, it is important to discuss mothers' routes to homelessness as well as the major precipitators of family homelessness that have come to prominence in recent European research.

Mothers' Routes into Homelessness

Women's routes into homelessness are often complex and can seldom be related to a single factor or event (Mayock and Sheridan 2012a, b; Pleace et al. 2008; Reeve et al. 2006). In countries throughout Europe and in the USA, homelessness among women and their children has been found to be associated with a range of individual and structural factors, including family violence, relationship breakdown, poverty, and a shortage of affordable housing (Anderson and Christian 2003; Bassuk et al. 1997; Gould and Williams 2010; Halpenny et al. 2001; Mayock and Sheridan 2012a, b; Pleace et al. 2008; Smith et al. 2001; Vandentorren et al. 2016; Walsh and Harvey 2015). Indeed, a complex interaction of individual and structural factors or roots of homelessness is increasingly acknowledged in the literature (Fitzpatrick and Christian 2006; Fitzpatrick et al. 2009). Nonetheless, recent data from a number of countries, including Ireland, the UK and Sweden, suggest that family homelessness is strongly related to structural factors. For example, in Ireland—where, as outlined earlier, a steep and consistent increase in the number of families registering as homeless became apparent from early 2014—the reasons for families becoming homeless centre primarily on conditions within the private rented market. Writing in the Irish context, Walsh and Harvey (2015, p. 38) concluded that '[t]he primary cause of family homelessness appears to be the freezing out from private rental accommodation sector of low-income households. This freezing out has happened because the stock of private rented accommodation has seen rents increase and the number of properties available to rent reduce in number'. In England, a recent analysis found relationship breakdown (38 per cent) followed by eviction (26 per cent) to be the primary causes of family homelessness; however, perhaps more significantly, this same analysis revealed that the homeless families' pathways through temporary accommodation (in terms of duration of stay, type of accommodation experienced, and the number of moves between temporary accommodation types) were profoundly shaped by geographical location. These geographical patterns, according to the authors, 'reflected varying levels of "housing stress" across the country, with the most protracted and least satisfactory temporary accommodation pathways reported in those broad regions (London, and to a lesser extent the South) where shortages of social and affordable housing

are most acute' (Fitzpatrick and Pleace 2012, p. 242). In other words, the length of time that families spent in temporary accommodation (awaiting housing) was strongly associated with conditions within the housing market. Moreover, in the UK, the end of an assured shorthold tenancy is an increasingly frequent cause for the loss of a last home for homeless households in a context where the number of households living in the private rented sector has doubled in the last ten years (Department of Communities and Local Government 2015a, b). Family homelessness in Sweden is similarly associated with structural changes in the housing market, including a growing shortage of housing, particularly in larger cities, and the lack of availability of affordable rental accommodation (Nordfeldt 2012).

There is also research evidence of factors that pertain *specifically* to mothers and their routes to homelessness. For example, one study of single homeless mothers in the Netherlands found that becoming a mother may itself be a risk factor for homelessness (Altena et al. 2009). Of the 57 single mothers interviewed by Altena et al. (2009), one-quarter had been forced to leave the family home due to a pregnancy. Other research suggests that mothers may leave the family home in order to protect their children from physical or sexual abuse (Smith et al. 2001). The parenting responsibilities of mothers may be another factor that plays a role in their becoming homeless, often because their prospects of labour market participation are compromised. Mothers face significant challenges in finding employment and often hold low-paid occupations, which may in turn heighten their risk of losing their home (Schwartz et al. 2010). Cultural norms that presume childcare is 'women's work' and simultaneously place little responsibility on fathers for the care of children (see Chap. 3, this volume), in combination with the limited availability of affordable childcare services and support (Pleace et al. 2008; Smith et al. 2001), are additional factors that can prevent women from seeking and maintaining employment.

Homelessness among women and their children is associated with a complex interaction of individual and structural factors. However, the role of structural factors related to changes in the housing market and a shortage of accessible and affordable housing appears to be a strong driver of family homelessness in many European countries. Factors directly related to motherhood and the parenting responsibilities of mothers may also play a role in

precipitating women's homelessness, particularly when they coincide with poverty, unemployment, family violence, relationship breakdown or eviction.

The Characteristics and Experiences of Homeless Mothers

In some countries throughout Europe and in the USA, there is evidence of fundamental differences in characteristics between single adult homeless individuals and homeless family households and evidence also that these differences may be indicative of levels and complexity of need. In particular, it appears that homeless families are far less likely to have mental health and substance use problems than their single counterparts (Culhane et al. 2007; Fitzpatrick and Pleace 2012; Nordfeldt 2012; Pleace et al. 2008). Commenting on the small percentage of homeless family members who reported substance misuse, the use of specialist mental health services, or criminal justice contact, Fitzpatrick and Pleace (2012, p. 240) suggest that '[t]his paints a very different picture to that pertaining in studies of single homeless people, where personal support needs associated with issues such as substance misuse and mental health problems tend to be reported at much higher levels'.

Mothers who experience homelessness are not a homogenous group; their life histories are varied, as are their routes to homelessness and the paths or journeys that they take through both hidden and documented homelessness. Notwithstanding the fact that women in homeless households may be less likely to report experiences associated with deep social exclusion or 'multiple exclusion homelessness' (Bowpitt et al. 2011), the findings of several European studies indicate that a significant proportion of mothers (and, indeed, all women) who experience homelessness report high levels of vulnerability—related to poverty, family disruption, gender-based violence, childhoods spent in state care, and mental ill-health—both prior and subsequent to becoming homeless (Hutchinson et al. 2014; Jones 1999; Mayock and Sheridan 2012a; Reeve et al. 2006). What follows is a discussion of three significant dimensions of experience—poverty and socio-eco-

conomic disadvantage, weak social support networks, and physical and mental health—that have particular relevance for understanding the circumstances of homeless mothers and the challenges they are likely to face in negotiating a route to stable housing.

Poverty and Socio-economic Disadvantage

Poverty is a key challenge linked to parenting in the context of homelessness. Many homeless mothers are unemployed (Halpenny et al. 2001; Pleace et al. 2008; Wolf et al. 2006) or earn insufficient income to support their families (Averitt 2003). In the Netherlands, among abused women accessing women's shelters (of whom the large majority were mothers), only 14 per cent of the women were employed (Wolf et al. 2006) while, in Ireland, only one of the 60 homeless women (again, a large percentage of them mothers) interviewed in one study was employed at the time of interview (Mayock and Sheridan 2012a). Similarly, in the UK, a large majority of women lone parents (78 per cent) with children under the age of five years accepted as homeless were not in paid work (Pleace et al. 2008). Research in a number of European countries also demonstrates that homeless mothers typically have low educational levels (Altena et al. 2009; Mayock and Sheridan 2012a; Mikolajczyk 2016; Pleace et al. 2008; Vandentorren et al. 2016), which in turn greatly diminishes their chances of labour market participation. For example, in the Netherlands, half of a sample of 57 young mothers living in residential shelter facilities for homeless young adults had not engaged in any form of post-primary education (Altena et al. 2009) and a similar percentage (48 per cent) was found for adult homeless women living in women's shelters in the Netherlands (Wolf et al. 2006). Apart from low educational attainment, problems associated with the lack of affordable childcare facilities, limited access to transportation, and the stigma associated with homelessness mean that finding and maintaining employment is challenging for mothers who experience homelessness (Pleace et al. 2008; Wolf et al. 2006).

Partly due to high levels of unemployment and their heavy reliance on social welfare assistance, poverty risk among homeless mothers is high (Halpenny et al. 2001, Pleace et al. 2008, Tischler et al. 2007). A

majority are in debt (Pleace et al. 2008; Wolf et al. 2006) and struggle to provide basics—including clothing, meals, school lunches and uniforms—for their children (Altena et al. 2009; Halpenny et al. 2001). Poverty is undoubtedly a major contributor to homelessness among women and there is also evidence that families experience a deterioration in their financial situations after they enter into homelessness services or are accepted as homeless (Pleace et al. 2008). This means that the challenges associated with exiting homelessness will be significant for mothers, particularly since many will have limited opportunity for labour market participation and/or do not necessarily have access to resources and support that might facilitate a resolution to their homelessness.

Weak Social Support Networks

Apart from the economic strain that homeless mothers typically experience, most will have experienced a range of additional stressors, including exposure to violence, often in the form of intimate partner violence (Jones 1999; Mayock and Sheridan 2012a, b; Reeve et al. 2006; see Chap. 6, this volume). For women who experience trauma of this nature, a strong support network can buffer the negative effects of stress and may positively influence their parenting skills (Anderson et al. 2012; Letiecq et al. 1998; Wolf et al. 2006). However, compared to housed women, homeless mothers often have smaller social networks and more limited access to support in times of need (Bassuk et al. 1996; Letiecq et al. 1998; Rog and Holupka 1998; Zugazaga 2008). Furthermore, the social networks of homeless mothers can diminish after mothers become homeless because they may have no option but to move away from friends and relatives. Restrictive rules within the places where homeless mothers are accommodated appear to also play a role and can make it difficult for mothers and their children to maintain contact with their family members, friends and community (Halpenny et al. 2001). In one French study, hostel rules were found to prevent visitors from entering ‘private spaces’, making it difficult for family members and friends to visit residents and, therefore, for homeless mothers to maintain contact with significant others in their lives (Thiery 2008).

The finding that homeless shelters contribute to a weakening of social ties is, however, not supported by other research. For example, a US-based

study of 28 mothers residing in shelters found enduring social ties in the informal support networks of homeless mothers (Coog-Craig and Koehly 2011). Although homeless mothers' social ties may be weaker compared to housed mothers, many homeless mothers have been found to retain some form of social connection (Coog-Craig and Koehly 2011; Pleace et al. 2008). For example, a study by Pleace et al. (2008) demonstrated that although homeless families in the UK (65 per cent of them single mothers) received emotional and practical support less often than their housed counterparts, around 80 per cent of the families did have access to at least some form of support. Similarly, Smith et al.'s (2001) study of 100, mostly single, homeless women (80 per cent of them mothers) found that, of the mothers who were caring for their children ($n = 55$), 43 did have a friend or relative that provided support.

Overall, the research evidence on homeless mothers' support networks is mixed and inconclusive, owing perhaps in part to the different aims and methodological approaches used in those studies that have examined the sources of support available to women experiencing homelessness. Further research investigating how the, often small, social networks of homeless mothers operate and can be sustained and supported would seem to be important, particularly since the presence of supportive relationships may positively impact homeless mothers' ability to access and maintain stable housing (Letiecq et al. 1998; Rog and Holupka 1998).

Physical and Mental Health

Research suggests that many mothers who experience homelessness report multiple health problems (Pleace et al. 2008; Tischler et al. 2004, 2007), including depression (Altena et al. 2009; Tischler et al. 2007), severe psychiatric problems (Bassuk et al. 1998; LaVesser et al. 1997; Smith et al. 2001) and physical health problems (Bassuk et al. 1996; Smith et al. 2001). The mental and physical health problems reported by homeless mothers largely mirror the often poor health status of homeless women generally (see Chap. 7, this volume). However, for homeless mothers, poor mental and physical health is especially problematic because it has a negative impact not only on their own lives but also, potentially, on the

lives of their children (Smith et al. 2001; Tischler et al. 2007; Wolf et al. 2006) and may also impact their parenting roles (Paquette and Bassuk 2009). Furthermore, for homeless mothers, it may be difficult to overcome mental and physical health stressors since many do not have good access to appropriate medical treatment (Smith et al. 2001).

Like homeless women in general, homeless mothers may report multiple physical and mental health problems and also experience difficulty in accessing appropriate health care. While the evidence base on the health of mothers who experience homelessness is not sufficiently robust to draw clear-cut conclusions, the challenges and threats posed to women's mothering and parenting roles are relatively well documented and, for a significant number of mothers, may pose a risk to their physical and mental well-being.

Motherhood and Homelessness

Homeless Women's Separation from Their Children

Particularly in recent years, research has demonstrated that a large number of women who access homelessness services are mothers who are separated from their children. Currently there are no available or reliable estimates of the number of women throughout Europe (or, indeed, within individual European countries) who are separated from their children during periods of homelessness. However, the findings of a number of small-scale qualitative studies suggest that the number is likely to be significant and higher than might be anticipated. In Ireland, one of the first studies to examine in depth the situations of homeless women accessing emergency accommodation found that, of the 80 women interviewed, 32 per cent did not have their children living with them and a further 16 per cent had only some of their children in their care (Halpenny et al. 2001). A more recent Irish study has similarly highlighted that a large number of women accessing homelessness services alone or as 'single' women were in fact mothers who did not have their children with them; of the 40 mothers in a larger sample of 60 homeless women who were accessing homelessness

or domestic violence services, only 14 (35 per cent) women were caring for their children full-time (Mayock and Sheridan 2012a). In the UK, a study by Reeve et al. (2006) found that nearly one-third of their sample of 'single' homeless women, that is, those accessing services without dependent children, were in fact mothers while, in Lisbon (Portugal), almost all of the children of the 56 homeless women surveyed in Martins' (2010) study were looked after by a family member or state institutions. Finally, Moss and Singh's (2015) study of women rough sleepers in four European countries—the UK, Hungary, Spain and Sweden—draws particular attention to mothers who were disconnected from their children, meaning that the women interviewed may have had little or no contact with them.

Mother-child separations can be either voluntary or involuntary. In the case of the former, a mother may ask a family member(s) or friend to take care of their children in order to protect them, for example, from the trauma of homelessness or from missing school. Involuntary separations, on the other hand, mean that the decision to remove a child or children from the care of a mother is made by child welfare services. The reasons for such involuntary separations are complex and diverse and may be related to a mother's incarceration (Mayock and Sheridan 2013), substance use and/or coincide with a mother's engagement in a residential substance use programme or their admission to a psychiatric treatment facility (Hutchinson et al. 2014). Mothers may also be separated from their children because their older male children are denied access to some shelters and domestic violence services (David et al. 2012; Paquette and Bassuk 2009; Wolf et al. 2006). Research in Belgium, the UK, Hungary, Sweden and Germany suggests that many mothers who experience or are at risk of homelessness fear that their children will be taken into state care (Bernard 2010; Hutchinson et al. 2014; Szoboszlai 2010) and that they may avoid contact with homelessness and other (for example, drug or alcohol treatment) services for this reason (Enders-Dragässer 2010; Gerull and Wolf-Ostermann 2012, Hutchinson et al. 2014; National Alliance to End Homelessness 2006; Smith et al. 2001).

Homeless mothers who are separated from their children experience a devastating loss (Enders-Dragässer 2010; Mayock et al. 2015). These mothers feel disempowered and are often stigmatized as inadequate parents, particularly if their separation from their children is linked to

their own substance use problems and/or mental ill-health (Barrow and Laborde 2008; Hutchinson et al. 2014). In a UK study, women's separation from their children often resulted in the mothers' diminished self-esteem and loss of confidence (Hinton 1998). Research has also demonstrated that many women internalize feelings of shame and guilt and experience high levels of distress because of the stigma of 'failed' or 'spoilt' motherhood (Hutchinson et al. 2014; Mayock et al. 2015). These and other studies (Gerull and Wolf-Ostermann 2012) have highlighted homeless mothers' desire for support to enable them to reconnect and, ultimately, reunite with their children. Indeed, the hope of having their children returned to their care often underpins the mothers' desire for a secure and stable home and can act as a key motivating factor in their lives (Reeve et al. 2006). However, the situations and experiences of mothers who are separated from their children frequently go unrecognized and services, in the main, 'are ill equipped to understand and respond to the further trauma that arises from separation from children' (Hutchinson et al. 2014, p. 15).

Perhaps further exposing the distress that mothers who are separated from their children experience, the positive effects of motherhood on the lives of homeless women have been documented in a number of studies. In the Netherlands, one study of homeless young women accessing shelter accommodation for homeless youth found that the homeless young mothers studied ($n = 57$), a majority of them single, reported fewer physical health and psychological problems during the 30 days prior to interview than homeless women who were not mothers ($n = 81$) (Altena et al. 2009). The broader benefits of being or becoming a parent have been documented by researchers who have examined the life contexts and experiences of motherhood. For example, one study based on interviews with 21 adolescent girls living in temporary shelters in São Paulo, Brazil, found that motherhood gave meaning to the young women's lives, helped to reorient them towards more stable bonds and served a structuring role by providing them with tangible goals (Scappaticci and Blay 2009). Particularly over time, motherhood became a positive and transformative experience, a finding echoed in Canadian research which has found that, among homeless young women, becoming a mother led to a reduction in risk behaviours such as substance use as well as the desire to

‘start over’ in order to give their children a ‘good life’ (King et al. 2009; Ruttan et al. 2012). Findings such as these lend considerable support to the claim that having children in one’s care may provide a protective and positive function for women who experience homelessness.

Homelessness and Parenting

Even if, as research suggests, motherhood may have positive effects on the lives of homeless women, homelessness significantly undermines women’s capacity to parent and protect their children, often leaving them feeling depressed, anxious and ashamed, and with a significantly eroded sense of self (Halpenny et al. 2002; Memmott and Young 1993; Paquette and Bassuk 2009). Mothers may feel that they have failed their children and may also experience guilt because they are unable to provide their children with a secure home. Other problems mothers encounter relate directly to the physical surroundings of shelters or other emergency settings where they reside and where there is an absence of safe play areas (Smith et al. 2001; Wolf et al. 2006), inadequate cooking facilities (Smith et al. 2001) and a lack of private spaces where they can nurture their children and develop supportive relationships (Halpenny et al. 2002; Swick et al. 2014). Mothers, particularly those living in shelters, have to cope with living in close proximity to others (Halpenny et al. 2002; Thiery 2008; Wolf et al. 2006) and looking after children in these circumstances can give rise to conflict between mothers and their children (Halpenny et al. 2002). Recent research in the UK on homeless families living in emergency bed and breakfast (B&B) accommodation and hostels has detailed a wide array of stressors for parents and their children, including a perceived lack of safety and security, highly restricted living spaces, often with no access to kitchen facilities, and the associated stress of completing everyday tasks such as doing laundry, getting washed and dressed and preparing meals within confined and inadequate spaces (Pennington and Banks 2015). Somewhat similar findings have been documented in the Irish context, where a study of families living in commercial hotels, B&Bs and supported temporary accommodation has highlighted the significant challenges faced by mothers and their children, including

overcrowding, dislocation from school and wider family support, and the absence of basic facilities (cooking, laundry and so on) (Walsh and Harvey 2015). Speaking of homeless women who access emergency shelter in the Finnish context, Haahtela (2014, p. 8) remarks: 'A woman in a shelter is "not in her proper place" so to speak; she is away from the social relationships and activities that she is associated with'.

The rules and regulations that dictate the pace of life within emergency accommodation settings is another significant challenge for mothers who are caring for children and a number of studies have examined the impact of shelter life on the family relationships of mother-headed families. For example, the findings of one Dutch study have highlighted the tensions that can arise between mothers and shelter staff because of their differing perspectives on child rearing practices which, in turn, leave mothers feeling undermined (Wolf et al. 2006). This study also revealed that mothers were, in general, reasonably content with their relationships with their children but that at least 40 per cent felt that they needed support in maintaining healthy relationships with them (Wolf et al. 2006). The impact of the conditions and rules within homeless hostels and the threats they may pose to women's parenting roles and identities has also been documented in France (Thiery 2008). The women in Thiery's study (2008) feared that the conditions within the shelters where they resided might negatively influence the way their children perceived them and also undermine their authority as parents. Additionally, the lack of space and privacy meant that children were often exposed to the raw emotions of their mothers, which in turn placed increased stress on the mother-child relationship (Thiery 2008). Indeed, mothers who live with their children in shelters or other forms of emergency accommodation frequently stress the need to appear strong and put on a brave face for their children (Hutchinson et al. 2014).

Finally, it is important to note that the children of homeless mothers will typically have suffered traumatic and sometimes multiple stressful life events, including experiences of physical and/or sexual abuse and/or violence in their homes (Brilleslijper-Kater et al. 2010; Smith et al. 2001). These traumatic experiences negatively impact children's emotional and behavioural development (Brilleslijper-Kater et al. 2010; Halpenny et al. 2001) and can make parenting more challenging for mothers. In the

Netherlands, the findings of one study indicate that many children living in women's shelters exhibited various behavioural and psychological problems. Although the children in these shelters did receive support in relation to various life domains, individual care plans and intensive personal support were often not available (Brilleslijper-Kater et al. 2010), which meant that parents could not rely on ongoing and planned advice and support in their attempts to address their children's problems. Mothers who are homeless may have contact with a range of welfare services, including services designed to support their children, but support is often fragmented and uncoordinated. In the UK context, Cameron et al. (2016, p. 350) draw attention to a range of services—including housing support charities, social work, health, education and training services with which homeless women reported contact—highlighting 'the patchwork nature of social care available to homeless women', which they attribute to the uncoordinated nature of support offered to women experiencing homelessness.

Overall, the available evidence suggests that homeless mothers with dependent children will potentially face a range of challenges in their efforts to provide adequate care for their children. However, it is not clear to what extent these issues and challenges are addressed by service providers throughout Europe. As the following section demonstrates, there is great variation in the nature of service provision for homeless mothers Europe-wide; furthermore, very little is known about the types and range of support provided to mothers who access these services or about the impact of such support (where it exists) on mothers and their children.

Service Provision for Homeless Mothers

Homeless women with dependent children are prioritized for accommodation in many Northern European countries, including Denmark, Finland, France, Germany, Luxembourg, Sweden, Ireland and the UK (see Chap. 3, this volume). However, the nature and extent of the support offered to homeless women with children varies significantly between welfare states and, in any case, there is not necessarily a direct relationship between types of welfare state and how different European societies respond to homelessness (see Chap. 4, this volume). There is also great variation in the

types of services and accommodation that homeless mothers can access even if, across Europe, homelessness services are delivered primarily by the state and the voluntary (NGO) sector, with evidence in almost all countries of a shift towards an increasing role for non-governmental agencies (FEANTSA 2007). For example, in some European countries, homeless mothers are not a specific target group for service provision and mothers who experience homelessness use either generic social services or services designed specifically for women, including domestic violence refugees. The latter are not part of the homeless service system in many countries and, for that reason, these mothers are not defined or counted as homeless (see Chap. 6, this volume). Homeless mothers may also use ‘maternity homes’ or mother-child facilities for socially and economically vulnerable women with children rather than homelessness or generic social services (FEANTSA 2007; Zierler et al. 2013).

In Germany, only a small number of homelessness services are specifically designated for homeless mothers with their children (Gerull and Wolf-Ostermann 2012) and, for other social services, the focus is *either* on the homeless women (via the homeless service system) or their children (via the youth welfare service). Due to the parallel responsibilities of homeless care and youth care, no strategy or standards (of accommodation) exist for homeless mothers with children (Gerull and Wolf-Ostermann 2012). In most cases, homeless mothers (or couples) with children are not accommodated in a shelter or a halfway house and are instead housed temporarily in accommodation provided by non-governmental agencies in the form of a temporary contract for an apartment or flat. Social work support is also generally provided to families and mothers by non-statutory welfare or local parishes. Apart from single occupancy accommodation there are also transitory shelters and shelters for people in crisis, but children are not permitted to stay in these accommodation types.

In the Netherlands, municipalities have responsibility for homeless families with children, although the organization of these services varies between municipalities. Most municipalities, however, have either separate shelter facilities or separate units within regular shelters for homeless families (Planije and Tuynman 2015). In Gothenburg, Sweden, there is a project that ‘aims to offer homeless women with dependent children “alternative housing with elements of support” with the ultimate goal of providing

them with their own dwellings' (Sahlin 2006, cited in FEANTSA 2007, p. 32) while, in Finland, there is a strong focus on family support. For example, the Laurinkoti project in the city of Vantaa supports—among others—evicted families, teenage mothers and women coming from shelters for survivors of domestic violence (CATCH 2006, cited in FEANTSA 2007). The planning of services specifically targeting homeless women started during the late 1990s in Finland, coinciding with an increase in homelessness among women, and separate services were developed for women who were seen 'as an extremely marginal group' requiring specific services and social work support (Haahtela 2014, p. 6).

Specific services for homeless mothers with their children are provided in a number of other countries. In Poland, for example, there are designated services for homeless mothers and their children while, in France, women with children have priority access to homelessness services and pregnant women at risk of homelessness are visited by midwives (FEANTSA 2007). In Belgium, mothers with children can access social housing with priority when domestic violence is reported (Bernard 2010) and there are also special relief centres for homeless women with children. Men are not permitted to stay in these centres, however, and have to find shelter elsewhere (De Boyser et al. 2010).

In England, where women with dependent children are prioritized for local authority accommodation, a majority of the 50,750 homeless households with children (88 per cent) during the period April–June 2015 were housed temporarily in self-contained accommodation leased by a local authority (Department for Communities and Local Government 2015b). Comparatively, only a small number of families with children were housed in B&B-style accommodation during that same period (2660 families), although this figure represented an increase of 25 per cent from 2130 a year earlier. In Ireland, there is evidence of a dramatic increased reliance on commercial property, including hotels and B&B accommodation, to temporarily house families, including lone mothers with dependent children. In Dublin, on the week April 18th–24th, 2016, of the 888 families (with 1786 dependents) accessing homeless accommodation, 670 (with 1359 dependents)—accounting for 75 per cent of families—were housed in commercial hotels, with the remaining

families (218 families with 427 dependents) living in hostels or other homeless accommodation (Dublin Region Homeless Executive 2016b).

Based on the examples presented from several European countries, it is clear that service provision for, and the accommodation types accessed by, families experiencing homelessness, including lone mothers with dependent children, is very far from uniform across Europe. Equally, the nature and extent of support provided to homeless women with a child or children varies significantly between welfare states (see Chap. 4, this volume). Homeless mothers' negative experiences of services—including shelters, other forms of temporary or short-term accommodation and commercially acquired accommodation, including hotels and B&Bs, is relatively well documented in at least some European countries. Far less is known about how mothers negotiate the demands of everyday life during the (sometimes lengthy) periods that they may spend living or moving between services and how those experiences may or may not alter over time. As with other dimensions of women's homelessness, longitudinal research is required to better understand homeless mother's (and their children's) service experiences, their interactions with (different) service providers and the processes that facilitate a resolution to their homelessness.

Conclusion

In this chapter homeless mothers were defined as *all* homeless women who are mothers, although a significant number of homeless mothers who present to services will not have their children in their care. Throughout Europe, homeless women whose children are living elsewhere—typically in relative or state care—are categorized as 'single', which means that their status as mothers is typically not recognized or responded to by homelessness services. Research and the enumeration and categorization techniques used in countries throughout Europe have failed to adequately acknowledge homeless mothers who are separated from their children. Indeed, as this and other chapters in this volume demonstrate, homeless mothers in general are neglected or even 'forgotten' within European homelessness research, certainly to the extent that very little is known about their 'journeys' through homelessness and about what

may distinguish those families and mothers who achieve stable housing relatively quickly from those who spend far greater periods of time living in temporary and insecure accommodation.

Despite the lack of dedicated research on the experiences of homeless mothers across Europe, it was possible to identify a number of significant dimensions of experience, particularly in relation to their paths to homelessness and their experiences of services. Although many homeless mothers may live temporarily for a period with family or friends, large numbers will access shelter or other homelessness accommodation simply because these informal living arrangements are generally not sustainable in the medium or longer term. Numerous studies describe homeless mothers as having few or limited financial and social resources (that is, they are poor and often have debts, are poorly educated, have very limited employment opportunities and, sometimes, a weak social network) and as sometimes experiencing physical and mental health problems. The mothers' paths to homelessness appear to be similar to 'single' homeless women in that there are intersecting individual and structural factors that lead to mothers losing their homes. However, there is evidence that structural factors, particularly related to circumstances within housing markets, are creating challenges that result in heightened vulnerability to homelessness and housing instability for families, a large proportion of whom are headed by a lone female parent.

During episodes of homelessness, many mothers experience separations from their children, who are placed either temporarily or for longer periods in state or relative care. This separation from their children is linked to experiences of loss as well as diminished confidence and self-esteem, and the circumstances of these women are not generally recognized by homelessness or broader welfare systems. On the other hand, homeless women with children in their care face numerous challenges associated with their parenting roles and the barriers that exist to adequately providing for their children's everyday needs. Mothers living in temporary accommodation, whether in hostels, hotels, B&Bs or other emergency or short- to medium-term services, do not have adequate space and privacy and their daily lives are dictated by rules and regulations that may serve to further reinforce women's and their children's sense of marginality and exclusion.

Across Europe, there is great variation in the provision and organization of services for mothers who experience homelessness and, in some countries, limited or no designated services for homeless mothers and their children. This means that homeless mothers may be in contact with numerous services but with little or no coordination between those services, pointing to a need for better coordination and collaboration among homelessness service providers, among mainstream health and welfare agencies, and between the two groups.

Since homelessness itself and the experiences of homeless mothers specifically are not defined consistently throughout Europe, the research evidence presented in this chapter must be interpreted with caution. There are significant gaps in knowledge and a clear need for dedicated research attention to homeless mothers and their children. Research that aims to compare the experiences of homeless mothers across countries is particularly important since it could reveal the role of structures and policies in determining mother's responses to homelessness and their routes to housing, particularly in countries with limited or restricted housing resources. The conditions within the kinds of emergency service settings where mothers and their children reside, sometimes for prolonged periods, also merit further dedicated research attention. Finally, persons working on the development of services targeting homeless mothers need to be informed by robust knowledge and understanding of what works in supporting homeless women and their children. While many mothers will have low or relatively low support needs, there are clearly others who will require ongoing assistance and support if they are to successfully access housing and maintain being housed.

References

- Altena, A., Jonker, I., & Wolf, J. (2009). *Profielen van meiden en moeders in de residentiële opvang* [Research on girls and mothers in residential shelters]. Nijmegen, the Netherlands: Impuls—Research Center for Social Care, Department of Primary and Community Care, Radboud University Nijmegen Medical Center.

- Anderson, I., & Christian, J. (2003). Causes of homelessness in the UK: A dynamic analysis. *Journal of Community & Applied Social Psychology, 13*(2), 105–118.
- Anderson, K. M., Renner, L. M., & Danis, F. S. (2012). Recovery: Resilience and growth in the aftermath of domestic violence. *Violence Against Women, 18*(11), 1279–1299.
- Atkinson, A. B., & Marlier, E. (2010). *Income and living conditions in Europe*. Luxembourg: Eurostat.
- Averitt, S. S. (2003). “Homelessness is not a choice!” The plight of homeless women with preschool children living in temporary shelters. *Journal of Family Nursing, 9*(1), 79–100.
- Baptista, I. (2010). Women and homelessness. In E. O’Sullivan, V. Busch-Geertsema, D. Quilgars, & N. Pleace (Eds.), *Homelessness research in Europe* (pp. 163–185). Brussels: FEANTSA.
- Barrow, S. M., & Laborde, N. D. (2008). Invisible mothers: Parenting by homeless separated from their children. *Gender Issues, 25*(3), 157–172.
- Bassuk, E. L., Buckner, J. C., Perloff, J. N., & Bassuk, S. S. (1998). Prevalence of mental health and substance use disorders among homeless and low-income housed mothers. *The American Journal of Psychiatry, 155*(11), 1561–1564.
- Bassuk, E. L., Buckner, J. C., Weinreb, L. F., Browne, A., Bassuk, S. S., Dawson, R., et al. (1997). Homelessness in female-headed families: Childhood and adult risk and protective factors. *American Journal of Public Health, 87*(2), 241–248.
- Bassuk, E. L., Weinreb, L. F., Buckner, J. C., Browne, A., Salomon, A., & Bassuk, S. S. (1996). The characteristics and needs of sheltered homeless and low-income housed mothers. *JAMA, 276*(8), 640–646.
- Bernard, N. (2010). The gender of housing deprivation in Belgium. *Homeless in Europe*, Spring, 24–25.
- Bowpitt, G., Dwyer, P., Sundin, E., & Weinstein, M. (2011). Comparing men’s and women’s experiences of multiple exclusion homelessness. *Social Policy and Society, 10*(4), 537–546.
- Brady, D., & Burroway, R. (2012). Targeting, universalism and single mother poverty: A multi-level analysis across 18 affluent democracies. *Demography, 49*(2), 719–746.
- Brilleslijper-Kater, S., Beijersbergen, M., Asmoredjo, J., Jansen, C., & Wolf, J. (2010). *Meer dan bed, bad, broodje pindaakaas. Profiel, gezondheid, welzijn en begeleiding van kinderen in de vrouwenopvang en de maatschappelijke opvang*

- [More than a bed, bath and a peanut butter sandwich: Characteristics, health, well-being and care for children staying with their parent(s) in shelters for homeless people or female victims of domestic violence]. Amsterdam: Uitgeverij SWP.
- Cameron, A., Abrahams, H., Morgan, K., Williamson, E., & Henry, L. (2016). From pillar to post: Homeless women's experiences of social care. *Health and Social Care in the Community*, 24(3), 345–352.
- Coog-Craig, P., & Koehly, L. (2011). Stability in the social support network of homeless families in shelter: Findings from a study of families in a faith-based shelter program. *Journal of Family Social Work*, 14(3), 191–207.
- Culhane, D. P., Metraux, S., Park, J. M., Schretzman, M., & Valette, J. (2007). Testing a typology of family homelessness based on patterns of public shelter utilization in four U.S. jurisdictions: Implications for policy and program planning. *Housing Policy Debate*, 18(1), 1–28.
- David, D. H., Gelberg, L., & Suchman, N. E. (2012). Implications of homelessness for parenting young children: A preliminary review from a developmental attachment perspective. *Infant Mental Health Journal*, 33(1), 1–9.
- De Boyser, K., Linchet, S., Van Dijk, L., Casman, M., Dierckx, D., & Vranken, J. (2010). *Onderzoek naar de OCMW-hulpverlening aan dak- en thuislozen* [Study on PCSW assistance to homeless people]. Antwerp, Belgium: University of Antwerp.
- Department for Communities and Local Government. (2015a). *Statutory homelessness in England: January to March 2015*. Retrieved from <https://www.gov.uk/government/statistics/statutory-homelessness-in-england-january-to-march-2015>
- Department for Communities and Local Government. (2015b). *Statutory homelessness: April to June Quarter 2015 England*. Retrieved from https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/463017/201506_Statutory_Homelessness.pdf
- Department of the Environment, Community and Local Government. (2016). *Homelessness Report February 2016*. Retrieved from http://www.environ.ie/sites/default/files/publications/files/homeless_report_-_february_2016_0.pdf
- Dublin Region Homeless Executive. (2016a). *Families who are homeless, Dublin region, February (week of 22nd–28th) 2016*. Dublin: Dublin Region Homeless Executive. Retrieved from <http://www.homelessdublin.ie/homeless-families>
- Dublin Region Homeless Executive. (2016b). *Families who are homeless, Dublin Region, April (week of 18th–24th) 2016*. Dublin: Dublin Region Homeless Executive. Retrieved from <http://www.homelessdublin.ie/homeless-families>

- Dyb, E., & Johannassen, K. (2013). *Homelessness in Norway 2012—A survey*. NIBR-report 2013:5. Norwegian Institute for Urban and Regional Research. Retrieved from http://biblioteket.husbanken.no/arkiv/dok/Sum/BostedsloseNorge2012_eng.pdf
- Edgar, B., & Doherty, J. (2001). *Women and homelessness in Europe: Pathways, services and experiences*. Bristol: Policy Press.
- Edgar, B., Doherty, J., & Meert, H. (Eds.). (2004). *Immigration and homelessness in Europe*. Bristol: Policy Press.
- Enders-Dragässer, U. (2010). Women and homelessness in Germany. *Homeless in Europe*, Spring, 12–14.
- FEANTSA. (2007). *Child homelessness in Europe—An overview of emerging trends*. Retrieved from <http://www.feantsa.org>
- Fitzpatrick, S., & Christian, J. (2006). Comparing homelessness research in the US and Britain. *European Journal of Housing Policy*, 6(3), 313–333.
- Fitzpatrick, S., & Pleace, N. (2012). The statutory homelessness system in England: A fair and effective rights-based model? *Housing Studies*, 27(2), 232–251.
- Fitzpatrick, S., Quilgars, D., & Pleace, N. (Eds.). (2009). *Homelessness in the UK: Problems and solutions*. Coventry: Chartered Institute of Housing.
- Gerull, S., & Wolf-Ostermann, K. (Eds.). (2012). *Unsichtbar und ungesehen. Wohnungslose Frauen mit minderjährigen Kindern in Berlin* [Invisible and unseen: Homeless women with minor children in Berlin]. Berlin, Milow, Strasburg: Schibri Verlag.
- Gornick, J. C., & Jäntti, M. (2009). Child poverty in upper-income countries: Lessons from the Luxembourg income study. In S. Kamerman & A. Ben-Ariel (Eds.), *From child welfare to child wellbeing: An international perspective on knowledge in the service of policy making* (pp. 339–368). New York: Springer.
- Gould, T. E., & Williams, A. R. (2010). Family homelessness: An investigation of structural effects. *Journal of Human Behavior in the Social Environment*, 20(2), 170–192.
- Hahtela, R. (2014). Homeless women's interpretations of women-specific social work among the homeless people. *Nordic Social Work Research*, 4(1), 5–21.
- Halpenny, A. M., Keogh, A. F., & Gilligan, R. (2002). *A place for children? Children in families living in emergency accommodation: The perspectives of children, parents and professionals*. Dublin: Homeless Agency.
- Halpenny, A. M., Greene, S., Hogan, D., Smith, M., & McGee, H. (2001). *Children of homeless mothers: The daily life experiences and well-being of children*

- in homeless families*. Dublin: The Royal College of Surgeons in Ireland and The Children's Research Centre, Trinity College Dublin.
- Hinton, T. (1998). *Forgotten mothers. meeting the needs of homeless women who have lost their children*. London: Health Action for Homeless People.
- Hutchinson, S., Page, A., & Sample, E. (2014). *Rebuilding shattered lives*. London: St Mungos.
- Jones, A. (1999). *Out of sight, out of mind? The experiences of homeless women*. London: CRISIS.
- King, K. E., Ross, L. E., Bruno, T. L., & Erickson, P. G. (2009). Identity work among street-involved young mothers. *Journal of Youth Studies*, 12(2), 139–149.
- Lavesser, P. D., Smith, E. M., & Bradford, S. (1997). Characteristics of homeless women with dependent children. *Journal of Prevention & Intervention in the Community*, 15(2), 37–52.
- Letiecq, B. L., Anderson, E. A., & Koblinsky, S. A. (1998). Social support of homeless and housed mothers: A comparison of temporary and permanent housing arrangements. *Family Relations*, 47(4), 415–421.
- Maldonado, L. C., & Nieuwenhuis, R. (2015). Family policies and single parent poverty in 18 OECD countries, 1978–2008. *Community, Work & Family*, 18(4), 395–415.
- Martins, A. (2010). Gender and homelessness: Homeless women in Lisbon. *Homeless in Europe*, Spring, 6–8.
- May, J., Cloke, P., & Johnsen, S. (2007). Alternative cartographies of homelessness: Rendering visible British women's experiences of 'visible' homelessness. *Gender, Place and Culture*, 14(2), 121–140.
- Mayock, P., Parker, S., & Sheridan, S. (2015). *Women, homelessness and service provision*. Dublin: Simon Communities of Ireland.
- Mayock, P., & Sheridan, S. (2012a). *Women's 'Journeys' to homelessness: Key findings from a biographical study of homeless women in Ireland*. Women and Homelessness in Ireland, Research Paper 1. Dublin: School of Social Work and Social Policy and Children's Research Centre, Trinity College Dublin.
- Mayock, P., & Sheridan, S. (2012b). *Migrant women and homelessness: Key findings from a biographical study of homeless women in Ireland*. Women and Homelessness in Ireland, Research Paper 2. Dublin: School of Social Work and Social Policy and Children's Research Centre, Trinity College Dublin.
- Mayock, P., & Sheridan, S. (2013). 'At home' in prison? Women and the homelessness-incarceration nexus. *Irish Probation Journal*, 10, 118–140.
- Memmott, R. J., & Young, L. A. (1993). An encounter with homeless mothers and children: Gaining an awareness. *Issues in Mental Health Nursing*, 14(4), 357–365.

- Mikolajczyk, M. (2016). *Homelessness and homeless motherhood in Poland. Reasons, essence, ways of helping on the basis of research*. Retrieved September 10, 2015, from (powerpoint presentation). https://www.bucressources.org/sites/default/files/assets/telechargement/homelessness_and_homeless_motherhood_in_poland.pdf
- Moss, K., & Singh, P. (2015). *Women rough sleepers in Europe: Homelessness and victims of domestic abuse*. Briston: Policy Press.
- National Alliance to End Homelessness. (2006). *Promising strategies to end family homelessness*. Washington, DC: National Alliance to End Homelessness and Freddie Mac.
- Nordfeldt, M. (2012). A dynamic perspective on homelessness: Homeless families in Stockholm. *Housing Studies*, 6(1), 105–123.
- Paquette, K., & Bassuk, E. (2009). Parenting and homelessness: Overview and introduction to the special section. *American Journal of Orthopsychiatry*, 79(3), 292–298.
- Pennington, J., & Banks, C. (2015). *'This is no place for a child': The experiences of homeless families in emergency accommodation*. London: Shelter.
- Planije, M., Tuynman, M., & Hulsbosch, L. (2014). *Monitor Stedelijk Kompas 2013. Plan van Aanpak Maatschappelijke Opvang in 39 Centrumgemeenten* [Municipal compass monitor 2013. Strategy plan for social relief in 39 municipalities]. Utrecht, the Netherlands: Trimbos Institute.
- Planije, M., & Tuynman, M. (2015). *Gezinnen in de maatschappelijk opvang. Opvang en ondersteuning aan dakloze gezinnen* [Families in shelters: Housing and supporting homeless families]. Utrecht, the Netherlands: Trimbos Institute.
- Pleace, N. (2010). Immigration and homelessness. In E. O'Sullivan, V. Busch-Geertsema, D. Quilgars, & N. Pleace (Eds.), *Homelessness research in Europe* (pp. 143–162). Brussels: FEANTSA.
- Pleace, N., Fitzpatrick, S., Johnsen, S., Quilgars, D., & Sanderson, D. (2008). *Statutory homelessness in England: The experience of families and 16–17 year olds*. London: Department for Communities and Local Government.
- Reeve, K., Casey, R., & Goudie, R. (2006). *Homeless women: Still being failed yet striving to survive*. London: CRISIS.
- Robson, K., & Berthoud, R. (2003). Teenage motherhood in Europe: A multi-country analysis of socio-economic outcomes. *European Sociological Review*, 19(5), 451–466.
- Rog, D. J., & Holupka, C. S. (1998). Reconnecting homeless individuals and families to the community. In L. B. Fosburg & D. L. Dennis (Eds.), *Practical*

- lessons: The 1998 Symposium on homelessness research*. Delmar, NY: National Resource Center on Homelessness and Mental Illness.
- Ruttan, L., Laboucane-Benson, P., & Munro, B. (2012). Does a baby help young women transition out of homelessness? Motivation, coping, and parenting. *Journal of Family Social Work, 15*(1), 34–49.
- Scappaticci, A. L., & Blay, S. L. (2009). Homeless teen mothers: Social and psychological aspects. *Journal of Public Health, 17*(1), 19–26.
- Schwartz, J. P., Chapman, S., Cote González, L., & Lindley, L. D. (2010). Addressing the problem of women and homelessness. *Homeless in Europe*, Spring, 29–31.
- Smith, M., McGee, H. M., Shannon, W., & Holohan T. (2001). *One hundred homeless women. Health status and health service use of homeless women and their children in Dublin*. Dublin: Royal College of Surgeons in Ireland & Children's Research Centre, Trinity College.
- Stockholms stad. (2011). *Rapport om barnfamiljer i Stockholms stad som saknar stadigvarande bostad* [Report on families in the city of Stockholm without permanent housing]. Stockholm: Stockholms stad, Socialtjänstoch arbetsmarknadsförvaltningen, tjänsteutlåtande.
- Szobozslai, K. (2010). Homeless women in Hungary. *Homeless in Europe*, Spring, 17–20.
- Swick, K. J., Williams, R., & Fields, E. (2014). Parenting while being homeless. *Early Childhood Education Journal, 42*(6), 397–403.
- Thiery, N. (2008). L'hébergement de femmes accompagnées d'enfants en CHRS: quelle incidence sur l'identité parentale ? [Accommodating women and children in CHRS: What impact on parental identity?]. *Sociétés et Jeunesses en Difficulté 5*, Spring. Retrieved February 27, 2016, from <http://sejed.revues.org/index2992.html>
- Tischler, V., Karim, K., Gregory, P., & Vostanis, P. (2004). A family support service for homeless children and parents: Users' perspectives and characteristics. *Health and Social Care in the Community, 12*(4), 327–335.
- Tischler, V., Rademeyer, A., & Vostanis, P. (2007). Mothers experiencing homelessness: Mental health, support and social care needs. *Health and Social Care in the Community, 15*(3), 246–253.
- Tuynman, M., Planije, M., Hulsbosch, L., & Place, C. (2013). *Monitor Stedelijk Kompas 2012. Plan van Aanpak Maatschappelijke Opvang in 39 Centrumgemeenten* [Municipal compass monitor 2012. Strategy plan for social relief in 39 municipalities]. Utrecht, The Netherlands: Trimbos Institute.

- Vandentorren, S., Le Méner, E., Oppenchaim, N., Arnaud, A., Jangal, C., Caum, C., et al. (2016). Characteristics and health of homeless families: The ENFAMS survey in the Paris region, France 2013. *The European Journal of Public Health*, 26(1), 71–76.
- Walsh, K., & Harvey, B. (2015). *Family experiences of pathways into homelessness: The families' perspective*. Dublin: Housing Agency.
- Wolf, J., Jonker, I. S. N., Meertens, V., & te Pas, S. (2006). *Maat en baat van de vrouwenopvang. Onderzoek naar vraag en aanbod* [Quality of and benefits from women's shelters in the Netherlands. Research into women's needs for care and provision of services]. Amsterdam: Uitgeverij SWP.
- Zierler, A., Martinsson, S., & Weiß, T. (2013). Accommodating homeless families in the private rented housing sector: Experiences from a supported housing project in Vienna. *European Journal of Homelessness*, 7(1), 117–134.
- Zugazaga, C. (2008). Understanding social support of the homeless: A comparison of single men, single women, and women with children. *Families in Society: The Journal of Contemporary Social Services*, 89(3), 447–455.

9

Long-term and Recurrent Homelessness Among Women

Nicholas Pleace, Joanne Bretherton,
and Paula Mayock

Introduction

The current evidence base indicates that long-term and recurrent homelessness is experienced by a minority of homeless people who are characterized by high support needs. Until recently, long-term and recurrent homelessness has been seen as a highly gendered social problem, disproportionately experienced by men, with relatively little attention paid to women experiencing repeat or prolonged homelessness. This chapter argues that there is growing evidence that women may experience long-term and recurrent homelessness, but in a different way from men. It examines the evidence base on long-term and recurrent homelessness and argues that there may be a significant under-representation of women's

N. Pleace (✉) • J. Bretherton
University of York, York, UK
e-mail: Nicholas.pleace@york.ac.uk

P. Mayock
Trinity College Dublin, Dublin, Ireland

© The Author(s) 2016

P. Mayock, J. Bretherton (eds.), *Women's Homelessness in Europe*,
DOI 10.1057/978-1-137-54516-9_9

209

experience of long-term homelessness in contemporary homelessness research. As a consequence, knowledge and understanding of women's particular experience of long-term homelessness is weak, which in turn compromises the development of policy responses and services that work to prevent women from entering into a cycle of unresolved homelessness.

The Evidence of Long-term and Recurrent Homelessness

Homelessness is now viewed as existing in two broadly defined forms. The first form of homelessness comprises a relatively small number of individuals who experience long-term or recurrent homelessness and have high support needs. The second includes what in some contexts can be significantly larger numbers of individuals who experience short-term homelessness for a mix of economic and social reasons that are generally *unrelated* to support needs (Busch-Geertsema et al. 2010; Lee et al. 2010).

Although relatively few in number, long-term and recurrently homeless individuals are viewed as high-risk, high-cost populations. The costs, at an individual level, are thought to be high because long-term and recurrent homelessness is associated with an often severe, negative consequence for health, well-being and social integration. The longer and/or more frequent the experience of homelessness, the greater the likelihood of mental ill-health, problematic drug and/or alcohol use, poor physical health and, in some cases, low-level criminality and nuisance or 'antisocial' behaviour. Some evidence also suggests that levels of social integration, ranging from access to informal, emotional support through to economic integration become steadily worse as homelessness persists (Busch-Geertsema et al. 2010; Jones and Pleace 2010). The costs, in an economic sense, of long-term homelessness are high because long-term and recurrently homeless people tend to make repeated or sustained use of emergency medical, mental health and accommodation systems, alongside frequent contact with criminal justice systems (Culhane 2008; Gladwell 2006; Mayock and Sheridan 2013; Mayock et al. 2015b; Pleace et al. 2013; Poulin et al. 2011). Pressures exist for welfare, health and criminal justice systems because

a person experiencing long-term homelessness is thought to be more likely to have a high ‘lifetime’ cost, that is, have disproportionately high levels of contact with these systems over their lifetime, compared to an ordinary housed citizen (Pleace et al. 2013).

In the USA, ‘chronic’ (long-term), ‘episodic’ (recurrent) and ‘transitional’ (temporary) homelessness were described in the seminal work of Culhane and Kuhn (Culhane and Kuhn 1998; Kuhn and Culhane 1998), based on an analysis of administrative data from shelters in New York City and Philadelphia. This research demonstrated that two small groups—‘chronic’ and ‘episodically’ homeless people—with high support needs accounted for the bulk of emergency shelter activity, despite each representing only a fraction of a much larger homeless population that consisted primarily of ‘transitionally’ homeless people. This American research represented a major leap in understanding both homelessness causation and pathways through homelessness. Longstanding cultural, political, mass media and academic ideas about what homelessness was and who homeless people were, were fractured by Culhane and Kuhn’s findings and, to a large extent, their research demonstrated that the people using the emergency shelter systems in the USA had been fundamentally misunderstood. Several earlier cross-sectional studies had found very high rates of severe mental illness and poor physical health in the individuals they sampled and concluded that most homeless people shared these characteristics (Bassuk 1984; Rossi et al. 1987). However, these earlier studies had not looked at who was using emergency shelters *over time* and presented a truncated, overly bleak and pathologizing picture of the homeless (Snow et al. 1994). By only looking at emergency accommodation settings for a very short period, they mainly found ‘chronic’ and ‘episodically’ homeless people who were either in that emergency accommodation for long stays or who were repeatedly resident. Using longitudinal data, Culhane and Kuhn (1998) were able to demonstrate that previous research had inadvertently drawn false samples by focusing heavily on longer-term shelter users, thereby failing to account for the high number of short-term, low-need users of emergency accommodation. Those individuals with high support needs previously considered to represent the ‘homeless population’ actually constituted only around 20 per cent of the total

population using emergency accommodation, with the remaining 80 per cent being transitionally (short-term) homeless individuals with *low* support needs (Culhane et al. 2002; US Department of Housing and Urban Development (HUD) 2010, 2012).

Similar findings have since emerged from longitudinal analyses elsewhere. In Denmark, for example, Benjaminsen and Andrade (2015) found a high-need minority of longer-term and recurrently homeless people who were making disproportionately high use of emergency shelters. Likewise, in Canada, researchers have reported the presence of what they term 'temporary', 'episodic' and 'long-stay' homeless populations in emergency accommodation and, as in the USA, the 'temporary' group had low support needs, experienced short-term homelessness and accounted for the bulk of the homeless population, while the 'episodic' and 'long-stay' populations made very high use of services (Aubry et al. 2013). In Finland, administrative data has confirmed the existence of a 'long-term', high-need group of homeless people, although the Finns did not draw a distinction between long-term and recurrently homeless groups (Tainio and Fredriksson 2009). Finnish evidence and, particularly, recent research from Denmark, indicate that in these countries, with their very extensive welfare systems, homelessness for economic and structural reasons is unusual. Very small populations with complex needs appear to have fallen through various welfare and health system safety nets and tend to experience sustained and recurrent homelessness (Benjaminsen and Andrade 2015).

Finally, in the UK, there is evidence of the presence of small, high-need, long-term homeless populations (Jones and Pleace 2010; Lomax and Netto 2007), something that is also true of other European countries, including France (Brousse 2009), Spain (Muñoz et al. 2005) and Ireland (Department of the Environment, Heritage & Local Government 2008). Tacit policy recognition of the presence of long-term and recurrently homeless populations in Denmark, France, the Netherlands, Portugal, Sweden and the UK is illustrated by the adoption and piloting of Housing First services, which were initially designed specifically to reduce long-term and recurrent homelessness in the USA (Busch-Geertsema 2013; Knutagård and Kristiansen 2013). There is now widespread recognition that a population of homeless people with severe mental illness and other, often high, support needs exists in much of Europe (Busch-Geertsema et al. 2010; European Consensus Conference on Homelessness 2010; FEANTSA 2012).

Some objections have been raised to the idea that, in some countries, something around or less than one-fifth of the total population experiencing homelessness actually becomes homeless on a long-term or recurrent basis. These criticisms have included arguments that the reality of homelessness is highly complex and what is described as two or three ‘groups’ of homeless people actually includes *many* different groups, albeit that most homelessness is a relatively short-term experience for economically marginalized people with low support needs (McAllister et al. 2010). Homelessness is still often interpreted in mainstream culture as primarily linked to individual characteristics and behaviour (Fopp 2009; Phillips 2000; see Chaps. 2 and 3, this volume, for an analysis of historical and contemporary constructions of women’s homelessness).

Since the late 1990s, there has been growing evidence that homelessness can be experienced by poor people with insecure incomes, who also have insecure housing, lose their job, experience a relationship breakdown (and lose income) or simply lose their home and cannot afford an alternative. Homelessness can be an economic problem, resulting from what housing and labour markets do to poor people, in combination with trigger factors that, quite literally, include bad luck (O’Flaherty 2010). Homelessness can be associated with individual behaviour, with high and unmet support needs, but it is wrong to suggest these are the only causes (Busch-Geertsema et al. 2010; O’Sullivan 2008). Interestingly, when welfare safety nets aimed at preventing the population of a country from experiencing poverty are at their most extensive—as in Denmark—homelessness that occurs through a combination of labour and housing market position and bad luck appears to be uncommon. This is in marked contrast to countries like the USA and European societies with less extensive welfare systems (Benjaminsen and Andrade 2015).

The idea of individual action or behaviour as a ‘cause’ of homelessness has become increasingly difficult to sustain because of mounting evidence of high rates of severe mental illness among long-term and recurrently homeless people (Fopp 2009). There are also related questions about defining individual characteristics associated with long-term and recurrent homelessness against systemic factors. For example, it is debatable how far an untreated severe mental illness ought to be seen as an individual characteristic as opposed to evidence of mental health service failure. Additionally, causation of severe mental illness is problematic

given that most people with severe mental illness do not become long-term or recurrently homeless (Cohen and Thompson 1992; Hansen Löffstrand 2012). Drug use has also been demonstrated to exist prior to homelessness and at a constant rate, both during and after homelessness; again, however, most drug users do not become long-term or recurrently homeless (Kemp et al. 2006; Pleace 2008).

There are also data from Finland, Ireland and the USA indicating that long-term and recurrently homeless populations include large identifiable cohorts of people who became homeless when relatively young, and remain homeless for much of their adult lives. Ethnographic research has explained the high numbers of middle-aged men in long-term and recurrently homeless populations as linked to bereavement, relationship breakdown (the loss of female partners and mothers) and to failures in resettlement processes (Vincent et al. 1995). However, evidence suggesting that there are groups of ageing men, who first became homeless relatively early in life, raises some questions about this interpretation. Alternatively, economic recessions may have resulted in more people becoming homeless and, in turn, increased the overall numbers who eventually became long-term and recurrently homeless. This would explain why groups of similarly aged people predominate, as although factors such as individual characteristics and support needs may not be insignificant, if they were consistently associated with homelessness causation, the flow into long-term and recurrently homeless populations would be constant, and these populations would not have the distinctive age profiles that recent research has uncovered (Central Statistics Office 2012; Culhane et al. 2013; Kaakinen 2012).

Long-term and Recurrent Homelessness as a 'Male' Social Problem

The current evidence base strongly suggests that the experience of long-term and recurrent homelessness is *highly* gendered. Globally, a clear majority of long-term and recurrently homeless people appear to be male (Central Statistics Office 2012; Henry et al. 2013; Morikawa et al. 2011; NatCen 2009). The apparently male-dominated nature of long-term

and recurrent homelessness was also reported in earlier research from a number of jurisdictions (Anderson et al. 1993; Caton 1990; Caton et al. 2005; Darnton-Hill et al. 1990; Drake et al. 1982; Kearns 1984; Macgregor-Wood 1976; Vincent et al. 1995).

However, there is growing evidence that women experience long-term and recurrent homelessness as well as some evidence of increases in relative and absolute levels (Baptista 2010; Jones 1999; Jones and Pleace 2010; Mayock and Sheridan 2012; Mayock et al. 2015b; Reeve et al. 2007). In the USA, estimates are that between 20 and 25 per cent of the long-term or recurrently homeless population are women (US Department of Housing and Urban Development (HUD) 2012). In 2011, the Irish Census reported 2375 homeless people in Dublin, of whom 33 per cent were women (Central Statistics Office 2012). The 2009 CHAIN database covering London homelessness services showed that 15 per cent of people living rough were 'long-term' service users (that is, using services for four years or more), of whom just under 12 per cent were women (NatCen 2009). Finally, in Finland in 2011, 21 per cent of the total single homeless population, including long-term homeless people, were women (Kaakinen 2012).

For decades, research has tended to highlight the 'maleness' of long-term and recurrent homelessness (Dordick 1997, 2002; Higate 2000; Lee et al. 2010; O'Sullivan 2008; Reeve et al. 2006; Snow and Anderson 1987) and, as a consequence, women's experience of long-term and recurrent homelessness, while a severe social problem for individual women experiencing it, is often not seen as a significant policy issue, despite critiques of this stance from academics and policy researchers (Baptista 2010; Doherty 2001; Jones 1999; Mayock et al. 2015b; Reeve et al. 2006, 2007).

Women's Presence in Long-term and Recurrently Homeless Populations

The apparently lower rates at which women experience long-term and recurrent homelessness have been explained in four main ways (Baptista 2010):

- women experiencing homelessness with one or more dependent children, which gives them enhanced access to welfare and health systems
- a failure to record homelessness among women experiencing gender-based/domestic violence
- women avoiding situations of sleeping rough and emergency shelters through the use of informal social supports
- women who are living on the street, concealing themselves and their situations and avoiding male-dominated service settings.

Women with dependent children may, potentially, be relatively 'protected' from the risk of long-term and recurrent homelessness. This is because when women become homeless with their child or children, or when pregnant, welfare systems tend to offer at least some protection for children at risk (Baptista 2010). In the USA, the concept of homeless families with high support needs has gained policy acceptance (US Department of Housing and Urban Development (HUD) 2013) and the UK has a similar policy model of 'troubled families' (Department for Communities and Local Government 2013), which allows for the development of specialist interventions designed to prevent socio-economic marginalization, including homelessness among higher-need women parents.

In the UK, there is some evidence that young women and young men experience homelessness at equal rates until they reach their twenties. At this point, however, socio-economically marginalized young women experiencing homelessness quite often become pregnant, which gives them access to relatively extensive welfare supports, while young men are more likely to remain homeless into their early twenties. It is important to note that there is no evidence that young women consciously become pregnant in order to access welfare or social housing systems; rather, these pregnancies reflect a broader pattern of earlier pregnancy resulting from systemic social and economic disadvantage, which is associated with sustained experiences of lone parenthood (Quilgars et al. 2008). Equally, some research has suggested that lone women experiencing long-term and recurrent homelessness have lost contact with their children or had them placed in state or relative care, which could be read as those women effectively losing access to the better protection that health and welfare systems would have given them had those children still been present (Jones 1999; Mayoock et al. 2015b).

As noted, there is some evidence that stronger welfare systems reduce levels of transitional or temporary homelessness (Benjaminsen and Andrade 2015; Meert 2005; see Chap. 4, this volume). Equally, when unemployed homeless people cannot access welfare systems, as in the case of homeless migrants with no entitlement to welfare or housing support, homelessness, associated directly with having no income, often results (Pleace 2011). However, it seems simplistic to assume that lone men are becoming long-term and recurrently homeless at higher rates than women just because women are more likely to have dependent children and, therefore, have better access to welfare systems. Across a range of welfare systems, levels of long-term and recurrent homelessness appear to be generally *very* low. Long-term and recurrently homeless men are certainly far less numerous than lone adult males who are reliant on welfare systems because of unemployment, poor health and disability (Baptista et al. 2012). This may mean that there is a need to better understand the nuances of why some high-need individuals cannot always access welfare systems, and also suggests a need to consider how informal social support may interact with, or substitute for, welfare systems in preventing homelessness (Busch-Geertsema et al. 2010; Lee et al. 2010).

Moreover, to whatever extent welfare and health systems might be reducing the overall extent of long-term and recurrent homelessness among women by offering supports that can potentially prevent homelessness, it is important to note that this support is often not provided in a neutral way. Women must often conform to culturally and historically determined ideas about their role as a woman and as a (lone) parent, meaning that, even in more 'advanced' welfare regimes, protection from long-term and recurrent homelessness may come at some personal cost (Löfstrand and Thörn 2004; see Chap. 3, this volume).

The role of domestic violence services may reduce the number of women *visibly* experiencing long-term and recurrent homelessness in two respects. First, the presence of domestic violence services, as with wider welfare systems, may mean that women are better able to avoid long-term or recurrent homelessness. This is because women who would have otherwise become long-term or recurrently homeless receive support from domestic violence services that effectively prevents that homelessness from happening (Quilgars and Pleace 2010). Second, women are not necessarily

recorded as 'homeless' by domestic violence services even if they are, in effect, experiencing long-term or recurrent homelessness. A 2012 review of the enumeration of homeless people in the 2011 Census, covering 15 EU Member States, found that while the Czech Republic, Hungary, Ireland and Spain define women in refuges as 'homeless', 11 Member States, including France, Germany, the Netherlands, and Sweden do not (Baptista et al. 2012). If women are experiencing what actually can be defined as long-term or recurrent homelessness, that is, they are long-term or recurrent users of refuges or shelters for women at risk of violence, this is often recorded as women experiencing gender-based or domestic violence and *not* as long-term or recurrent homelessness. Domestic violence services, therefore, may have the potential to both *reduce* and *conceal* the extent to which women experience sustained and recurrent homelessness. These services may make a positive, preventive difference to the rate at which women experience long-term and recurrent homelessness, but they may also reclassify experiences that would otherwise be defined as long-term and recurrent homelessness, at least partially concealing the true extent of women's experience of these forms of homelessness.

The third possible reason for the apparently relatively low representation of women in long-term and recurrently homeless populations is that women may be better able than men to use informal social supports to avoid having to live rough or use emergency accommodation (Baptista 2010; Shinn et al. 1998; Toohey et al. 2004). However, some relationships that keep a woman housed, or at least accommodated, may be exploitative, abusive or destructive (Jones 1999; Mayock and Sheridan 2012; Mayock et al. 2015b; Reeve et al. 2006, 2007).

The extent of women's experience of long-term and recurrent homelessness may, in effect, be concealed by differential experiences of, and responses to, homelessness. Research from several economically developed countries shows that women rely to a far greater extent than men on existing and newly established relationships, including sometimes abusive relationships, to keep themselves accommodated in what are essentially situations of hidden homelessness (see Chaps. 3 and 6, this volume). Importantly, this group often includes vulnerable women with high support needs who are experiencing homelessness on a long-term or recurrent basis (Casey 2002; Jones 1999; Mayock et al. 2015b; Padgett et al. 2006b; Reeve et al. 2007). By contrast,

long-term and recurrently homeless men seem less able to form and sustain these sorts of relationships and can be characterized by a high degree of social isolation (Jones and Pleace 2010).

In Ireland, a biographical study of 60 homeless women found that 34 (57 per cent) of the women interviewed had experienced homelessness for a period exceeding two years. Twenty-one of these women (35 per cent of the total sample) reported homeless histories of more than six years and 13 (22 per cent of the total sample) first experienced homelessness more than 10 years prior to interview (Mayock and Sheridan 2012). Practically all of these women had cycled in and out of homelessness services over a period of several years and most were acting alone and without service support at the point of (temporarily) leaving these services. A detailed analysis of their homeless and housing biographies uncovered a typology of exit destinations from homelessness services, which included: (1) exits to institutional settings; (2) exits alone; (3) exits with a partner; and (4) exits to the home of a friend or family member, all of which were effectively ‘sites of hidden or “invisible” homelessness’ (Mayock et al. 2015b, p. 18). Several gender-specific experiences—including their mothering roles and identities, intimate partners and intimate partner violence, in particular, and their ongoing interactions with insituational settings, including homeless hostels—were identified as key dynamics driving the women’s mobility patterns and the strategies they used in the management of their homelessness. Significantly, these women were not recurrently or enduringly present in the largely male populations living rough or living in emergency accommodation, where much of the research on these forms of homelessness tends to be focused, but they had high support needs and were neither securely nor adequately housed, were in fact homeless, both for prolonged periods and on a repeated basis (Mayock et al. 2015b).

Essentially, if women with high support needs are homeless on a long-term or recurrent basis in contexts other than emergency accommodation and living rough, their experience of long-term and recurrent homelessness may often not be properly recorded or researched. Here, it is not a question of women being diverted away from long-term and recurrent homelessness, as may be the case for some women whose dependent children afford them greater protection from welfare and health systems, or whose risk of homelessness may be reduced or prevented by domestic violence

services. It is instead the case that long-term and recurrently homeless women are not being counted because they are not residing in contexts in which the long-term and recurrently homeless populations are typically researched and enumerated, that is, on the streets or in emergency accommodation (Pleace and Bretherton 2013a). There is some evidence that young women with children, using informal arrangements to avoid the streets and emergency shelters, experience sustained and recurrent hidden homelessness (Shinn et al. 1998).

The fourth and final reason why long-term and recurrently homeless women may be undercounted is because they avoid being visible. There is considerable evidence that women actively seek to conceal their homelessness (Edgar and Doherty 2001; May et al. 2007; Wardhaugh 1999) and that they resist the label 'homeless' and avoid being subjected to negative consequences, such as being forced to leave public spaces (Casey et al. 2008). Research has also found that women are apparently less present in long-term and recurrently homeless populations because they avoid some services, essentially to feel safer, and are not visible when street counts or other estimates of homelessness are conducted (Pleace and Quilgars 1996; Reeve et al. 2006, 2007). Experiences of violence, sexual abuse and rape can be widespread among women living rough (Jasinski et al. 2010; Moss and Singh 2015; Reeve et al. 2006).

In some countries, women can access women-only homeless services, although in the UK and Ireland these tend to be far fewer in number than mixed-gender services (Mayock et al. 2013; Quilgars and Pleace 2010). There is some evidence that lone women's homelessness becomes more 'visible' when women-only services are available, with women appearing in higher numbers than they do in mixed-gender emergency accommodation or among populations living rough (Anderson et al. 1993; Centre for Housing Research 2014¹).

¹ In 2012/13, the Supporting People client record, which details the use of integrated housing and support services in England, reported that 39 per cent of all women and 54 per cent of all men using accommodation-based (communal and congregate) and mobile housing related support services (peripatetic teams delivering support to people in ordinary housing) were homeless. The total populations monitored as using these services for whom data were available were 70,511 women and 70,798 men.

The Consequences of Long-term and Recurrent Homelessness for Women

There is clear evidence of a group of people experiencing long-term and recurrent homelessness across many European countries as well as in broadly comparable countries such as Australia, Canada and the USA. The long-term homeless are a group of people who have high rates of severe mental illness and physical health problems that often go untreated, and for whom there is insufficient continuity of care and support. They also lack the ontological security and safety of a home and face daily uncertainties and insecurities that can threaten well-being and mental health (Baptista et al. 2012; Department of the Environment, Heritage and Local Government 2008; Echenberg and Jensen 2012; US Department of Housing and Urban Development (HUD) 2007, 2012; Johnson and Wylie 2010; Kaakinen 2012; Muñoz et al. 2005; Patterson et al. 2013).

The consequences of long-term and recurrent homelessness can be difficult to isolate into *specific* effects on individual well-being. One reason for this is that these populations often grow up in relative poverty, which heightens the risk to health and well-being in itself, even before long-term and recurrent homelessness is experienced. There are also consequences for health and well-being of specific experiences of trauma and harm that are known to occur prior to the experience of long-term and recurrent homelessness, which might include experiences of gender-based and/or domestic violence, problematic drug and/or alcohol use, and mental ill-health (Bowpitt et al. 2011; Mayock and Sheridan 2012; Moss and Singh 2012, 2015; Reeve et al. 2007). Long-term homelessness does, however, include a number of known risks to health and well-being and it is clear that sustained or repeated exposure to those risks—ranging from exposure to damp and cold through to very poor diet or an increased risk of physical harm from other people—have negative consequences for physical health (Pleace and Quilgars 1996; see also Chap. 7, this volume). There are women who experience long-term and recurrent homelessness for years on end and sometimes for decades (Jones 1999; Mayock and

Sheridan 2012; Mayock et al. 2015b; Reeve et al. 2006) and, as these experiences continue, the consequences for health and well-being are very likely to be negative (Jones and Pleace 2010).

Continuity of medical and psychiatric treatment, access to social work, housing-related supports and access to health, welfare and social services are often more problematic for long-term and recurrently homeless people than for the general population. Practical barriers exist, such as lacking a home address when administrative systems expect there to be a home address and attitudinal barriers may also be present in instances, for example, when health and other services are reluctant or refuse to engage with long-term and recurrently homeless people. In the UK, despite free universal health care, mass cultural assumptions about associations between homelessness and drug use, mental illness and deviant behaviour, can form significant barriers to health services (Pleace and Quilgars 1996). Long-term and recurrently homeless people can also have an expectation that help will be denied because they feel stigmatized, which means that they may not even approach health services on the assumption that help will be refused (Jones and Pleace 2010). There is also evidence across the EU that social (public and charitable) and also private sector landlords are generally reluctant to house this population, again because it is assumed that they will present with high support needs that will often result in housing management problems (Pleace et al. 2011).

However, what may be even more important is the extent to which women's experience of long-term and recurrent homelessness is under-represented. Women may be experiencing long-term and recurrent homelessness on a much larger scale than is currently presumed because they conceal their situations, because their situations are not recorded by administrative systems, and because their homelessness is hidden by informal living arrangements. To whatever extent this may be the case, the impact of long-term and recurrent homelessness on women may be significantly greater than is widely assumed.

What may also be important here is that, while it may be suggested that hidden homelessness, that is, staying temporarily or for longer periods with friends or relatives, is preferable to sleeping rough or living in emergency accommodation, a woman in a situation of long-term or recurrent hidden homelessness still faces many of the same risks to her well-being.

Hidden homelessness can mean constant exposure to precariousness, a lack of certainty about what will happen, and a sense of insecurity; living conditions may not be adequate and there is also the potential that a woman will be abused or exploited in accommodation to which she has had to bargain or negotiate access (Jones 1999; Mayock et al. 2015b; Reeve et al. 2006, 2007; Watson and Austerberry 1986). Privacy, control over personal space and simply being able to exercise control over one's life may be extremely difficult for women. Conditions within services, including domestic violence refuges and homeless hostels, will be far from ideal, particularly if a woman is spending extended periods in such settings, since the accommodation is temporary, space and privacy are restricted and, often, women will have to adhere to rules that intrude on their private lives (Mayock et al. 2015a, b; Moss and Singh 2015; Quilgars and Pleace 2010; see also Chap. 3, this volume).

Solutions to Long-term and Recurrent Homelessness Among Women

One way forward in both reducing and making visible the extent of long-term and recurrent homelessness among women may be to develop more women-only services. This, some evidence suggests, would provide women with a real alternative to emergency accommodation settings where a predominance of male service users makes them feel unsafe (Hutchinson et al. 2014; Mayock et al. 2015a; Moss and Singh 2015). As noted earlier, where such services are present, the numbers of lone women who are homeless using those services tend to considerably exceed the numbers of women found sleeping rough or residing in emergency accommodation. However, for services to be effective in reducing and preventing long-term and recurrent homelessness among women there also needs to be a shift in how those women are sometimes viewed and perceived (see Chap. 3, this volume). Men are both stigmatized and often blamed for their situations when experiencing long-term and recurrent homelessness (Carlen 1996; Fopp 2009; Pleace 2000; Willse 2010). For women, however, these responses can be combined with a widespread belief that a homeless woman has 'degraded' herself by entering into a

situation of homelessness and/or inhabiting insecure accommodation (Dordick 2002; Löfstrand and Thörn 2004). Women may, therefore, be punished by judgemental welfare systems on the basis of presumptions about how their homelessness came about and also because of their perceived deviation from women's gendered roles as mothers, nurturers and homemakers (Löfstrand and Thörn 2004; Watson 1999).

There is growing evidence that housing-led and Housing First service models, which show respect to service users and give them a high degree of control over their lives, are far more effective than traditional 'stepped' or 'staircase' approaches² in ending long-term and recurrent homelessness (Busch-Geertsema 2013; O'Sullivan 2012). Research on Housing First services also strongly suggests that they can work successfully with women who have experienced long-term homelessness (Busch-Geertsema 2013; Pleace and Bretherton 2013b; Tsemberis 2010). However, the effectiveness of housing-led and Housing First services for women experiencing long-term and recurrent homelessness may depend, in part, on how those services are organized. Scattered site models that use ordinary housing in ordinary neighbourhoods allow women to live independently in their own housing, while some communal or congregate models of Housing First are blocks of housing which, while offering self-contained apartments, may be shared with men. More research looking specifically at how effective Housing First and housing-led services are in meeting the needs of formerly and potentially long-term and recurrently homeless women is required, as much of the current evidence base on Housing First does not explore gender issues and fails to differentiate between the experiences of men and women (Pleace and Quilgars 2013). The operational ethos of Housing First services is another important consideration since only those services that provide a high degree of choice and control to women, that is, services that do not impose value judgements or attempt to 'regulate' their behaviour, may have the potential to be more effective (Hansen Löfstrand and Juhila 2012).

²'Stepped' or 'staircase' approaches involve progressing individuals through a series of residential services, typically, from emergency hostels to transitional housing and then towards independent living. They are founded on a 'treatment first' philosophy or the notion that individuals need to be 'fixed' in order to sustain independent housing (Padgett et al. 2006a). Within 'stepped' models, progress along a continuum of care is contingent on evidence of 'acceptable' behaviour and compliance with treatment (for substance use and/or mental ill-health) (Sahlin 2005).

Conclusion

This volume has been written to explore the gaps in the evidence base on women's experience of homelessness. In the case of long-term and recurrent homelessness among women, there is adequate evidence to raise questions, both about the overall extent of these forms of homelessness among women and about how women's experience of, and responses to, long-term and recurrent homelessness can differ from those of men. Current understanding of long-term and recurrent homelessness is constrained by the longstanding focus on individuals living rough and in emergency service settings, contexts in which men predominate and where women are less likely to be present.

Better understanding of the extent and nature of long-term and recurrent homelessness among women could enhance policy responses and bolster the development of services that would better meet the needs of women in this situation. There are difficulties associated with conducting research in this field, including the challenge of researching elements of the long-term and recurrently homeless population that are harder to reach by virtue of their hidden nature. However, these are issues that can be overcome if enough time, effort and funding is directed into this sphere of research.

There is a strong argument to be made that the unique experience of long-term and recurrent homelessness among women, both in terms of the human costs associated with this severe social problem and the financial costs to society, is poorly understood. This is arguably due in large part to the assumption that it is mainly men who experience these forms of homelessness, a belief that has thwarted understanding by neglecting gender-specific analyses and explicit consideration of the experiences of women. The assumption that unresolved homelessness is an essentially male phenomenon is, as this chapter has argued, not founded on good social science that demonstrates that women do not experience long-term or recurrent homelessness at the same rate as men. Too often, the focus of existing research has been on long-term and recurrent homelessness in spaces and situations in which men are more likely to predominate, rather than on attempting to understand the full extent and reality of long-term and recurrent homelessness among women.

References

- Anderson, I., Kemp, P., & Quilgars, D. (1993). *Single homeless people*. London: HMSO.
- Aubry, T., Farrell, S., Hwang, S. W., & Calhoun, M. (2013). Identifying the patterns of emergency shelter stays of single individuals in Canadian cities of different sizes. *Housing Studies*, 28(6), 910–927.
- Baptista, I. (2010). Women and homelessness. In E. O’Sullivan, V. Busch-Geertsema, D. Quilgars, & N. Pleace (Eds.), *Homelessness research in Europe* (pp. 163–186). FEANTSA: Brussels.
- Baptista, I., Benjaminsen, L., Pleace, N., & Busch-Geertsema, V. (2012). *Counting homeless people in the 2011 housing and population census*. EOH Comparative Studies on Homelessness 2. Brussels: FEANTSA.
- Bassuk, E. L. (1984). The homelessness problem. *Scientific American*, 251(1), 28–33.
- Benjaminsen, L., & Andrade, S. B. (2015). Testing a typology of homelessness across welfare regimes: Shelter use in Denmark and the USA. *Housing Studies*, 30(6), 858–876.
- Bowpitt, G., Dwyer, P., Sundin, E., & Weinstein, M. (2011). Comparing men’s and women’s experiences of multiple exclusion homelessness. *Social Policy & Society*, 10(4), 537–546.
- Brousse, C. (2009). Becoming and remaining homeless: A breakdown of social ties or difficulties accessing housing? In *F2009/06 Economie et Statistique: Special Issue on the Homeless* (English Version) (pp. 43–78). Paris: INSEE.
- Busch-Geertsema, V. (2013). *Housing First Europe: Final report*. Brussels: European Commission. Retrieved from http://www.socialstyrelsen.dk/housingfirsteurope/copy4_of_FinalReportHousingFirstEurope.pdf
- Busch-Geertsema, V., Edgar, W., O’Sullivan, E., & Pleace, N. (2010). *Homelessness and homeless policies in Europe: Lessons from research*. Brussels: European Commission.
- Carlen, P. (1996). *Jigsaw: A political criminology of youth homelessness*. Buckingham: Open University Press.
- Casey, S. (2002). Snakes and ladders: Women’s pathways into and out of homelessness. In T. Eardley & B. Bradbury (Eds.), *Competing visions: Refereed proceedings of the National Social Policy Conference, 2001*. SPRC Report 1/02 (pp. 75–90). Sydney: Social Policy Research Centre, University of New South Wales.

- Casey, R., Goudie, R., & Reeve, K. (2008). Homeless women in public spaces: Strategies of resistance. *Housing Studies*, 23(6), 899–916.
- Caton, C. L. (1990). The epidemiology of homelessness. In C. Caton (Ed.), *Homeless in America* (pp. 19–35). New York: Oxford University Press.
- Caton, C. L., Dominguez, B., Schanzer, B., Hasin, D. S., Shrout, P. E., Felix, A., et al. (2005). Risk factors for long-term homelessness: Findings from a longitudinal study of first-time homeless single adults. *American Journal of Public Health*, 95(19), 1753–1759.
- Centre for Housing Research. (2014). *Supporting people*. Retrieved from <https://supportingpeople.st-andrews.ac.uk/pubs.cfm>
- Central Statistics Office. (2012). *Homeless persons in Ireland: A special census report*. Dublin: Central Statistics Office. Retrieved from http://www.cso.ie/en/media/csoie/census/documents/homelesspersonsinireland/Homeless_persons_in_Ireland_A_special_Census_report.pdf
- Cohen, C. I., & Thompson, K. S. (1992). Homeless mentally ill or mentally ill homeless? *American Journal of Psychiatry*, 149(6), 816–821.
- Culhane, D. P. (2008). The costs of homelessness: A perspective from the United States. *The European Journal of Homelessness*, 2, 97–114.
- Culhane, D. P., & Kuhn, R. (1998). Patterns and determinants of public shelter utilization among homeless adults in Philadelphia and New York City. *Journal of Policy Analysis and Management*, 17(1), 23–43.
- Culhane, D. P., Metraux, S., Byrne, T., Stino, M., & Bainbridge, J. (2013). Aging trends in homeless populations. *Contexts*, 12(2), 66–68.
- Culhane, D. P., Metraux, S., & Hadley, T. (2002). Public service reductions associated with placement of homeless persons with severe mental illness in supportive housing. *Housing Policy Debate*, 13(1), 107–163.
- Darnton-Hill, I., Mandryk, J. A., Mock, P. A., Lewis, J., & Kerr, C. B. (1990). Socio-demographic and health factors in the well-being of homeless men in Sydney, Australia. *Social Science and Medicine*, 31(5), 537–544.
- Department for Communities and Local Government. (2013). *The Fiscal case for working with troubled families: Analysis and evidence on the costs of troubled families*. London: Department of Communities and Local Government.
- Department of the Environment, Heritage and Local Government. (2008). *The way home: A strategy to address adult homelessness in Ireland 2008–2013*. Dublin: Department of the Environment, Heritage and Local Government.
- Doherty, J. (2001). Gendering homelessness. In B. Edgar & J. Doherty (Eds.), *Women and homelessness in Europe: Pathways, services and experiences* (pp. 9–20). Bristol: The Policy Press.

- Dordick, G. A. (1997). *Something left to lose: Personal relations and survival among New York's homeless*. Philadelphia: Temple University Press.
- Dordick, G. A. (2002). Recovering from homelessness: Determining the “quality of sobriety” in a transitional housing program. *Qualitative Sociology*, 25(1), 7–32.
- Drake, M., O'Brien, M., & Biebuyck, T. (1982). *Single and homeless*. London: HMSO.
- Echenberg, H., & Jensen, H. (2012). *Defining and enumerating homelessness in Canada*. Montreal: Library of Parliament.
- Edgar, B., & Doherty, J. (2001). *Women and homelessness in Europe: Pathways, services and experiences*. Bristol: The Policy Press.
- European Consensus Conference on Homelessness. (2010). *Policy recommendations of the Jury*. European Consensus Conference on Homelessness, Brussels, 9–10 December, 2010.
- FEANTSA. (2012). *On the way home? FEANTSA monitoring report on homelessness and homeless policies in Europe*. Brussels: FEANTSA.
- Fopp, R. (2009). Metaphors in homelessness discourse and research: Exploring “pathways”, “careers” and “safety nets”. *Housing, Theory and Society*, 26(4), 271–291.
- Gladwell, M. (2006, February 13). Million dollar Murray: Why problems like homelessness may be easier to solve than to manage. *The New Yorker*, p. 96.
- Hansen Lofstrand, C. (2012). Homelessness as an incurable condition? The medicalization of the homeless in the Swedish Special Housing Provision. In L. L'Abate (Ed.), *Mental illnesses—Evaluation, treatments and implications* (pp. 106–126). INTECH. DOI: 10.5772/29533. Available Retrieved from: <http://www.intechopen.com/books/mental-illnesses-evaluation-treatments-and-implications/homelessness-as-an-incurable-condition-the-medicalization-of-the-homeless-in-the-swedish-special-hou>
- Hansen Lofstrand, C., & Juhila, K. (2012). The discourse of consumer choice in the pathways Housing First model. *European Journal of Homelessness*, 6(2), 47–68.
- Henry, M., Cortes, A., & Morris, S. (2013). *The 2013 Annual homeless assessment report (AHAR) to Congress, Part 1: Point-in-Time estimates of homelessness*. Washington, DC: US Department of Housing and Urban Development.
- Higate, P. R. (2000). Tough bodies and rough sleeping: Embodying homelessness amongst ex-servicemen. *Housing, Theory and Society*, 17(3), 97–108.
- Hutchinson, S., Page, A., & Sample, E. (2014). *Rebuilding shattered lives*. London: St Mungos.
- Jasinski, J. L., Wesely, J. K., Wright, J. D., & Mustaine, E. E. (2010). *Hard lives, mean streets: Violence in the lives of homeless women*. Boston, MA: Northeastern University Press.

- Johnson, G., & Wylie, N. (2010). *This is not living: Chronic homelessness in Melbourne*. Melbourne: RMIT University and Sacred Heart Mission.
- Jones, A. (1999). *Out of sight, out of mind: The experiences of homeless women*. London: Crisis.
- Jones, A., & Pleace, N. (2010). *A review of single homelessness in the UK, 2000–2010*. London: Crisis.
- Kaakinen, J. (2012). *The programme to reduce long-term homelessness: Final report*. Helsinki: Environmental Administration.
- Kearns, K. C. (1984). Homelessness in Dublin: An Irish urban disorder. *American Journal of Economics and Sociology*, 43(2), 217–233.
- Kemp, P. A., Neale, J., & Robertson, M. (2006). Homelessness among problem drug users: Prevalence, risk factors and trigger events. *Health and Social Care in the Community*, 14(4), 319–328.
- Knutagård, M., & Kristiansen, A. (2013). Not by the book: The emergence and translation of Housing First in Sweden. *European Journal of Homelessness*, 7(2), 93–115.
- Kuhn, R., & Culhane, D. P. (1998). Applying cluster analysis to test a typology of homelessness by pattern of shelter utilization: Results from the analysis of administrative data. *American Journal of Community Psychology*, 26(2), 207–232.
- Lee, B. A., Tyler, K. A., & Wright, J. D. (2010). The new homelessness revisited. *Annual Review of Sociology*, 36, 501–521.
- Löfstrand, C., & Thörn, C. (2004). The construction of gender and homelessness in Sweden. *Open House International Journal*, 29(2), 6–13.
- Lomax, D., & Netto, G. (2007). *Evaluation of tenancy sustainment services for rough sleepers*. London: ODPM.
- Macgregor-Wood, S. (1976). Camberwell Reception Centre: A consideration of the need for health and social services of homeless, single men. *Journal of Social Policy*, 5(4), 389–399.
- May, J., Cloke, P., & Johnsen, S. (2007). Alternative cartographies of homelessness: Rendering visible British women's experiences of 'visible' homelessness. *Gender, Place and Culture*, 14(2), 121–140.
- Mayock, P., Parker, S., & Sheridan, S. (2013). *Mapping services for homeless women in Dublin*. Dublin: Dublin Region Homeless Executive.
- Mayock, P., Parker, S., & Sheridan, S. (2015a). *Women, homelessness and service provision*. Dublin: Simon Communities of Ireland.
- Mayock, P., Sheridan, S., & Parker, S. (2015b). 'It's just like we're going around in circles and going back to the same thing ...': The dynamics of women's unresolved homelessness. *Housing Studies*, 30(6), 877–900.

- Mayock, P., & Sheridan, S. (2012). *Women's 'Journeys' to homelessness: Key findings from a biographical study of homeless women in Ireland*. Women and Homelessness in Ireland, Research Paper 1. Dublin: School of Social Work and Social Policy and Children's Research Centre, Trinity College Dublin.
- Mayock, P., & Sheridan, S. (2013). At home in prison? Women and the homelessness-incarceration nexus. *Irish Probation Journal*, 10, 118–140.
- McAllister, W., Kuang, L., & Lennon, M. C. (2010). Typologizing temporality: Time-aggregated and time patterned approaches to conceptualising homelessness. *Social Services Review*, 84(2), 225–255.
- Meert, H. (2005). *Preventing and tackling homelessness: Synthesis report of the peer review of social inclusion policies meeting Denmark 2005*. Brussels: European Commission DG Employment, Social Affairs and Equal Opportunities.
- Morikawa, S., Uehara, R., Okuda, K., Shimizu, H., & Nakamura, Y. (2011). Prevalence of psychiatric disorders among homeless people in one area of Tokyo. *Japanese Journal of Public Health*, 58(5), 331–339.
- Moss, K., & Singh, P. (2012). *Women rough sleepers who are victims of domestic violence*. Retrieved November 30, 2013, from <http://www.womenroughsleepers.eu/sites/default/files/WRS%20FINAL%20REPORT.pdf>
- Moss, K., & Singh, P. (2015). *Women rough sleepers in Europe: Homelessness and victims of domestic abuse*. Bristol: Policy Press.
- Muñoz, M., Panadero, S., Santos, E. P., & Quiroga, M. A. (2005). Role of stressful life events in homelessness: An intragroup analysis. *American Journal of Community Psychology*, 35(1/2), 35–47.
- NatCen. (2009). *Profiling London's rough sleepers*. London: Broadway.
- O'Flaherty, B. (2010). Homelessness as bad luck: Implications for research and policy. In I. G. Ellen & B. O'Flaherty (Eds.), *How to house the homeless*. New York: Russell Sage Foundation.
- O'Sullivan, E. (2008). Pathways through homelessness: Theoretical and policy implications. In J. Doherty & B. Edgar (Eds.), *'In My Caravan, I Feel Like Superman': Essays in honour of Henk Meert, 1963–2006* (pp. 71–100). Brussels: FEANTSA.
- O'Sullivan, E. (2012). *Ending homelessness—A housing-led approach*. Dublin: Department of Environment, Community and Local Government.
- Padgett, D. K., Gulcur, L., & Tsemberis, S. (2006a). Housing First services for people who are homeless with co-occurring serious mental illness and substance abuse. *Research on Social Work Practice*, 16(1), 74–83.
- Padgett, D. K., Hawkins, R. L., Abrams, C., & Davis, A. (2006b). In their own words: Trauma and substance abuse in the lives of formerly homeless women with serious mental illness. *Psychological Assessment*, 76(4), 461–467.

- Patterson, M., Moniruzzaman, A., Palepu, A., Zabkiewicz, D., Frankish, C. J., Krausz, M., et al. (2013). Housing First improves subjective quality of life among homeless adults with mental illness: 12-month findings from a randomized controlled trial in Vancouver, British Columbia. *Social Psychiatry and Psychiatric Epidemiology*, 48(8), 1245–1259.
- Phillips, R. (2000). Politics of reading: Cultural politics of homelessness. *Antipode*, 32(4), 429–462.
- Pleace, N. (2000). The new consensus, the old consensus and the provision of services for people sleeping rough. *Housing Studies*, 15(4), 481–594.
- Pleace, N. (2008). *Effective services for substance misuse and homelessness in Scotland: Evidence from an international review*. Edinburgh: Scottish Government.
- Pleace, N. (2011). Immigration and homelessness. In E. O'Sullivan (Ed.), *Homelessness research in Europe* (pp. 143–163). Brussels: FEANTSA.
- Pleace, N., Baptista, I., Benjaminsen, L., & Busch-Geertsema, V. (2013). *The costs of homelessness in Europe: An assessment of the current evidence base*. Brussels: FEANTSA.
- Pleace, N., & Bretherton, J. (2013a). *Measuring homelessness and housing exclusion in Northern Ireland: A test of the ETHOS typology*. Belfast: Northern Ireland Housing Executive.
- Pleace, N., & Bretherton, J. (2013b). *Camden Housing First: A 'Housing First' experiment in London*. York: University of York.
- Pleace, N., & Quilgars, D. (1996). *Health and homelessness in London: A review*. London: The Kings Fund.
- Pleace, N., & Quilgars, D. (2013). *Improving health and social integration through Housing First: A review*. Brussels: DIHAL/FEANTSA.
- Pleace, N., Teller, N., & Quilgars, D. (2011). *Social housing allocation and homelessness*. Brussels: FEANTSA.
- Poulin, S. R., Maguire, M., Metraux, S., & Culhane, D. P. (2011). Service use and costs for persons experiencing chronic homelessness in Philadelphia: A population-based study. *Psychiatric Services*, 61(11), 1093–1098.
- Quilgars, D., Johnsen, S., & Pleace, N. (2008). *Review of youth homelessness in the UK*. York: Joseph Rowntree Foundation.
- Quilgars, D., & Pleace, N. (2010). *Meeting the needs of households at risk of domestic violence in England: The role of accommodation and housing-related support services*. London: Communities and Local Government.
- Reeve, K., Casey, R., & Goudie, G. (2006). *Homeless women: Still being failed yet striving to survive*. London: Crisis.

- Reeve, K., Goudie, G., & Casey, R. (2007). *Homeless women: Homelessness careers, homelessness landscapes*. London: Crisis.
- Rossi, P. H., Wright, J. D., Fisher, G. A., & Willis, G. (1987). The urban homeless: Estimating composition and size. *Science*, 235(4794), 1336–1341.
- Sahlin, I. (2005). The staircase of transition: Survival through failure. *Innovation*, 18(2), 115–135.
- Shinn, M., Weitzman, B. C., Stojanovic, D., Knickman, J. R., Jimenez, L., Duchon, L., et al. (1998). Predictors of homelessness among families in New York City: From shelter request to housing stability. *American Journal of Public Health*, 88, 1651–1657.
- Snow, D., & Anderson, L. (1987). Identity work among the homeless: The verbal construction and avowal of personal identities. *American Journal of Sociology*, 92(6), 1336–1371.
- Snow, D., Anderson, L., & Koegel, P. (1994). Distorting tendencies in research on the homeless. *American Behavioral Scientist*, 37(4), 461–475.
- Tainio, H., & Fredriksson, P. (2009). The Finnish homelessness strategy: From a 'staircase' model to a 'Housing First' approach to tackling long-term homelessness. *European Journal of Homelessness*, 3, 181–200.
- Toohy, S. M., Shinn, M., & Weitzman, B. C. (2004). Social networks and homelessness among women heads of household. *American Journal of Community Psychology*, 33(1/2), 7–20.
- Tsemberis, S. (2010). Housing First: Ending homelessness, promoting recovery and reducing costs. In I. G. Ellen & B. O'Flaherty (Eds.), *How to house the homeless* (pp. 37–56). New York: Russell Sage Foundation.
- US Department of Housing and Urban Development (HUD). (2007). *Defining chronic homelessness: A technical guide for HUD programs*. Washington, DC: HUD.
- US Department of Housing and Urban Development (HUD). (2010). *Opening doors: Federal plan to prevent and end homelessness*. Washington, DC: HUD.
- US Department of Housing and Urban Development (HUD). (2012). *Continuum of care homeless assistance programs homeless populations and sub-populations*. Washington, DC: HUD.
- US Department of Housing and Urban Development (HUD). (2013). *The 2013 Annual Homeless Assessment Report (AHAR) to Congress: Part 1 Point-in-Time estimates of homelessness*. Washington, DC: HUD.
- Vincent, J., Deacon, A., & Walker, R. (1995). *Homeless single men: Roads to resettlement*. Aldershot: Avebury.
- Wardhaugh, J. (1999). The unaccommodated woman: Home, homelessness and identity. *The Sociological Review*, 47, 91–109.

- Watson, S. (1999). A home is where the heart is: Engendering notions of homelessness. In P. Kenner & A. Marsh (Eds.), *Homelessness: Exploring new terrain* (pp. 81–100). Bristol: Policy Press.
- Watson, S., & Austerberry, H. (1986). *Housing and homelessness: A feminist perspective*. London: Routledge.
- Willse, C. (2010). Neo-liberal biopolitics and the invention of chronic homelessness. *Economy and Society*, 39(2), 155–184.

10

Migrant Women and Homelessness

Magdalena Mostowska and Sarah Sheridan

Introduction

Across the EU there is strong evidence of an increase in the numbers of migrants presenting to homelessness services (Edgar et al. 2004; McNaughton Nicholls and Quilgars 2009; Pleace 2010). In order to contextualize this phenomenon, however, it is important to highlight the shifting migration trends in the last decade or so within Europe, which have undergone significant macro-level structural and economic change. The pivotal expansion agreements of the EU in 2004 and 2007 paved the way for 12 Eastern European states to become full EU members and led to the considerable migration of peoples from these accession countries to

M. Mostowska (✉)
University of Warsaw, Warsaw, Poland
e-mail: mmostowska@uw.edu.pl

S. Sheridan
Focus Ireland, Dublin, Ireland

© The Author(s) 2016
P. Mayock, J. Bretherton (eds.), *Women's Homelessness in Europe*,
DOI 10.1057/978-1-137-54516-9_10

other parts of Europe.¹ Large numbers of migrants from outside the EU were simultaneously moving in the context of globalization, deepening global inequality, or as a consequence of conflict in their home countries (Castles and Miller 2009). Alongside these recent migration trends, the number of migrants experiencing homelessness across host countries is also increasing (Homeless Link 2010). Simultaneously, the global economic downturn after 2007 has resulted in rising levels of unemployment and escalating national debts across European countries. In responding to migrant homelessness as a social problem, a range of differing, and at times conflicting, discourses in the context of economic austerity within Europe is evident; the issue can be viewed, for example, as an ‘immigration problem’ or, alternatively, a ‘housing problem’ (Pleace 2010). Furthermore, each EU nation state imposes distinct immigration laws and restrictions on particular groups of migrants. In other words, immigration law, welfare systems and associated restrictions therein, vary across European Member States, which further complicate our understanding of the phenomenon. The term ‘migrants’ in this chapter refers to individuals who are residing in a country which is *not* their country of birth. As such, the discussion does not encompass ethnic minorities born in the country where they are currently resident (or, so called, ‘second generation migrants’) despite the more substantial literature base on ethnic minorities and homelessness (Davies et al. 1996; McNaughton Nicholls and Quilgars 2009). Although both ethnic minorities and migrants may report similar difficulties in accessing the labour market, affordable housing and other relevant services (Edgar et al. 2004), the structural barriers linked to citizenship and residency rights and related barriers are the primary focus in this discussion.

The literature on migrant homelessness demonstrates that migrants report distinct experiences of housing insecurity and homelessness compared to their non-migrant counterparts (Broadway 2007; Edgar et al. 2004; Fitzpatrick et al. 2012; Homeless Link 2006; Nordfeldt 2012). Many migrants (though not all) who leave their home country due to

¹ Until 1 January 2014 Romanian and Bulgarian nationals faced restrictions relating to the freedom of movement for workers within many European countries. Similar restrictions still apply to Croatian citizens, who joined the EU in 2013.

poverty or lack of opportunity have limited financial resources, and many work in temporary, insecure or unskilled jobs and so are vulnerable to unemployment (Daly 1996; Robinson et al. 2007). Migrants who do not satisfy immigration or residency conditions in their ‘host’ countries face legal barriers when trying to access employment and essential services (McNaughton Nicholls and Quilgars 2009). Thus, uncertain immigration or residency status as well as unemployment (or underemployment) can have a profound effect on migrants’ ability to access and sustain affordable housing (Edgar et al. 2004; Fitzpatrick et al. 2012; Focus Ireland and Immigrant Council of Ireland 2012). Research has also documented discrimination, racism and xenophobia in relation to migrants accessing housing, particularly among those of minority ethnic communities (Edgar et al. 2004; Pillinger 2007; Pleace 2010). Housing segregation along ethnic lines also features in the literature. While ‘ethnic neighbourhoods’ have been found to enhance social networks and a sense of community, and can mobilize migrants’ resources in certain local contexts (Leerkes et al. 2007), housing and neighbourhood segregation is broadly viewed as negatively impacting on integration, social inclusion and the well-being of migrants and ethnic minorities (Musterd et al. 2008). These multiple, overlapping structural issues frequently place migrants in a disadvantaged position in the housing market and, consequently, migrants tend ‘to occupy poorer housing and pay a disproportionate share of their incomes to acquire it’ (Edgar et al. 2004, p. 2). Furthermore, there is evidence to suggest that the negative aspects of segregation in relation to employment and income disproportionately affect women (Laan Bouma-Doff 2008). All of these factors have a profound impact on migrants’ routes into homelessness.

While there are commonalities in the migration experiences of male and female migrants—for example, they may share similar experiences in relation to integration, legal restrictions that impact citizenship, experiences of racism and so on—there are numerous gender-specific issues that affect migrant women (Pillinger 2007). However, there is a deficit of information on these issues, and only a rudimentary understanding of migrant women’s experiences of housing instability and homelessness. This chapter attempts to cast some light on the experiences of this population through consideration of the relevant research literature on *homelessness, migration and gender*. It examines areas of overlap within the literature on migration, homelessness

and gender as well as the limited existing studies on migrant homeless women. The chapter concludes by discussing some of the possible reasons underpinning the apparent ‘gender blindness’ in the literature on migrant homelessness and considers the utility of intersectionality as an approach to this subgroup of the homeless population (Crenshaw 1991; Verloo 2006). Women are positioned, and position themselves, in accordance with categories such as gender, class and ethnicity—all of which impact upon women’s experiences and identity. Intersectionality encompasses the interaction and interplay between these categories, while also integrating a macro-level analysis of structures and institutions with micro-level insight into identities and lived experience. Life history narratives, and an emphasis on daily life, can be an appropriate methodological approach in exposing these multiple dimensions and intersections (Christensen and Jensen 2012).

The chapter draws primarily on research emerging from the Northern and Western countries of the EU, including the UK, Ireland, Belgium, the Netherlands, Scandinavian countries and also from Eastern Europe (Poland). The definition of homelessness used will draw upon the ETHOS typology of homelessness and housing exclusion,² which includes not only ‘houselessness’, but also insecure, substandard or overcrowded housing. As discussed in Chap. 5 of this volume, this is particularly important in the context of women, who are more likely to ‘double up’ with friends and family in order to avoid homelessness accommodation services and/or the stigma of homelessness (Edgar and Doherty 2001; Jones 1999; Mayock and Sheridan 2012).

The Intersection of Migration and Homelessness

As already mentioned, numbers of homeless migrants are increasing across Europe, particularly since the global economic downturn after 2007. Fourteen out of 21 of FEANTSA’s administrative council member

²ETHOS refers to the European Typology of Homelessness and Housing Exclusion developed by the European Observatory of Homelessness (see FEANTSA 2005). It defines homelessness as those who are roofless; houseless; living in insecure housing and also those living in extremely inadequate housing (see Chaps. 3 and 5 for a detailed account of ETHOS).

countries have reported increased rates of migrant homelessness (FEANTSA 2012b, p. 25). Across European nation states, homelessness statistics and counts reveal rising numbers of non-national persons sleeping rough and/or accessing emergency accommodation services. For example, official reports from the Netherlands for 2010 indicate that 46 per cent of the homeless population were foreign-born (CBS 2010, p. 61) while in Sweden, 34 per cent of the homeless were born outside of the country (Socialstyrelsen 2012, p. 35). In Ireland, 15 per cent of the total homeless population were found to be non-Irish in 2011 (Central Statistics Office 2012, p. 5) and, in Denmark, a similar figure of 17 per cent were found to be migrants (Benjaminsen and Hesselberg Lauritzen 2013, p. 112). These numbers are found to be higher among particular subgroups of the homeless population such as homeless families and rough sleepers (Broadway 2009). In a 2011 survey of social service clients and shelter residents in Sweden, 74 per cent of homeless families were headed by a migrant parent(s) (Nordfeldt 2012). High numbers of migrants are consistently found across rough sleeping populations, particularly in Western European countries. For example, in a recent count of rough sleepers in London, 53 per cent were migrants, 28 per cent of whom were EU migrants (Department for Communities and Local Government 2014) while roughly two-thirds of winter crisis shelter users in Brussels were classified as migrants (Samusocial 2012, p. 32).

Migrants have been found to have a distinct 'profile' and to report different routes into homelessness in comparison to their non-migrant counterparts. For instance, migrants experiencing homelessness are less likely to report childhood experiences of disadvantage, early-life trauma or parental substance misuse, and are more likely to have higher educational attainment and stronger employment histories (Fitzpatrick et al. 2012). Some studies have found that migrants' routes into homelessness are strongly related to structural factors (Mayock and Sheridan 2012; Socialstyrelsen 2012), that is, their homelessness is rooted in economic problems or difficulties related to accessing welfare benefits or services. Migrants may thus be 'effectively homeless', but do not necessarily report the characteristics of social exclusion³ that the indigenous homeless

³ While the concept of social exclusion is not necessarily fixed, it broadly refers to individuals and locales that demonstrate limited opportunity for employment, poor education, poor health, limited

population typically exhibit (FEANTSA 2012b, p. 15). Migrants frequently work in employment situations that supply accommodation, either on or off-site, which presents a significant risk to housing stability should their employment be terminated (Allamby et al. 2011). They also tend to have a weaker knowledge of available support structures or services and may not have the relevant local knowledge to support successful housing transitions; they may also have fewer social supports and smaller social networks than the indigenous population (Mayock et al. 2012; Mayock and Sheridan 2012). Additional requirements at the municipal level, such as the demonstration of continued residency or a 'local connection' (such as family association in the locale or history of employment in the district), and failure to satisfy these requirements may further limit access to welfare or services for migrants (FEANTSA 2012a). Migrants have also been found to be resistant to disclosing information and seeking support for reasons associated with their immigration status (Achterberg and Rigtters 2009). The relatively high numbers of migrants among rough sleeper counts and those accessing low-threshold or emergency services (particularly male migrants) may also be an indicator of this reluctance to engage with services, or their exclusion from them (Fitzpatrick et al. 2012). For instance, in Amsterdam's winter shelters, 84 per cent of users were born outside the Netherlands; 72 per cent of all nights that were spent outside in Amsterdam in the winter of 2010/2011 were by persons without the right to welfare assistance (G4-User 2012).

Migrants appear to be less likely to be homeless as a direct result of substance misuse (Fitzpatrick et al. 2012) but it would, nonetheless, be erroneous to assume that substance use and mental health problems do not exist among migrants (Garapich 2005, 2011). Research in the UK indicates that many homeless Eastern Europeans (mostly men) had become 'entrenched' in street life and engaged in heavy or dependent alcohol consumption. However, it is argued that these personal problems and migrants' acculturation into street life emerged or became more pronounced *after* their initial entry into homelessness (Bowpitt et al. 2011; Fitzpatrick et al. 2012; Garapich 2011).

access to social services, poor quality housing and high rates of crime—all of which can contribute to homelessness (Pleace 1998).

Restrictions of access to housing and services for reasons relating to legal, residency or citizenship status must be central to any discussion of migrant homelessness. Non-EU migrants who are undocumented are particularly vulnerable since some have no access to even the most basic services and are at a high risk of acute poverty and housing exclusion (McNaughton Nicholls and Quilgars 2009). A recent study in Poland has estimated that between 20 and 30 per cent of the refugee population (or persons with a temporary 'tolerated stay' permit) were homeless, and 5–10 per cent were believed to be roofless (Wysieńska 2013). For only 20 per cent of the refugees was their housing situation deemed adequate and safe (Wysieńska 2013, p. 11). These figures point to a failure of provision that was often perpetuated by lengthy periods of pending asylum applications, during which asylum seekers were instructed to reside in institutions or overcrowded dwellings and were not eligible to work. Similar findings from Ireland relating to asylum seekers' prolonged stays in 'direct provision' accommodation (as it is referred to in the Irish context) have been reported, where, in a recent report, asylum seekers were found to be residing in these reception centres for an average of 48 months (Reception and Integration Agency 2014).

Access to services for migrants can be characterized by long waiting lists and conditions of residency. For instance, in Poland in 2013, there were only 20 supported apartments made available for refugees run by either a local council or by a non-governmental organization (Wysieńska 2013). Some refugee migrants leave Poland for Western Europe due to experiences of discrimination in accessing labour and housing markets, which is exacerbated by a lack of long-term integration support (Wysieńska and Ryabińska 2010). Yet, residency restrictions also apply to many European migrants. For example, along with the 2004/38/EC Directive, EU citizens may face challenges in another Member State if they reside there for more than three months and have no 'genuine chance' of employment and no means of generating income (European Parliament 2004). However, these stipulations to satisfy residency vary across countries. Ireland and England, for example, require citizens to demonstrate 'habitual residency' or a history of employment in order to be eligible for welfare payments and housing benefit. Many migrants report problems of access to welfare entitlements, certain homelessness

services or social housing, which in turn negatively impacts their ability to exit homelessness (Focus Ireland and Immigrant Council of Ireland 2009). Homelessness among migrants would be 'largely preventable', according to many in the homelessness service sector, if migrants had full rights and entitlements (Crosscare 2012, p. 34).

Migrants' experiences of housing appear to have a number of distinctive features. First is the issue of access to housing, which affects migrants' housing pathways. Migrants tend to be overly reliant on the private rented sector for housing provision (Pauwels et al. 2007). They face rental payments that are disproportionately high relative to their income, and are more likely to occupy substandard accommodation (Edgar et al. 2004; Finn 2015). Landlord requirements may also impact migrants' access to good standard accommodation. In Sweden, even publicly owned state housing operates as a business and landlords are at liberty to set their own criteria for the selection of residents. Those criteria include, for example, supplying references, proof of a positive credit history and a stable employment record. It has been found that some landlords do not consider applicants who are reliant on welfare benefits and require proof of employment (Nordfeldt 2012, p. 115). Migrants seeking accommodation in the private rented sector also report discrimination or outright racism from 'indigenous' landlords (Edgar et al. 2004) as well as exploitation by other migrants from their own ethnic or national community. It has been shown, for instance, that some Poles living in Norway are taking advantage of recently arrived compatriots' lack of local knowledge and difficulties in accessing housing by providing them with substandard housing units at inflated prices (Friberg 2012).

Second, is the issue of tenancy sustainment. Many migrants are often unemployed, underemployed or in insecure employment and, consequently, their risk of losing private rented accommodation is high (Perry 2012). Furthermore, migrants frequently do not have secure tenancy agreements. For example, in a study of Polish tenants living in Brussels, 60 per cent were found to be subletting their accommodation or rent without a legal tenancy contract (Kaczmarczyk 2008). Similarly, Finn's (2015) study of migrants living in the private rented sector in a rural Irish town found that a majority did not have a formal tenancy agreement with their landlords. Interestingly, many of the migrants interviewed did not necessarily view the absence of a lease agreement in negative terms,

often because of their distrust in landlords, lack of English language proficiency and fear that they may be disadvantaged by a more formal tenancy agreement.

Understanding the housing experiences of migrants is, however, a complex area of enquiry, with different nationalities or groups of migrants demonstrating distinct housing pathways in studies such as Robinson et al.'s (2007) qualitative research with Polish, Liberian, Somali and Pakistani migrants in the UK. Varying factors among these migrant groups were related to the migrants' access to the labour market, their social networks or resources and sense of place, with some groups finding their way to private rented accommodation and others more commonly residing in accommodation obtained through the local authority. The authors also found an association between longer duration of residency in England and stable accommodation, suggesting that migrants were more likely to accrue rights over time and to experience increased social capital and local knowledge, which assisted them in accessing resources (Robinson et al. 2007). Furthermore, some migrants have been found to feel more settled when a family member from their country of origin joins at a later stage after they have spent time in the country and, perhaps, found employment and housing (Friberg 2012).

The Intersection of Gender and Migration

There is a recognized feminization of migration across migrant flows globally (Zlotnik 2005), with high numbers of women moving in and around the EU. In 2008, it was estimated that 48 per cent of the estimated 3.8 million migrants within the EU were women (Eurostat 2011).⁴ Women have been found to outnumber men in certain migrant groups, for example, among Romanian migrants living in Italy and Moroccan migrants living in Spain (Eurostat 2011). However, it can be argued that the literature that specifically deals with the experiences of migrant women

⁴Of the total number of 3.8 million migrants, nearly 2 million people were recorded as being *intra-EU migrants* (that is, those migrating within the EU); with 1.8 million people originally from *outside the EU* (Eurostat 2011).

does not adequately reflect the extent of this movement. Traditionally, migrant discourses have described women as 'passive' and 'followers' of their male partners, and female migration is viewed largely as 'involuntary' (Morokvasic 1984).

Migration studies have tended to treat migrant women as a 'subtheme' within a dominant male category and/or to construct the female migrant as 'other' (Lutz 2010, p. 1650). Lutz observes that gender is often treated as simply another 'aspect' of migratory flows (Lutz 2010, p. 1651), despite the widespread recognition of several gendered distinctions in the reasons for, and experience of, migration (Pillinger 2007). For example, migrant women have been found to be more likely to engage in transnational living and may move between countries, sometimes returning to their country of origin temporarily (Morokvasic 2004), patterns that do not conform to the traditional understanding of migration patterns, which tend to emphasize a process of immigration-settlement-integration (Lutz 2010). Significant also is that the structure and role of support networks for migrants in both the host country and within transnational links are also highly gendered. For instance, there are distinctions of meaning between 'distant motherhood' and 'distant fatherhood', in terms of the moral judgement of mothers, who are seen to deviate from traditional gender roles by migrating away from their families (Urbańska 2015). Women are more likely than men to utilize family reunification channels of migration (Morokvasic 2004) and are increasingly acting as central agents of family reunion who are followed by their family members (Kofman 1999).

Despite increases in female migration generally, and migrant women's greater likelihood of operating independently in the migration process, there is evidence that many women remain dependent on others in the migration process. For example, relationship breakdown in the context of a legal immigration status can disproportionately affect females (Pleace 2010). The European directive on the right to family reunification states that family members 'should be granted a status independent of that of the sponsor' (European Council 2003, p. L251/17). However, there is an essential clause in Article 16, 1b, that gives Member States an opportunity to withdraw or refuse to renew a permit 'where the sponsor and his/her family member(s) do not or no longer live in a real marital or family relationship' (European Council 2003, p. L251/17). In Poland, women with refugee sta-

tus and their families are denied access to integration programmes if their husband has a criminal record (Wysieńska 2013). Furthermore, specific family reunion schemes across Member States set strict criteria for migrants (for example, they must demonstrate evidence of having secured accommodation and/or sufficient income) and employment restrictions may also be imposed (Kofman 1999). These restrictions become particularly problematic following separation or divorce between spouses, as divorce from a 'sponsor' partner (or their death) may lead to a withdrawal of the spouse's right to stay. Many migrant women are legally dependent on their partner due to joint immigration status and their rights are, therefore, greatly diminished if the relationship breaks down (Kasturirangan et al. 2012). In some European countries, if a couple are not cohabiting, it may trigger an investigation (including home visits of an inspector) to prevent marriages of convenience (European Migration Network 2012, pp. 33–35). As a consequence, residency permits may be refused or revoked, actions may be taken to remove the applicant, or there may be a re-entry ban (European Migration Network 2012, p. 40). In Ireland, for example, there is a lack of provision or protection for individuals who are dependent on a family member's visa to attain autonomous immigration status in the event of marital breakdown, divorce, death, or the family member leaving the state (Picum 2013). These situations are particularly challenging for migrant women who experience domestic violence (Mayock et al. 2012).

The feminization of poverty is an important consideration within any discussion of migrant women. This relates to the rise of perceived gender inequalities in the family and the labour market, in both countries of origin and destination (Pillinger 2007). In many studies of gender inequality more broadly, women have been found to experience significant adversity such as lower labour market participation, higher rates of unemployment, and 'motherhood penalty'⁵, resulting in increased risk of poverty and less favourable housing conditions than their male counterparts (Eurostat 2011, p. 21; Paradis et al. 2008). Migrant participation in labour markets is highly gendered (Ehrenreich

⁵ Due to structural factors that can result in lower educational attainment, poor employment history and discrimination, 'motherhood penalty' refers to the wage and employability gap between women and men due to the childcare burden, which disproportionately affects women with children. Men are less likely to experience a 'fatherhood penalty'.

and Hochschild 2002) and large numbers of migrant women work in the 'reproductive sphere' or domestic jobs, including looking after children, other forms of care work, nursing, or low paid or temporary jobs in the service sector (Parreñas 2001). Migrant women, particularly those with no immigration status, have been found to be at an increased risk of victimization, such as trafficking for the purposes of exploitation (Allamby et al. 2011; Paradis et al. 2008), and some migrant women are coerced into prostitution (Kelleher et al. 2009). Since many of the jobs women are undertaking are in more 'hidden' spheres or taking place in informal settings, the term 'working migrant' has greater association with the experience of that of migrant men (Lutz 2010). This, in turn, may result in migrant women becoming less visible in the labour market and exacerbate their already limited access to employment opportunities. Further, immigration policies of host countries often focus on quotas or work permits in sectors such as construction, heavy industry, or agriculture (Ehrenreich and Hochschild 2002). If a migrant worker is not engaging in official employment recognized by the state, but in more informal settings, they will not be entitled to benefits should their employment cease (Ackers 2004).

Gender roles can shift and change over time, with the post-migration experience, in particular, often having positive and negative consequences for women. Some have suggested that, at the macro level, migration reproduces gender inequalities because women work abroad in (often irregular and unprotected) 'feminized domains' of domestic and care work, entertainment or sex work (Lutz 2010, p. 1652). However, the migration process can also be empowering, with many women acquiring a greater level of autonomy than they experienced in their countries of origin. For instance, in the 1990s, many Polish women used one of the few resources they had: their capacity to remain mobile and transient for prolonged periods of time. These migrant women felt empowered and demonstrated innovative agency through their pursuit of work in Western Europe and their construction of robust support networks with other Polish migrants, which served as a 'safety net' if their situation deteriorated upon separation from a partner (Morokvasic 2004, p. 17). The experience of empowerment can, however, also be coupled with downward social mobility in their own communities, with men viewed as 'migration heroes' and women framed as 'transgressing moral codes' (Morokvasic 2004, p. 20). Therefore, given

the increase in the numbers of women migrating in and across Europe, it is important to acknowledge the various impacts and effects that *gender* has on this process. Gender roles, expectations and structural barriers impact women and shape the way the migration process is both experienced and negotiated by women at all stages of their migration journey.

What We Know of Migrant Homeless Women

As already discussed, the current knowledge base on homelessness among migrant women across Europe is weak. Despite this, there are a small number of studies that provide a starting point from which to broaden and deepen our understanding of the topic. In this section, the discussion will draw on existing empirical evidence in order to examine the prevalence of female migrant homelessness and to explore some of the main issues and barriers that women face in the pursuit of stable housing.

Similar to homeless counts more generally, methodological approaches to enumerating migrant homelessness are not consistent across nation states and must, therefore, be approached with caution (Busch-Geertsema 2010). Notwithstanding these methodological problems and challenges, migrant women are a significant subgroup of the homeless migrant population across Europe. In a national census carried out in Ireland in 2012, women constituted 35 per cent (203 women) of the homeless migrant population (581 persons) (Central Statistics Office 2012, p. 5) while a recent UK study reported that 23 per cent of the migrant cohort was female (Fitzpatrick et al. 2012). In the Netherlands, 30 per cent of the homeless female population were migrant women (CBS 2010, p. 61). Similarly, Italy's urban areas have reported migrant women as a growing 'category' of female homelessness (Tosi 2001). A number of research reports on service utilization patterns have also revealed moderate to high numbers of women accessing their services. Edgar and Doherty (2001) refer to a Swedish count of residents in women's emergency centres, which found that two-thirds of the women were born abroad. A recent study of homeless migrants with no residency permit in Sweden found that 20 per cent were female (Socialstyrelsen 2013, p. 28). In England, where repatriation is seen as one of the solutions to

dealing with migrant homelessness (Pleace 2010), women constituted 12 per cent of the 2500 migrants who returned to Poland as part of the Barka UK reconnection programme (Barka 2013).⁶ These figures—while patchy and inconsistent—do offer a convincing picture of the substantial number of female migrants who experience homelessness.⁷

Although research on female migrant homelessness is lacking, it is clear that migrant women face particular vulnerabilities that, in turn, affect their housing pathways. The fact that many migrant women depend on their spouses or partners, both financially and socially, negatively impacts their housing trajectories (Mayock and Sheridan 2012; Mayock et al. 2012). Immigration regulations can serve to exacerbate female dependency to the point that many women are forced to remain in abusive situations for prolonged periods of time. A report on poverty, conducted in Brussels, presented the typical 'profile' or example of a migrant woman and her pathway to homelessness as follows (excerpt is adapted):

A woman from a North African country migrates to Belgium based on a family reunion scheme. Marriage is both her desire and also a coping strategy in the new country. It provided a migration route, it satisfied familial expectations of marriage, and it assisted with family and personal finance both in the host country and her country of origin. Her marriage soon becomes violent. Due to the fact that her immigration status is dependent upon her remaining in this marriage, and the fact that she did not know anyone in Belgium outside of her marriage, she remains with her husband and continues to suffer abuse. Returning to her country of origin was not an option. She finally seeks help at a domestic violence shelter and social welfare office. (Observatorium 2010, pp. 29–30)

⁶ Barka Foundation, a Polish NGO, operates an outreach programme for destitute and homeless migrants from Eastern Europe. The aim of this organization is to send these migrants back to their families and communities, and/or to encourage them to participate in rehabilitation in one of Barka's support centres in Poland. The programme was initiated in 2007, with the cooperation of several services in London and surrounding areas. Since then, it has also opened in Ireland and the Netherlands.

⁷ However, migrant women do not feature strongly in rough sleeper counts (Homeless Agency 2006; Homeless Link 2008). For instance, in low-threshold services in London, 10 per cent of A8 nationals accessing those services were women (Homeless Link 2006).

This case profile mirrors the narratives of migrant homeless women elsewhere (see, for example, Mayock and Sheridan 2012; Mayock et al. 2012; Steunpunt 2011). Relationship breakdown can have other consequences that can indirectly impact a migrant woman's housing situation. Migrant women may not have access to formal documentation because they are confiscated or held by their partners or ex-partners (Wysieńska and Ryabińska 2010). Some studies have documented the kinds of survival strategies used by migrant women. Single refugee mothers in Poland, for example, advised one another to access domestic violence shelters in a desperate effort to resolve their homelessness when they had exhausted all other options (Wysieńska 2013).

In Ireland, a biographical study of 60 homeless women included a subsample of 17 migrant women, primarily from Eastern Europe and Asia but also from countries in Africa and South America (Mayock and Sheridan 2012; Mayock et al. 2012). One of the main findings arising from the study centred on the extent to which economic adversity was at the core of migrant women's homelessness experience, including unemployment or loss of employment, economic dependence on their romantic partners and/or their restricted access to welfare payments. This structural disadvantage was compounded by other issues, including intimate partner violence, problems with their legal status, poor knowledge of available services, lack of social supports and their lack of proficiency in the English language. Their stories, which were diverse, highlighted a culmination of processes and events as leading to their homelessness. For example, drawing from Mayock and Sheridan's (2012) study, it is evident that the life stories of Delilah (30 years) and Immanuela (29 years), from South Africa and Poland, respectively, presented below share many common experiences: they are around the same age at time of interview, they each have a young child, they did not report substance misuse issues and both became homeless because they were forced to leave their homes having experienced domestic violence. Crucially, however, their pathways through homelessness were very different and these differences were strongly related to their immigration status: Immanuela secured habitual residency but Delilah remained without a valid permit. The 'stories' of both women are presented briefly here in order to demonstrate the overlapping issues that impacted on their housing security.

Case Studies of Two Migrant Women Experiencing Homelessness in Ireland⁸

Delilah had no immigration status in Ireland and was not eligible to work or receive social welfare support. At the time of interview, she had been residing with her eight-year-old daughter in an emergency hostel for a 19-month period and held little hope that her situation would improve in the near future, having attempted to appeal her immigration status and been refused. *Delilah* described the poverty she experienced because of her exclusion from the labour market and her ineligibility for social welfare support, which caused considerable frustration, anxiety and distress. *Delilah* was anxious to build a future in Ireland, but was unable to do so because of her precarious situation. She could not consider returning to South Africa, where her violent husband resided, since violence in the context of her marriage was the primary reason for her migration to Ireland in the first place.

Immanuela, from Poland, entered a domestic violence refuge with her nine-month-old baby following a year of physical and emotional abuse from her partner. She had very little English when she left her partner and had been escorted to a refuge by the police, following a phone call from her neighbours who reported the abuse. She resided there for one month and was then transferred to an emergency hostel. She did not satisfy the Habitual Residency Condition initially (primarily due to a lack of employment history) and was, therefore, unable to access rent supplement payment which would have enabled her to source private rented accommodation. She remained in the emergency hostel for four months at the end of which—following an appeal with the help of homeless support workers—she was approved as a resident and was able to access social welfare support. This support, together with a part-time cleaning job she subsequently secured, enabled her to access private rented accommodation. At the time of interview, she was learning English and had high hopes for her and her child's future in Ireland.

These case studies demonstrate the intersecting barriers and circumstances that serve to propel migrant women into homelessness and that may also serve to trap them in homelessness for prolonged periods of time. Crucially, these barriers are primarily structural which, if addressed and resolved in a timely manner, could positively impact a migrant women's pathway to stable and secure housing.

⁸ The case studies presented here are based on two life history interviews that are part of the Mayock and Sheridan (2012) study.

Exploring Gender Blindness in Studies of Homeless Migrants

Until this point—and owing in large part to the lack of empirical research on female migrant homelessness—the chapter has attempted to highlight intersections across the literature in an effort to reveal those (intersecting) issues that are critical to understanding migrant women's homelessness. It is worth questioning the apparent 'gender blindness' within research focusing on migrant homelessness. Research questions, methodological choices and recruitment strategies may serve to conceal the experiences of homeless migrant women and, of course, the underestimation of the extent of homelessness is partly related to definitional issues (Busch-Geertsema 2010; Chap. 5, this volume). Furthermore, some migrants who are homeless may not be eligible to access services and others may avoid contact with the service system in order to conceal their illegal status (Daly 1996). In addition, there is a wider lack of awareness of a gender dimension evident in both small- and large-scale research projects on homelessness among migrants (Crellen 2010; Focus Ireland and Immigrant Council of Ireland 2009; Homeless Link 2008). For example, one Danish study produced a typology of homeless migrants in Copenhagen (Udenfor 2012, pp. 10–13). The largest group consisted of primarily male EU working migrants while other groups included 'bottle collectors, seasonal workers and beggars' (including Roma men and women) and 'homeless sex workers' (who were exclusively female). However, despite identifying these distinct subgroups, some of which included women, the discussion titled 'problems and needs of migrants' (as well as the policy recommendations) focused only on the dominant 'migrant workers', that is, the male group (Udenfor 2012, pp. 43–51), presumably because the 'migrant workers' group dominated the study sample, with only 11 of the 102 informants recruited being women (Heide-Jochimsen and Kastanje 2011).

In another Danish study (Schmidt 2011), differences between two homeless migrant groups—Poles and West Africans—were explored but no females were included in the research. Similarly, some of the larger quantitative studies do not incorporate sufficient numbers of migrant women that would enable

any meaningful statistical analysis of group characteristics (Benjaminsen and Hesselberg Lauritzen 2013; Dyb and Johannessen 2009; Schockaert and Nicaise 2011; Socialstyrelsen 2012). Small numbers of women in studies of migrant homelessness are evident elsewhere (Christensen and Kubickova 2011), despite strong evidence of a growing number of migrant women in migrant homeless populations. In a one-night count of 58 homelessness accommodation services in London, 55 per cent of the asylum seekers and refugees residing in these settings were women, constituting about 10 per cent of the total homeless population (The London Housing Foundation 2004), but this research did not examine similarities or differences in the experiences of men and women. Even within studies that focus specifically on homeless women, the experiences of indigenous homeless women tend to dominate. Indeed, most existing research on homeless women do not include experiences of migration, instead focusing on women's life histories, including experiences of child sexual abuse, domestic violence or other forms of victimization, health, mental health and motherhood (Jones 1999; Reeve et al. 2006), or exploring specific vulnerabilities, family relationships (Kubicka 2005), old age (BBRoW 2009), sex work (McNaughton and Sanders 2007) or issues such as employment (Pol 2008).

The reasons why gender-blindness exists across research can only be speculated and, crucially, research on homelessness more broadly tends to overlook gender (Baptista 2010; Edgar and Doherty 2001). Aside from 'structural intersectionality'—which refers to overlapping social categorizations such as class, gender and ethnicity—Crenshaw (1991) also recognizes the significance of 'political intersectionality'. In other words, the needs and experiences of migrant women may be further marginalized for political reasons. For instance, conflicting political agendas may mean that specific needs are not considered politically urgent or that, perhaps, the experiences of migrant women are cloaked in a misguided attempt to prevent gender or ethnic stereotypes by, for example, avoiding discussion of domestic violence or cultural norms in the context of particular migrant groups (Crenshaw 1991).⁹ Verloo (2006) argues that there remains

⁹ See also Crenshaw (1991) on the lack of data on domestic violence in the districts of Los Angeles. The release of data was blocked by anti-domestic violence activists in order not to permit opponents to dismiss domestic violence as a minority problem and not to perpetuate racial stereotypes about some groups being more violent.

insufficient understanding of the multiple and interrelated inequalities experienced by individuals and groups over time. Furthermore, various inequalities shift in relevance according to the political climate and are, therefore, subject to changeable policy action or inaction.

Conclusion

There is strong evidence that migrant homelessness is increasing across Europe (Pleace 2010). Similarly, there is a confirmed rise in women's homelessness (Baptista 2010; FEANTSA 2012b). The available statistical data, albeit limited (particularly in terms of a lack of comparative data on both gender and nationality), suggest that the number of migrant homeless women and female-headed migrant families experiencing homelessness is increasing (Edgar and Doherty 2001; Nordfeldt 2012). Yet, despite the fact that migrant women constitute a sizeable and growing proportion of the homeless population, they have received insufficient research and policy attention. In a context of significant knowledge gaps, this chapter sought to establish an initial platform upon which forthcoming empirical research on the phenomenon might potentially be developed.

Migrants, or those who were not born in the country in which they reside, report distinct experiences compared to their non-migrant counterparts in relation to their experiences of homelessness and housing instability. The causes of homelessness among migrants are commonly related to socio-economic disadvantage and immigration and/or residency restrictions—both of which have a profound impact on migrants' access to employment, social welfare provision, services and social housing (Mayock and Sheridan 2012; Mayock et al. 2012). Related to these factors, migrants are less likely to be able to access social housing or to become home owners. Furthermore, in many neo-liberal housing regimes, migrants become disproportionately reliant on low-quality private-rented housing, which can compound the precariousness of their living situations (Perry 2012).

There are additional gender-specific issues and distinctions of experience relating to female migrants that place them at greater risk of homelessness. For example, in recent decades there is a growing acknowledgement of a 'feminization of poverty' (Edgar and Doherty 2001). Women are

more likely to rely on insecure, unskilled and temporary employment than men. Migrant women, who arguably face a 'double disadvantage' of being both migrant and female, experience even greater difficulties in securing well-paid and stable employment (Rubin et al. 2008, p. 44). Furthermore, lone-parent households are far more likely to be headed by women and a majority of women parenting alone will struggle to balance paid employment with childcare demands. In many cases, migrant women are more likely than men to have an immigration status that is dependent on a partner or spouse, which further complicates their situations, particularly in cases where domestic violence is experienced. These women are often financially dependent on their spouses and may have little or no social support external to the family unit; consequently, in the event of relationship breakdown or domestic violence, women (many with children) are propelled into homelessness services or forced to 'double up' with family or friends due to a lack of alternative options (Mayock et al. 2012). Their insufficient knowledge of local services and low proficiency of the host language are additional factors that may heighten their vulnerability to homelessness. Therefore, a range of overlapping structural and gender-specific issues impact migrant women's housing stability and their risk of homelessness.

Migrant women's narratives and experiences of homelessness are not always the same as those of indigenous women, nor are they necessarily the same as those of migrant men. Migrant women's distinct experiences are influenced by the interconnected and interrelated social categories of gender, age, class, citizenship and ethnicity. Intersectionality, therefore, provides a useful framework for understanding migrant women's homelessness and the range of overlapping experiences that may potentially impact their situations (Crenshaw 1991; Verloo 2006). Furthermore, intersectionality approaches provide a lens through which to analyse how various social categories are impacted in the context of shifting housing markets, welfare systems and immigration policies.

The apparent 'gender blindness' within research on migrant homelessness may be linked to a number of issues: this subset of the homeless population is numerically small and there are undoubtedly practical barriers to accessing an often 'hidden' population in the conduct of empirical research, irrespective of the methodological approach used. However, this

'blindness' may also be related to the fact that migrant women's stories are, in many ways, so distinct from other homeless subgroups and that their narratives do not necessarily or easily 'fit' into the larger picture. Additionally, as discussed earlier, 'political intersectionality' may be a factor in the 'invisibility' of migrant women within both policy and research. Regardless of the reasons for this neglect of migrant women's experiences, without robust evidence-based research focusing on the homeless pathways of these women, policy responses will be less effective in resolving core structural and systemic issues and impacts. Furthermore, a culturally-sensitive approach is required if migrant women's homelessness is to be fully understood; such an approach should aim to capture constructions of gender, work, marriage, parenthood, religion and community across different migrant groups.

It is when research incorporates the *intersecting* and *interactive* nature of those factors and experiences that work to shape the housing and homeless experiences of migrants that a more appropriate response can be formulated for migrant women. However, 'conventional approaches to social problems are often organized as though these risk factors are mutually exclusive and separable. As a consequence, many interventions and policies fail to capture the interactive effects of race, gender, sexuality, class, etc. and marginalize the needs of those who are multiply affected by them' (African American Policy Forum 2013, p. 3). Thus, a more nuanced understanding of migrant women and their homeless pathways is both critical and urgent.

References

- Achterberg, R., & Rigtters, F. (2009). *Onderzoek naar de benaderingswijze van medewerkers in de begeleiding van allochtone dak en thuislozen* [Research on the approach of employees to the guidance of immigrant homeless people]. Diploma Thesis, Ede: Christelijke Hogeschool Ede, Stichting Iks.
- Ackers, L. (2004). Citizenship, migration and the valuation of care in the European Union. *Journal of Ethnic and Migration Studies*, 30(2), 373–396.
- African American Policy Forum (AAPF). (2013). *A primer on intersectionality*. African American Policy Forum. Retrieved August 10, 2015, from <http://www.aapf.org/2013/2013/01/intersectionality-primer>

- Allamby, L., Bell, J., Hamilton, J., Hansson, U., Jarman, N., Potter, M., et al. (2011). *Forced labour in Northern Ireland: Exploiting vulnerability*. London: Joseph Rowntree Foundation, Retrieved from August 10, 2015, from <http://www.jrf.org.uk/sites/files/jrf/forced-labour-Northern-Ireland-full.pdf>
- Baptista, I. (2010). Women and homelessness. In E. O'Sullivan, V. Busch-Geertsema, D. Quilgars, & N. Pleace (Eds.), *Homelessness research in Europe* (pp. 163–186). Brussels: FEANTSA.
- Barka. (2013). *Reconnections program results 2007–2012*. London: Barka UK. Retrieved August 10, 2015, from <http://www.barkauk.org/reconnections/>
- Benjaminsen, L., & Hesselberg Lauritzen, H. (2013). *Hjemløshed i Danmark 2013. National Kortlægning* [Homelessness in Denmark 2013, National Mapping]. København: SFI—Det Nationale Forskningscenter for velfærd.
- Bowpitt, G., Dwyer, P., Sundin, E., & Weinstein, M. (2011). Comparing men's and women's experiences of multiple exclusion homelessness. *Social Policy and Society*, 10(4), 537–546.
- Broadway. (2007). *Routes into London's homelessness services: The experiences of A8 Nationals*. London: Broadway and the Ashden Trust. Retrieved August 10, 2015, from http://www.broadwaylondon.org/ResearchInformation/Research/main_content/A8fullreport.pdf
- Broadway. (2009). *Profiling London's rough sleepers. A longitudinal analysis of CHAIN Data*. London: NatCen and Broadway. Retrieved August 10, 2015, from http://www.broadwaylondon.org/ResearchInformation/Research/main_content/ProfilingLondonsRoughSleepersFullReport.pdf
- Brusselse Bond voor het Recht op Wonen (BBRoW). (2009). *Vrouwen, kansarmoede en huisvesting/Femmes, précarité et logement* [Women, deprivation and housing]. Brussel: Brusselse Bond voor het Recht op Wonen/Rassemblement Bruxellois pour le Droit à l'Habitat. Retrieved August 17, 2015, from http://www.rbdh-bbrow.be/IMG/pdf/article_23_35_BD.pdf
- Busch-Geertsema, V. (2010). Defining and measuring homelessness. In E. O'Sullivan, V. Busch-Geertsema, D. Quilgars, & N. Pleace (Eds.), *Homelessness research in Europe* (pp. 19–40). FEANTSA: Brussels.
- Castles, S., & Miller, M. J. (2009). *The age of migration: International populations movements in the modern world* (4th ed.). Basingstoke: Palgrave Macmillan.
- CBS. (2010). *De Nederlandse samenleving 2010* [The Dutch Society 2010]. Den Haag: Centraal Bureau voor de Statistiek. Retrieved August 10, 2015, from <http://www.cbs.nl/NR/rdonlyres/4356E489-ED7D-463C-BA4B-5FA090670696/0/2010a314pub.pdf>

- Crellen, J. (2010). Sharing solutions: How can we support Central & Eastern Europeans who become homeless in the UK? *Homeless in Europe. The Magazine of FEANTSA*, Summer 2010.
- Crenshaw, K. (1991). Mapping the margins: Intersectionality, identity politics, and violence against women of colour. *Stanford Law Review*, 43, 1241–1299.
- Crosscare, Doras Luimní, and Nasc (2012). *Person or number: Issues faced by immigrants accessing social protection: A snapshot of 54 cases presenting to NGOs across Ireland*. Limerick: Think Creative.
- Central Statistics Office. (2012). *Homeless persons in Ireland: A special census report*. Retrieved August 12, 2015, from <http://www.cso.ie/en/media/csoie/census/documents/homelesspersonsinireland/Homeless,persons,in,Ireland,A,special,Census,report.pdf>
- Christensen, A. D., & Jensen, S. Q. (2012). Doing intersectional analysis: Methodological implications for qualitative research. *NORA—Nordic Journal of Feminist and Gender Research*, 20(2), 109–125.
- Christensen, L., & Kubickova, M. (2011). *Evalueringssrapport om østeuropæiske hjemløse i København* [Evaluation report on Eastern-European homelessness in Copenhagen]. København: Kofoeds Skole. Retrieved August 10, 2015, from http://www.kofoedsskole.dk/media/7779471/ks_rapport_om_hjeml_se__steurop_ere_i_k_benhavn.pdf
- Daly, G. (1996). Migrants and gate keepers: The links between immigration and homelessness in Western Europe. *Cities*, 13(1), 11–23.
- Davies, C., Lyle, S., Deacon, A., Law, I., Julianne, L., & Kay, H. (1996). Discounted voices: Homelessness amongst young black and minority ethnic people in England. *Sociology and Social Policy Research Working Paper*, 15. Leeds: University of Leeds.
- Department of Communities for Communities and Local Government. (2014). *Rough sleeping Statistics England—Autumn 2013 Official Statistics*. London: Department for Communities and Local Government.
- Dyb, E., & Johannessen, K. (2009). *Bostedsløse i Norge 2008—en Kartlegging* [A mapping of homelessness in Norway, 2008]. Oslo: Norsk institutt for by-og Regionforskning.
- Edgar, B., & Doherty, J. (Eds.). (2001). *Women and homelessness in Europe: Pathways, services and experiences*. Bristol: The Policy Press.
- Edgar, B., Doherty, J., & Meert, H. (2004). *Immigration and homelessness in Europe*. Bristol: The Policy Press.
- Ehrenreich, A., & Hochschild, R. (2002). *Global woman: Nannies, maids, and sex workers*. New York: Henry Holt and Company.

- European Council. (2003). *Council Directive 2003/86/EC of 22 September 2003 on the right to family reunification*. Brussels: European Council. Retrieved August 17, 2015, from <http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2003:251:0012:0018:en:PDF>
- European Migration Network (EMN). (2012). *Misuse of the right to family reunification: Marriages of convenience and false declarations of parenthood*. Vienna: International Organisation for Migration.
- European Parliament. (2004). *Directive 2004/38/EC of the European Parliament and of the Council of 29 April 2004 on the right of citizens of the Union and their family members to move and reside freely within the territory of the Member States*. Brussels: European Parliament. Retrieved August 17, 2015, from <http://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2004:158:0077:0123:en:PDF>
- Eurostat. (2011). *Migrants in Europe. A statistical portrait of the First and Second Generation*. Eurostat. Retrieved August 10, 2015, from http://ec.europa.eu/dgs/home-affairs/what-we-do/policies/pdf/migrants_in_europe_eurostat_2011_en.pdf
- FEANTSA. (2005). *ETHOS European typology of homelessness and housing exclusion*. Brussels: FEANTSA.
- FEANTSA. (2012a). European Federation of National Organisations working with the homeless v. The Netherlands. Complaint No. 86/2012 to the European Committee of Social Rights. Retrieved August 10, 2015, from https://www.coe.int/t/dghl/monitoring/socialcharter/Complaints/CC86CaseDoc1_en.pdf
- FEANTSA. (2012b). *On the way home. FEANTSA monitoring report on homelessness and homeless policies in Europe*. Brussels: FEANTSA. Retrieved August 10, 2015, from <http://www.feantsa.org/spip.php?article854>
- Finn, M. (2015). *Immigrants in 'Investment Houses': A qualitative study of immigrant life in the private Rented Sector in a Rural Irish Town*. Unpublished PhD Dissertation, School of Social Work and Social Policy, Trinity College Dublin.
- Fitzpatrick, S., Johnsen, S., & Bramley, G. (2012). Multiple exclusion homelessness amongst migrants in the UK. *European Journal of Homelessness*, 6(1), 31–57.
- Focus Ireland and Immigrant Council of Ireland. (2009). *Making a home in Ireland: Housing experienced of Chinese, Indian, Lithuanian & Nigerian migrants in Blanchardstown*. Dublin: Focus Ireland and Immigrant Council of Ireland.

- Focus Ireland and Immigrant Council of Ireland. (2012). *Homeless in my new home: Migrants' experiences of homelessness in Dublin*. Dublin: Focus Ireland and Immigrant Council of Ireland.
- Friberg, J. H. (2012). The stages of migration: From going abroad to settling down. Post-accession Polish migrant workers in Norway. *Journal of Ethnic and Migration Studies*, 38(10), 1589–1605.
- G4-User. (2012). *Feitelijk dakloos in de G4* [Homelessness in the G4]. Utrecht: G4-User Urban Social Exclusion Research. Retrieved August 10, 2015, from http://www.g4-user.nl/sites/default/files/feitelijk_dakloos_in_de_g4.pdf
- Garapich, M. (2005). *The unwanted: Social and cultural of homelessness of homelessness and alcohol abuse among Eastern European migrants in London*. London: CRONEM, The Roehampton University. Retrieved August 10, 2015, from http://www.migrantsrights.org.uk/files/news/CRONEM_report.pdf
- Garapich, M. (2011). It's a jungle out there, you need to stick together: Anti-institutionalism, alcohol and performed masculinities among Polish homeless men in London. *Liminalities: A Journal of Performance Studies*, 7(3), 1–23.
- Heide-Jochimsen, B., & Kastanje, M. (2011). *Arsrapport Udeliggerprojektet, Projekt Udenfor* [Annual Report, Rough Sleepers Project]. Retrieved August 17, 2015, from <http://udenfor.dk/dk/menu/afsluttede-projekter/udeliggerprojektet/projektbeskrivelse/arsrapport-udeliggerprojektet-maj-2011>
- Homeless Agency. (2006). *Away from home and homeless: Quantification and profile of EU10 Nationals using homeless services and recommendations to address their needs*. Dublin: TSA Consultancy.
- Homeless Link. (2006). *A8 nationals in London homelessness services*. London: Homeless Link.
- Homeless Link. (2008). *Central and Eastern European rough sleepers in London: Baseline & repeat survey*. London: Homeless Link.
- Homeless Link. (2010). *Homelessness amongst migrant groups: A survey of homelessness and refugee agencies across England*. London: Homeless Link.
- Jones, A. (1999). *Out of sight, out of mind? The experiences of homeless women*. London: Crisis.
- Kaczmarczyk, P., (Ed.) (2008). *Współczesne migracje zagraniczne Polaków. Aspekty lokalne i regionalne* [Contemporary Polish international migrations: Local and regional aspects]. Warszawa: Uniwersytet Warszawski, Wydział Nauk Ekonomicznych, Ośrodek Badań nad Migracjami.

- Kasturirangan, A., Krishnan, S., & Riger, S. (2012). The impact of culture and minority status on women's experience of domestic violence. *Trauma Violence Abuse, 5*, 318–332.
- Kelleher, P., O'Connor, M., Kelleher, C., & Pillinger, J. (2009). *Globalisation, sex trafficking and prostitution: The experiences of migrant women in Ireland*. Dublin: Immigrant Council of Ireland.
- Kofman, E. (1999). Female "birds of passage" a decade later: Gender and immigration in the European Union. *International Migration Review, 33*(2), 269–299.
- Kubicka, H. (2005). *Bezdomność rodzin samotnych matek. Społeczno-wychowawcze aspekty zjawiska* [Homelessness of single mothers' families: Social and educational aspects]. Łódź: Wydawnictwo Uniwersytetu Łódzkiego.
- van der Laan Bouma-Doff, W. (2008). Concentrating on participation: Ethnic concentration and labour market participation of four ethnic groups. *Schmollers Jahrbuch, 128*(1), 153–173.
- Leerkes, A., Engbersen, G., & van San, M. (2007). Shadow places: Patterns of spatial concentration and incorporation of irregular immigrants in the Netherlands. *Urban Studies, 44*(8), 1491–1516.
- The London Housing Foundation. (2004). *Survey of homelessness sector services provided to Asylum seeker and Refugee clients: Summary of findings*. London: The London Housing Foundation.
- Lutz, H. (2010). Gender in the migratory process. *Journal of Ethnic and Migration Studies, 36*(10), 1647–1663.
- Mayock, P., & Sheridan, S. (2012) *Migrant women and homelessness: Key findings from a biographical study of homeless women in Ireland*. Women and homelessness in Ireland, Research Paper 2. Dublin: School of Social Work and Social Policy and Children's Research Centre, Trinity College Dublin.
- Mayock, P., Sheridan, S., & Parker, S. (2012). Migrant women and homelessness: The role of gender-based violence. *European Journal of Homelessness, 6*(1), 59–83.
- McNaughton, C., & Sanders, T. (2007). Housing and transitional phases out of "disordered" lives: The case of leaving homelessness and street sex work. *Housing Studies, 22*(6), 885–900.
- McNaughton Nicholls, C., & Quilgars, D. (2009). Homelessness amongst minority ethnic groups. In S. Fitzpatrick, D. Quilgars, & N. Pleace (Eds.), *Homelessness in the UK: Problems and solutions* (pp. 73–88). Coventry: Chartered Institute for Housing.

- Morokvasic, M. (1984). The overview: Birds of passage are also women. *International Migration Review*, 68(18), 886–907.
- Morokvasic, M. (2004). “Settled in mobility”: Engendering post-wall migration in Europe. *Feminist Review*, 77, 7–25.
- Musterd, S., Andersson, R., Galster, G., & Kauppinen, T. (2008). Are immigrants’ earnings influenced by the characteristics of their neighbours? *Environment and Planning A*, 40, 785–805.
- Nordfeldt, M. (2012). A dynamic perspective on homelessness: Homeless families in Stockholm. *European Journal of Homelessness*, 6(1), 105–125.
- Observatorium voor Gezondheid en Welzijn van Brussel-Hoofdstad (Observatorium). (2010). *Thuisloos in Brussel. Brussels armoederapport 2010* [Homeless in Brussels. Brussels’ poverty report 2010]. Brussel: Observatorium voor Gezondheid en Welzijn van Brussel-Hoofdstad, Retrieved August 17, 2015, from http://www.observatbru.be/documents/graphics/rapport-pauvrete/rapport-pauvrete-2010/2_thematische_rapport_2010.pdf
- Paradis, E., Novac, S., Sarty, M., & Hulchanski, D. (2008). *Better off in a shelter? A year of homelessness and housing among status immigrants, non-status migrant, & Canadian-born families*. Research Paper 213. Toronto: Centre for Urban and Community Studies.
- Parreñas, R. S. (2001). Mothering from a distance: Emotions, gender and inter-generational relations in Filipino transnational families. *Feminist Studies*, 27(2), 361–389.
- Pauwels, F., Wets, J., & Vanden Eede, S. (2007). *Poolshoogte. Onderzoek naar de socio-economische positie van Poolse arbeiders in België* [Research on the socio-economic position of Polish workers in Belgium]. Leuven: Hoger Instituut voor de Arbeid, Katholieke Universiteit Leuven.
- Perry, J. (2012). *UK migrants and the private rented sector: A policy and practice Report from the housing and migration network*. Retrieved August 12, 2015, from <http://www.jrf.org.uk/sites/files/jrf/migrants-private-rental-sector-full.pdf>
- Platform for International Cooperation on Undocumented Migrants (Picum). (2013). Submission to the 54th Session of the Committee on the Elimination of Discrimination against Women, General Discussion on “Access to Justice”, 18 February 2013, Geneva. Retrieved August 17, 2015, from http://picum.org/picum.org/uploads/file_/PICUM%20SUBMISSION%20-%20%20General%20discussion%20on%20access%20to%20justice%20%281%20February%202013%29.pdf

- Pillinger, J. (2007). *The feminisation of migration: Experiences and opportunities in Ireland*. Dublin: Immigrant Council of Ireland.
- Pleace, N. (1998). Single homelessness as social exclusion: The unique and the extreme. *Social Policy and Administration*, 32(1), 46–59.
- Pleace, N. (2010). Immigration and homelessness. In E. O'Sullivan, V. Busch-Geertsema, D. Quilgars, & N. Pleace (Eds.), *Homelessness research in Europe* (pp. 143–162). Brussels: FEANTSA.
- Pol, G. (2008). *Strategie przetrwania bezdomnych kobiet a problem pracy* [Survival strategies of homeless women and the problem of employment]. Unpublished Master's Thesis, Instytut Socjologii, Uniwersytet Warszawski, Warszawa.
- Reception and Integration Agency (RIA). (2014). *Reception and integration Agency's Annual Report*. Dublin: The Department of Justice.
- Reeve, K., Casey, R., & Goudie, R. (2006). *Homeless women: Still being failed yet striving to survive*. London: Crisis.
- Robinson, D., Reeve, K., & Casey, R. (2007). *The housing pathways of new immigrants*. York: Joseph Rowntree Foundation.
- Rubin, J., Rendall, M., Rabinovich, L., Tsang, F., & van Orange-Nassau, C. (2008). *Migrant women in the European labour force: Current situation and future prospects*. Santa Monica: Rand Corporation.
- Samusocial. (2012). *Wintermaatregelen 2011–2012: Balans en aanbevelingen* [Winter actions 2011–2012: Assessment and recommendations]. Brussels: Samusocial van Brussel.
- Schmidt, J. (2011). *Key points from qualitative research studies on West African migrant workers and on vulnerable Polish migrants in Copenhagen*. Presentation at a seminar: Down and Out in Europe—Homelessness and Free Movement, Copenhagen, 6th October 2011.
- Schockaert, I., & Nicaise, I. (2011). *De leefomstandigheden van dak- en thuislozen en van mensen zonder wettelijke verblijfsvergunning: eerste resultaten* [Life conditions of homeless people and people without a legal residence permit: First results]. Leuven: Hoger Instituut voor de Arbeid, Katholieke Universiteit Leuven. Retrieved August 10, 2015, from <http://www.armoedebestrijding.be/publications/perscon%20silccut/tekst%20onderzoek%20HIVA.pdf>
- Socialstyrelsen. (2012). *Hemlöshet och utestängning från bostadsmarknaden 2011—omfattning och karaktär* [Homelessness and exclusion from the housing market 2011—Scope and character]. Stockholm: Socialstyrelsen. Retrieved August 17, 2015, from <https://www.socialstyrelsen.se/Lists/Artikelkatalog/Attachments/18523/2011-12-8.pdf>
- Socialstyrelsen. (2013). *Hemlöshet bland utrikesfödda personer utan permanent uppehållstillstånd i Sverige* [Homelessness among Foreign-born persons with

- no permanent residence permit in Sweden]. Stockholm: Socialstyrelsen. Retrieved August 17, 2015, from <https://www.socialstyrelsen.se/Lists/Artikelkatalog/Attachments/19052/2013-5-3.pdf>
- Steunpunt. (2011). *Klopt dit nu? 6 jaar werken rond familiaal geweld* [Is it working? 6 years of work around family violence]. Leuven: Steunpunt Algemeen Welzijnswerk. Retrieved August 10, 2015, from <http://www.kennisplein.be/Documents/Klopt%20dit%20nu%20-%206%20jaar%20werken%20rond%20familiaal%20geweld.pdf>
- Tosi, A. (2001). Looking for a home: Immigrant women in Italy. In B. Edgar & J. Doherty (Eds.), *Women and homelessness in Europe: Pathways, Services and experiences* (pp. 163–173). Bristol: The Policy Press.
- Udenfor. (2012). *Homeless migrants in Copenhagen: The problems and needs of migrants*. Copenhagen: Projekt Udenfor. Retrieved August 10, 2015, from <http://udenfor.dk/uk/menu/former-projects/project-foreign-rough-sleepers/report-on-homeless-migrants-in-copenhagen/report-on-homeless-migrants-in-copenhagen>
- Urbańska, S. (2015). *Matka Polka na odległość. Z doświadczeń migracyjnych robotnic 1989–2010* [Polish mother at a distance. experiences of female migrant workers, 1989–2010]. Toruń: Wydawnictwa Naukowe UMK.
- Verloo, M. (2006). Multiple inequalities, intersectionality and the European Union. *European Journal of Women's Studies*, 13(3), 211–228.
- Wysieńska, K. (2013). *Gdzie jest mój dom? Bezdomność i dostęp do mieszkań wśród ubiegających się o status uchodźcy, uchodźców i osób z przyznaną ochroną międzynarodową w Polsce* [Where's my home? Homelessness and access to housing among asylum seekers, refugees and people with international protection in Poland]. Warszawa: Instytut Spraw Publicznych, UNHCR.
- Wysieńska, K., & Ryabińska, N. (2010). *Bezdomność uchodźców w Polsce—wyniki badania pilotażowego* [Homelessness of refugees in Poland—Results from a Pilot study]. Warszawa: Instytut Spraw Publicznych, UNHCR. Retrieved August 17, 2015, from <http://www.isp.org.pl/uploads/pdf/246292626.pdf>
- Zlotnik, H. (2005). International migration trends since 1980. In United Nations Population Fund (coord.), *International migration and the millennium development goals* (pp. 13–25). New York: United Nations Population Fund. Retrieved August 17, 2015, from http://www.unfpa.org/sites/default/files/resource-pdf/migration_report_2005.pdf

11

Conclusions

Paula Mayock and Joanne Bretherton

This book aimed to appraise the European evidence base on women's homelessness, to assess the state of knowledge and understanding of the lives and experiences of homeless women, and to identify future directions for research on women's homelessness. As outlined in the Introduction, while homelessness is increasingly seen as differentiated by gender, research and policy communities are only beginning to engage with the notion of gendered homelessness. Adopting a multidisciplinary, comparative pan-European approach to the analysis of numerous critical dimensions of women's homelessness, this collection sought to build upon earlier research and extend the knowledge base on women's homelessness.

The evidence presented clearly demonstrates the extent to which women are present, albeit not necessarily visible, within homeless populations across Europe. Applying the narrowest definition of homelessness—that

P. Mayock (✉)

Trinity College Dublin, Dublin, Ireland

e-mail: pmayock@tcd.ie

J. Bretherton

University of York, York, UK

© The Author(s) 2016

P. Mayock, J. Bretherton (eds.), *Women's Homelessness in Europe*,

DOI 10.1057/978-1-137-54516-9_11

is, those individuals who sleep rough and/or access emergency shelter accommodation—women represent one-third or more of the total homeless population in a number of countries and up to or exceeding one-quarter in several others. Throughout Europe, lone mothers with dependent children account for a large proportion of families experiencing homelessness and these women are typically young with one or two dependent children. Mothers who experience homelessness—particularly in contexts where they are parenting alone—face particular barriers to housing stability, even if they are better protected from homelessness by welfare systems in some European countries. Furthermore, a large percentage of ‘single’ women who access homelessness services in many countries are mothers who are separated from their children, although their status as mothers is generally not recognized by homelessness services or broader welfare systems. Finally, homelessness among migrant women has increased across Europe, particularly during the past decade, and there is evidence that migrant women’s routes into homelessness and their experiences of homelessness and housing differ in significant ways from their non-migrant counterparts.

The available figures in most countries almost certainly underestimate the number of homeless women, meaning that the true extent of women’s homelessness in Europe is, in fact, unknown. This is because women appear more likely than men to live—either intermittently or for lengthy periods—in situations of hidden homelessness and are, therefore, not counted as homeless. An apparently widespread pattern of women exhausting informal resources to sustain a roof over their head, before seeking assistance from services, may be essential to understanding women’s homelessness (Shinn et al. 2005).

While national-level statistics and estimates of homelessness, including women’s homelessness, are available in many countries they are based on very varied definitions and diverse approaches to the measurement of homelessness (see Table 3.2, Chap. 3). There is also a lack of differentiation *between* women who access those services where enumeration is typically undertaken. Very frequently, the available figures, at best, provide a gender breakdown but do not offer a comprehensive picture of the precise circumstances of homeless women. For instance, they often fail to distinguish between ‘single’ women and women with children, as well as between women living in diverse situations such as a family with children, ‘single’ and alone, or ‘single’ with children, and so on.

Failures in enumeration, as well as a tendency to overlook the heterogeneity of women who experience homelessness, are just a part of the problem. The absence or under-representation of women within homelessness research at the European level is a stark finding arising from the analyses presented in this volume. Homelessness research is overly focused on visibly homeless populations, on the street, in emergency accommodation and temporary supported housing, which are disproportionately occupied by men. This means that many women experiencing homelessness are missed by research and their situations and experiences not documented and, thus, effectively ignored. There is a broader tendency to look at the impacts of homelessness on health, social integration, life chances and access to services without specific reference to gender; indeed, it is more common to find homelessness research focused on youth, ex-prisoners or veterans than on women. Finally and importantly, a paucity of longitudinal research severely limits what can be said about the dynamics of women's homelessness. For example, very little is known about factors that increase the risk of women experiencing additional homeless episodes after an initial homeless experience; equally, knowledge and understanding of facilitators and barriers to women exiting homelessness is extremely weak.

Homelessness policies in the North West of Europe are more likely than previously to address the specific needs of women, yet policy and legislative responses in some countries largely ignore or neutralize gender, often because of their narrow and prohibitive definitions and conceptualizations of 'homelessness' and 'home'. In many European countries, the extent to which any form of homelessness beyond living rough is acknowledged can often be limited and while strategic responses are improving in Italy, Spain and Portugal, full recognition of gender differentiation in homelessness and the need for gender-specific services are still not fully recognized. Systems designed to manage domestic violence and homelessness are fundamentally separated in most European countries (Busch-Geertsema et al. 2014; FEANTSA 2012) and, more broadly, homelessness services remain primarily oriented towards men; they lack gender sensitivity and are very often ill-equipped to respond to the diverse situations and needs of women.

The topics and issues discussed in this book are wide ranging and provide a thorough critical analysis of the current state of knowledge about women's homelessness in Europe. Notwithstanding the constraints and limitations associated with comparative analyses of homelessness in general—including differences in the methodological approaches deployed across countries and failures to thoroughly examine the situations of women, instead merely noting their presence—this volume provides a substantive and European comparative assessment of women's homelessness. It exposes the multiple overlapping issues that impact the lives of women who experience or are at risk of homelessness and highlights the complexity and diversity of women's responses to homelessness and housing instability. The chapters in this book also present a compelling case for greater attention to gendered research and analysis of homelessness. This final chapter identifies the most significant issues and themes to arise from the contributions to the book and discusses future directions for research on women's homelessness in a European context.

Women's Homelessness: From Invisibility to Visibility

The invisibility of women's homelessness—in the academic literature, as well as within homelessness policy and service provision—has emerged repeatedly throughout this volume. The theme of invisibility is, of course, not new in the sense that the 'hiddenness' of women's homelessness is already relatively well documented at a European level (Baptista 2010; Edgar and Doherty 2001; Watson and Austerberry 1986). However, together, the contributions to this book highlight a number of intersecting dimensions of homeless women's invisibility.

First is the issue of measurement and the various ways that the techniques of enumeration in practically all European countries serve to obscure the extent to which women experience homelessness and housing instability (Chaps. 2, 3, 5 and 9). It is now well recognized that women are less likely than their male counterparts to access emergency shelter accommodation, certainly initially, and more likely to seek ways

to resolve their homelessness independently and without the help and support of homelessness and/or domestic violence services. Put differently, women's responses to homelessness—and their tendency to occupy spaces that are essentially sites of concealed homelessness—mean that their situations and experiences are frequently masked and categorized as something other than homelessness; they are also largely concealed from the public gaze and thus from the consciousness of policymakers and service providers.

This leads to a second and critical issue: women's responses to the experience of homelessness—which can serve to obscure their situations—cannot be detached from historical constructions of 'the homeless woman' and associated cultural images of homeless women that have persisted into modernity. As documented in Chap. 2, historically, dominant constructions depicted homeless women as deviant, transgressive and, by implication, largely unworthy. Furthermore, many of the early texts—which focused primarily on men's homelessness but included a small number of women—characterized homeless women as sexually deviant and essentially lacking the ability to live and function 'as women', often because of what was portrayed as their domestic, mental and moral deficiencies. While today the language and terminology used to depict the lives and situations of homeless women is far more nuanced, there is clear evidence of continuity in how women who experience homelessness or housing instability are viewed and understood. Indeed, it might be argued that strong remnants of 'older' renditions of female homelessness persist, as demonstrated in the analysis of cultural images and definitions of homeless women in Chap. 3. Applying a feminist constructivist approach and discussing prevailing ideas about home, family and women, the authors demonstrate the persistence of traditional constructions of women's roles as mothers and carers and, in particular, the continuity of traditional role differentiation within the family; these constructions have profound implications for women's routes into and through homelessness and for their access to housing. Thus, society's dominant structures and ideologies—and the gendered dynamics and responses they produce—remain central to understanding women's experience of and responses to the loss of housing and also have implications for the manner in which their homelessness is (or is not) resolved.

Thirdly, and importantly, homeless women's invisibility within *services* and the strategies frequently used by them to avoid or delay service contact, particularly during the early stages of their homelessness, may be more significant than has previously been recognized in explaining the relationship between women's homelessness and welfare states. As argued in Chap. 4, there is sufficient evidence to support the proposition that because women's experiences of homelessness influence their engagement with homelessness services, these differences may, in fact, transcend any possible effect(s) that different types of welfare states have on women's homelessness. While clear and comprehensive data about service provision and its impact on women's trajectories through and out of homelessness are clearly lacking, it is significant, nonetheless, that welfare regimes may play a lesser role than has previously been assumed in explaining women's experiences of and responses to the loss of housing.

At pan-European level, women's homelessness has gradually become more visible within policy, service provision and research and, in general, there is greater engagement with the intersection of gender and homelessness. However, the 'project' of increasing the visibility of women's homelessness is one that requires more than mere acknowledgement of the *presence* of homeless women; rather, it demands a far more nuanced framing of homeless women's invisibility, as well as recognition and engagement with the multiple, structural and institutional forces that shape women's responses to homelessness and housing instability.

Categories of 'Deserving' and 'Undeserving' Homeless Women

As highlighted in Chap. 3, policymakers struggle to conceptualize homelessness and frequently resort to simplistic definitions that fail to capture the reality and heterogeneity of homeless women's lives, the reasons why they become homeless and the diversity of experience, different to that of men, which impact their paths into, through and out of homelessness. Beyond the ramifications of a continued reliance

across Europe on definitions and enumeration techniques that yield an undifferentiated account of the lives and situations of women experiencing homelessness (Chap. 5), a number of contributors to this volume have highlighted ‘categories’, as well as categorization processes, that have significant ramifications for how homeless women are responded to by those state and non-governmental agencies charged with meeting their needs.

In many European countries, the feature that most starkly divides homeless women, certainly at the point when they seek help and access services, relates to the *presence of children*, an issue raised in Chap. 3 and, again, in Chaps. 4 and 8. As highlighted in these chapters, homeless women with children in their care are prioritized for accommodation and other supports in several countries ahead of single women and couples without children. While this prioritization of women accompanied by dependent children clearly offers protection to these families and has also been demonstrated to serve an important preventive function, it simultaneously sidelines other women experiencing homelessness. Thus, ‘deserving’ women with children in their care are seen as warranting greater levels of help and support, albeit frequently with gendered conditions and expectations attached.

Further to this, the category ‘single’ presumes that those women who present to services without children in their care are not mothers when, in a large number of European countries (including Ireland, the UK, Sweden, Hungary, Spain and Portugal), these same women are mothers who are separated from their children. At the point of first contact with homeless service settings—and in their interactions with broader welfare systems—they are, however, ‘recategorized’ as something other than mothers, as ‘single’ and ‘unattached’, even if they are involved in a relationship and have children living elsewhere. One consequence is that the advantages associated with the category ‘family’, particularly in terms of providing a more direct route to stable housing, are removed from women who do not have children in their care. Thus, the economic and personal consequences for homeless women of being separated from their children are severe and also reduce women’s chances of securing housing and reuniting with their children. Throughout Europe, responses to women experiencing homelessness are not neutral and are, instead,

modelled on expectations and assumptions about a woman's position or role within a traditional family structure.

Evidence of other specific categories of 'undeserving' women has also emerged from the contributions to this book. In a number of countries, for example, research points to the exclusion of women with substance use and/or mental health problems from at least some service settings, including homelessness and domestic violence services. While evidence of this nature is by no means uniform across Europe, in several Northern European countries considered to offer more generous social protection to women as well as better access to services, research has demonstrated the differential treatment of women with some of the most complex and pressing needs, including women with substance use and mental health problems. Women who experience long-term and recurrent homelessness—and who, as a consequence, are likely to have high support needs—may be particularly vulnerable, as highlighted in Chap. 9, because they are frequently subjected to, and punished by, normative judgements and assumptions about how their homelessness came about. These same assumptions can effectively serve to exclude women with high support needs from both homelessness and broader welfare and health services, which in turn perpetuates a cycle of ongoing and unresolved homelessness.

It is perhaps important to note that while categories of 'deserving' and 'undeserving' women may be quite conspicuous or explicit within welfare policies, they are frequently less discernible in the ideologies and practices guiding the structure and organization of service systems. However, women who access homelessness services quickly become acutely aware of the discourses and ideologies underpinning the rules and regimes within various service settings (Thörn 2001; Chap. 3, this volume) and this awareness can influence their service use patterns and also create barriers to service access (Mayock et al. 2015a, b). Processes of categorization, whether implicit or explicit, act as powerful vehicles of differentiation and have both symbolic and material significance for women who experience homelessness. Moreover, such categories serve to reinforce the sanctity of the family and bolster traditional notions of the domestic ideal, which require women to conform to particular constructions of femininity in order to 'qualify' for support.

Intersections and Intersectionality

Women who experience homelessness may share many features with their male counterparts. Homeless women, like homeless men, are frequently poor, lack educational qualifications, and can have poor physical and/or mental health, particularly if their homelessness is not resolved quickly. Nonetheless, the available research suggests that there are macro-level structures and processes that create specific risks for homelessness among women. The structural disadvantages faced by women—particularly low-income women who are parenting alone—within labour and housing markets increase women's exposure to the risk of homelessness (Edgar and Doherty 2001). These disadvantages are strongly connected to the traditional domestic division of labour, which serves to reinforce women's economic dependence and also diminishes their capacity to independently establish and maintain a home. Society's structures and institutions are, therefore, at the core of the gendered homeless (and housing) experiences of women.

Gender is, of course, not simply about denoting categories (such as men and women) but is rather about relational and institutional processes. While research to date has (partially) succeeded in uncovering the 'characteristics' of women who experience homelessness (typically emphasizing the prevalence of experiences of poverty, disadvantage, domestic violence and/or other forms of gender-based violence, and so on), the *dynamics* of women's homelessness is poorly understood at a European level. Furthermore, the notion that women's homelessness results from personal problems or failures, often closely connected with family and/or family relationship breakdown—rather than from structures, policies and systems—prevails and is frequently bolstered by research that fails to examine the complex *structural and relational processes* underlying women's homelessness and their responses to the experience of homelessness.

The relationship between domestic violence and women's homelessness provides a useful example of the inherent limitations of equating association with cause, without adequate attention to the macro-level structures that shape women's experiences of and responses to domestic violence and homelessness. As highlighted in Chap. 6, some researchers

have begun to interrogate the complexity of the link between domestic violence and homelessness, emphasizing the diverse ways in which both violence and housing instability are experienced by women, as well as the broader social, economic, legal and cultural factors underpinning the relationship between domestic violence and homelessness. Seeking to highlight the significance and intersections of institutionalized power relations, these researchers identify structures, processes, ideologies and institutions as impacting women's experiences of homelessness and housing. Furthermore, women's relationship with 'home', which is often closely linked with the notion of 'family', means that leaving abusive home environments will have implications for women that extend far beyond the loss of housing. Attention to the complexity and ambiguity of women's relationship with society's dominant structures, including welfare institutions and provision, provides a framework that can potentially challenge and destabilize simplistic assumptions about how and why women become homeless and about how their homelessness can be appropriately addressed and resolved.

The analysis of migrant women's homelessness in Chap. 10 also highlights the utility of intersectional approaches in 'visibilizing' the interconnectedness of gender and structure and, in particular, the ways in which gender roles and expectations and structural (legal, economic, social and cultural) barriers impact women, shape the migration process and create vulnerability to homelessness or housing instability. As the authors demonstrate, migrant women's homelessness has features that distinguish it from the homeless experiences of both migrant men and indigenous populations. These differences relate primarily to the manner in which legal and social requirements shape and (re)produce gender inequalities by reinforcing migrant women's economic dependence on male partners or spouses. Dominant ideologies about 'family', which influence and also undermine migrant women's eligibility for welfare support, place them in a position of precariousness and, in some cases, extreme vulnerability should their housing situations come under threat. Migrant women who experience domestic violence will face particular challenges, not simply because of their economic vulnerability but also because of the legal, social and cultural factors that shape the production and reproduction of gender inequalities.

The examples of women's experiences of domestic violence and migration, and their relationship with homelessness, signal a growing interest in intersections of social, economic, legal and cultural bearers of gender inequality and offer a direction for understanding women's homelessness. These approaches have the advantage of adding an important complexity to women's homelessness and also suggest that a comparison of 'women' and 'men' is not the only or, indeed, most salient approach to unravelling what matters or is distinctive about women's homelessness.

Broadly speaking, intersectional approaches emphasize the importance of attending to the multiple, societal structures and processes that intertwine to produce particular social positions and women's responses to these positions. Gender-based inequalities clearly endure across Europe, but are compounded or intersected by inequalities based, for example, on class, race and ethnicity, and also by the broader institutional structures that serve to reinforce women's subordinate position. Thus, for women experiencing domestic violence, gender inequality may be at the core of home-based relational processes but, equally, there are broader structures of subordination or oppression that are interconnected and interdependent. In this sense, intersectionality destabilizes the notion that there are discrete categories of experience—such as domestic violence, being a migrant woman (dependent on a partner or spouse)—that *produce* homelessness among women and expose the complex interconnections between any such 'categories' and the broader institutionalized structures that affect women's positions in society generally and their experiences of homelessness and housing specifically.

Homelessness and Its Consequences for Women

For both women and men, homelessness represents an extreme case of economic and social marginality. Homelessness signifies a loss of privacy, autonomy and identity, a breakdown of connections with family, friends and society and a loss of security, place and sense of belonging. Yet, homelessness has specific implications for women and the chapters in this volume provide important insights into the personal, social and health consequences of homelessness for women.

The particular relationship that women have with home has been raised by several of the contributions to this book. 'Home', often associated with security, warmth, constancy and a sense of ownership and control, is a concept that has taken-for-granted meanings within everyday parlance. However, the notion of 'home' can take on a diverse meaning and significance for women who are without, or living 'out of', home. While it may appear that 'home' and 'homelessness' are diametrically opposing constructs, there is evidence, for example, that women mobilize strategies to (re)create 'home' in contexts when they are essentially homeless; this may result in women seeking solutions to their homelessness that render them invisible and simultaneously place them in situations where they may be subjected to (further) exploitation and/or abuse. It also suggests that women's search for ontological security, particularly at the point of becoming homeless—but also (possibly) during any subsequent episodes of housing instability—might help to explain why they tend to seek informal solutions to their homelessness.

For women who experience domestic violence, home becomes a place of upheaval, a site of fear, and a space where a woman's sense of safety (and that of her children) is under constant threat. Despite this, research evidence from several European countries strongly suggests that women who leave their homes frequently return, sometimes repeatedly, to abusive home situations. As demonstrated in Chap. 6, notions of 'home' are multidimensional and complex and also highly gendered. Women's relationship with home (and, by implication, homelessness) is qualitatively different to that of men and the loss of home has specific gendered consequences for women.

The label 'homeless' has a stigmatizing effect on women beyond the sense of impoverishment that accompanies the experience of homelessness; indeed, it appears that, for women, the meaning of homelessness is associated with personal failure, accompanied by shame and self-blame. As highlighted in Chap. 8, the stigma that homeless women experience is distinctive and often strongly related to their diminished roles as mothers and/or the loss of motherhood resulting from their separation from their children. Homeless women whose child(ren) are not in their care may have little or no contact with them, are not recognized as mothers by homelessness or broader

welfare services and have few or no available supports or mechanisms to enable them to re-establish contact or reunite with their children. Women's separation from their children has been demonstrated to result in diminished self-esteem, a sense of disempowerment, as well as feelings of shame and guilt, often because these women are stigmatized and labelled as inadequate parents. For women with children in their care, homelessness negatively impacts their parenting ability and skills because of the insecurity and unpredictability of daily life, a lack of privacy and the kinds of restrictions placed upon them and their children in the places where they reside. These same conditions can have a dramatic negative impact on children and on mother-child relationships.

The relationship between health and homelessness—and the particular consequences of homelessness for women's health—are discussed in detail in Chap. 7. While the prevalence of specific physical and mental health problems varies between women who experience homelessness, the available research evidence, nonetheless, paints a rather bleak picture of the overall health status of homeless women. With the caveat that research on the health of homeless women is concentrated in a number of Northern European countries and existing studies are not consistent in their precise aims or in their methodological approaches, it appears that women who experience homelessness report high rates of physical (particularly circulatory, respiratory and cardiovascular problems) and mental (particularly depression and anxiety) ill-health.

Existing research on homelessness and health have, of course, focused primarily on populations living in emergency accommodation, temporary supported housing and living rough, who tend to have the worst health status. It is also difficult to disentangle pre-existing health problems from those that are a consequence of homelessness and this challenge is especially acute in the case of women who experience long-term homelessness (see Chap. 9). Nonetheless, there is sufficient evidence of the (sometimes extreme) negative consequences of homelessness for health, particularly for women who are recurrently homeless and have endured months or even years of poverty, precariousness and unpredictability of living situations, and limited or poor access to health care services.

Service Provision for Women Who Experience Homelessness

As documented in Chap. 2, historically, ‘fallen’ women—including those who were homeless but categorized as something other than homeless—were managed, in the main, throughout Europe by institutions run by various religious or evangelical communities, government-funded initiatives and lay philanthropic organizations, all of which were designed primarily to manage women’s perceived deviancy. Today, the nature of service provision for women who experience homelessness is clearly very different, although the enduring reliance on emergency shelters in some countries to accommodate homeless women (and men), albeit to a lesser degree than previously in countries in the North West of Europe, represents a significant point of continuity, despite their limited capacity to interrupt and resolve patterns of recurrent homelessness (Busch-Geertsema and Sahlin 2007).

As documented in Chap. 9, there is sufficient evidence of long-term homelessness among women to suggest that it is a real and pressing issue in many countries and that women whose homelessness is not resolved have high support needs and frequently live in situations of concealed homelessness. Other women clearly exit homelessness quickly but the mechanisms that support these early trajectories out of homelessness have not been systematically researched and there is currently only very rudimentary understanding of the processes that assist or hinder women’s capacity to access safe, secure and sustainable housing. This is because homelessness is almost always researched cross-sectionally, even in those studies informing the limited evidence base on women’s experiences, which severely restricts any analysis of women’s movements through and out of homelessness and the role of services in facilitating exits to stable housing.

While an understanding of the impact of homelessness services on women’s housing outcomes is poor, there is sufficient evidence throughout Europe to raise questions about the adequacy and appropriateness of service provision for women who experience homelessness. Barriers to service use and engagement among women include distrust of services and staff, stigma, unreasonable rules, unsafe and unsuitable environments,

fear and restrictive access requirements. These factors also appear to be drivers of homeless women's invisibility since women frequently avoid or leave service settings and enter into situations of concealed homelessness in order to escape the culture of surveillance that characterizes at least some service settings. Women's movements out of services may, as stated earlier, be in part related to their desire for ontological security, which leads at least some women to seek solutions to their homelessness independently and without the help of services (Mayock et al. 2015b).

The research evidence presented in Chaps. 3 and 8, in particular, also reveals the ways in which service responses—and approaches to communicating with homeless women—can result in women feeling infantilized and judged. Furthermore, service responses, which are frequently based on the image of homeless women as helpless victims who need to be 'fixed' and, by implication, 'prepared' for independent living, ignore women's agency and autonomy and pay little or no attention to women's strengths, aspirations and perceived needs. Indeed, a relatively consistent finding arising from the albeit limited literature on homeless women's views on the services they access is that they are not consulted about their situations and futures and are, instead, the recipients of decisions made for them on the part of service providers.

The consequences of inadequate or inappropriate service provision for homeless women are far reaching since the material conditions of their lives are so dependent on their access to those resources and supports provided by state and non-governmental agencies. Further research is clearly needed to more fully understand women's experiences of homelessness and domestic violence services as well as their service preferences, expectations and overall experiences. The available research evidence does, however, provide a compelling argument for models of service provision that are informed by knowledge and understanding of women's perceptions and experiences of services; it also strongly suggests that women are more likely to engage with services that are not infantilizing and whose providers are respectful, supportive and cognizant of the diversity and reality of women's lives (see Pleace and Bretherton 2013b).

Additional concerns have been raised throughout this volume about the structure and organization of services in many European countries. As discussed earlier, processes of categorization, whether explicit or implicit,

have implications for women who experience homelessness and can act as barriers to service access, particularly for women with complex needs. The fact that policy and service responses to homelessness and domestic violence are largely distinct and separate in their organization and structure is also significant. This separation, as argued in Chap. 6, means that women who become homeless because of domestic violence may access domestic violence services that are not ideally placed to address their homelessness while, conversely and more often the case, women may enter into homelessness service settings that are not equipped to respond to the experience of domestic violence. Indeed, the inability of generic homelessness services to offer the kinds of specialist support that many women may require has emerged strongly from the contributions to this book. Homelessness services have traditionally been primarily oriented towards the needs of homeless men with far less attention directed to the specific needs of women. Services that are modelled on male experience will, in a majority of cases, not serve women well and may inadvertently lead to further marginalization, trauma and distress. If the aim of ensuring gender-sensitive practice within homelessness services is to be progressed—a point made strongly by Edgar and Doherty (2001)—homeless service sectors throughout Europe will need to ensure better service access for women and provide environments that are safe, inclusive and empowering.

Policy Responses to Women's Homelessness

Although women's homelessness is increasingly recognized as a policy problem, the prominence of women within homelessness policy agendas is highly variable across Europe. Furthermore, the impact of homelessness strategies on women in countries where such strategies exist is not really known, even if, as highlighted in Chap. 4, strategies that recognize the presence and specific needs of women should—at least in theory—be more effective in reducing women's homelessness. In much of Europe, existing homelessness services remain focused on responding to the most urgent and basic needs of women (and men) through the provision of shelter or short- to medium-term accommodation and, in some countries,

a reliance on acquired commercial accommodation such as hotels and B&Bs, particularly for families experiencing homelessness, has become increasingly apparent in recent years. This is despite a clear shift within homelessness policy in North Western Europe towards minimizing the need for temporary accommodation, housing homeless people at the earliest possible juncture and enhancing homelessness prevention (Busch-Geertsema et al. 2010). The negative ramifications of ongoing cycles of emergency shelter and/or other short-term accommodation use and the propensity of such service use patterns to perpetuate long-term homelessness among some women are clearly documented in Chap. 9 of this volume; there is a clear risk of at least some women becoming ‘trapped’ in systems of emergency response that are ill-equipped to address their housing and other support needs.

Housing First programmes, which aim to move homeless people—particularly those with lengthy homeless histories and complex needs—into housing quickly alongside the provision of flexible, ongoing support, have been introduced and positively evaluated in a number of European countries, including Denmark, Finland, France, the Netherlands, Portugal and the UK (Busch-Geertsema 2013; Pleace and Bretherton 2013a). Although there is some research that indicates that housing-led services work successfully for women (Bretherton and Pleace 2015), the impact of gender and the experiences of women who are housed via Housing First programmes have not been systematically researched. This disregard of gender and women’s particular experiences of housing is significant and perhaps reflects the longstanding neglect by both policy and research communities of the diverse experiences of women and men in relation to both homelessness and housing. Based on the evidence presented in this book, it is clear that Housing First models will need to reflect an appreciation of the gendered nature of homelessness and consider the specific needs that many women may have at the point of exiting homelessness and becoming housed.

There is an emerging consensus across parts of Europe that calls for effective, coordinated homelessness strategies that combine an array of services aimed at preventing homelessness with a second layer of protection for people at risk of recurrent and sustained homelessness because of their complex needs. In the European context, England, Finland

and Scotland are showing the scope and potential for prevention to substantially reduce homelessness, but there is yet to be a systematic assessment of how well generic preventive services work for women or an assessment of what other services may be needed (FEANTSA 2012).

Future Directions for Research on Women's Homelessness

Together, the contributions in this book provide a comprehensive, contemporary assessment of the current state of knowledge about women's homelessness in Europe. While the evidence base on women's homelessness has increased marginally in some European countries, particularly in recent years, knowledge about practically all aspects of homeless women's lives and experiences remains weak. Data availability and data quality, as well as inconsistencies in the manner in which data are generated (related to differences in definition and classification, data generated in different ways and for different reasons, and so on), significantly limit the degree to which data on homelessness generally and women's homelessness in particular can be subjected to meaningful and robust comparative analysis. Efforts to harmonize data collection methods and to ensure that gender is fully incorporated into statistical data on homelessness across European countries would clearly greatly enhance the comparability of data and would also provide useful instruments for researchers and policymakers.

In most European countries, there remains an almost complete absence of primary research on women's homelessness and, even in countries where dedicated research has been undertaken, the evidence base on women's homelessness is still extremely patchy and studies to date have not succeeded in capturing the experiences of women living in situations of hidden homelessness. Understanding of the root causes of women's homelessness remains underdeveloped and causal mechanisms are all too frequently reduced to simplistic associations that fail to unravel the dynamics of women's homelessness. Furthermore, there is a tendency for research to homogenize the experiences of homeless women and insufficient attention is directed to the diversity of women's experiences of homelessness and housing. Linked to this, there are specific aspects of

women's homelessness that merit dedicated research attention. For example, migration patterns across Europe and their specific impact on women's homelessness have not been systematically examined and migrant women are frequently not included or are under-represented in homelessness research. With available statistical data in several countries pointing to increasing numbers of migrant women experiencing homelessness, there is an urgent need for research on these women's paths into and through homelessness.

The limitations of cross-sectional research on homelessness are, by now, relatively well rehearsed (see Busch-Geertsema et al. 2010; Snow et al. 1994) and have been reiterated by several contributors to this volume. Longitudinal research, particularly in the USA (Culhane et al. 2007; Culhane and Kuhn 1998), but also in Europe (Benjaminsen and Andrade 2015), has transformed our understanding of the dynamics of homelessness (see Chaps. 2 and 9), demonstrating the flawed assumptions about homelessness arising from many cross-sectional studies, which tend to present a static and one-dimensional picture of the homeless experience. Longitudinal research is required to more fully examine and understand temporal dimensions of women's homelessness, trace patterns of change over time and, in particular, to examine the processes and mechanisms that facilitate or, alternatively, act as barriers to women exiting homelessness. Research of this kind should, if possible, incorporate both quantitative and qualitative data collection strategies and also pay close attention to women's service interactions, their paths through service systems and their experiences of service provision.

In addition to research that moves beyond cross-sectional approaches, making sense of women's homelessness requires greater investment in comparative European research using innovative methodologies, again including a mix of quantitative and qualitative approaches. There are clearly challenges associated with the conduct of primary comparative cross-national research, but these methodological problems can be overcome if research designs are sufficiently robust and carefully implemented. Comparative analyses offer the potential for new insights into how wider socio-political contexts impact women's experiences of homelessness and provide an ideal opportunity to engage in critical cross-country analyses of policy and practice. Comparative analyses can also potentially

highlight the competing priorities operating in different contexts; expose and challenge taken-for-granted assumptions and discourses; reveal the arbitrariness of particular definitions, concepts and categorizations; and suggest new and innovative solutions to the problem of women's homelessness.

References

- Baptista, I. (2010). Women and homelessness. In E. O'Sullivan, V. Busch-Geertsema, D. Quilgars, & N. Pleace (Eds.), *Homelessness research in Europe* (pp. 163–186). Brussels: FEANTSA.
- Benjaminsen, L., & Andrade, S. B. (2015). Testing a typology of homelessness across welfare regimes: Shelter use in Denmark and the USA. *Housing Studies*, 30(6), 858–876.
- Bretherton, J., & Pleace, N. (2015). *Housing First in England: An evaluation of nine services*. York: Homeless Link.
- Busch-Geertsema, V. (2013). *Housing First Europe: Final report*. Retrieved from <http://www.habitat.hu/files/FinalReportHousingFirstEurope.pdf>
- Busch-Geertsema, V., Benjaminsen, L., Filipovič Hrast, M., & Pleace, N. (2014). *Extent and profile of homelessness in European Member States: A statistical update*. Brussels: FEANTSA.
- Busch-Geertsema, V., Edgar, W., O'Sullivan, E., & Pleace, N. (2010). *Homelessness and homeless policies in Europe: Lessons from research*. Brussels: European Commission.
- Busch-Geertsema, V., & Sahlin, I. (2007). The role of hostels and temporary accommodation. *European Journal of Homelessness*, 1, 67–93.
- Culhane, D. P., & Kuhn, R. (1998). Patterns and determinants of public shelter utilization among homeless adults in Philadelphia and New York City. *Journal of Policy Analysis and Management*, 17(1), 23–43.
- Culhane, D. P., Metraux, S., Park, J. M., Schretzman, M., & Valente, J. (2007). Testing a typology of family homelessness based on patterns of public shelter utilization in four U.S. jurisdictions: Implications for policy and program planning. *Housing Policy Debate*, 18(1), 1–28.
- Edgar, B., & Doherty, J. (Eds.). (2001). *Women and homelessness in Europe: Pathways, services and experiences*. Bristol: Policy Press.
- FEANTSA. (2012). *On the way home? FEANTSA monitoring report on homelessness and homeless policies in Europe*. Brussels: FEANTSA.

- Mayock, P., Parker, S., & Sheridan, S. (2015a). *Women, homelessness and service provision*. Dublin: Simon Communities of Ireland.
- Mayock, P., Sheridan, S., & Parker, S. (2015b). 'It's just like we're going around in circles and going back to the same thing...': The dynamics of women's unresolved homelessness. *Housing Studies*, 30(6), 877–900.
- Pleace, N., & Bretherton, J. (2013a). The case for Housing First in the European Union: A critical evaluation of concerns about effectiveness. *European Journal of Homelessness*, 7(2), 21–41.
- Pleace, N., & Bretherton, J. (2013b). *Camden Housing First: A 'Housing First' experiment in London*. York: University of York.
- Shinn, M., Rog, D. R., & Culhane, D. P. (2005). *Family homelessness: Background research findings and policy options*. Retrieved from http://repository.upenn.edu/spp_papers/83
- Snow, D., Anderson, L., & Koegel, P. (1994). Distorting tendencies in research on the homeless. *American Behavioral Scientist*, 37(4), 461–475.
- Thörn, C. (2001). (In-)visibility and shame: The stigma of being a woman and homeless in Sweden. In B. Edgar & J. Doherty (Eds.), *Women and homelessness in Europe: Pathways, services and experiences* (pp. 219–229). Bristol: The Policy Press.
- Watson, S., & Austerberry, H. (1986). *Housing and homelessness: A feminist perspective*. London: Routledge.

Index

A

accommodation, 3, 5, 8, 16–17,
24–5, 29, 31, 33, 35, 45,
48–9, 51, 53–7, 56n3, 59–61,
63, 65–6, 106, 109–11, 116,
121–2, 127, 132, 134, 140–4,
156, 159, 165, 167, 173,
180–6, 191, 193–200,
210–12, 218–20, 220n1,
222–4, 238–43, 245, 250,
252, 266–8, 271, 277, 280–1
administrative systems, 80–1, 111,
113, 167, 222
affordable housing, 92, 94, 139, 144,
146, 185–6, 236–7
alcohol use/abuse/misuse, 44, 57, 59,
62, 77, 82, 88, 107, 111, 116,
128, 130, 133–5, 137–42,
144, 156–7, 159, 161–3, 168,

186–7, 195, 210, 220–1,
239–40, 248–50, 252, 276

Asia, 138, 249
asylums, 16, 18, 30, 34
asylum seekers, 88, 241, 252
Austerberry, H., 2, 25, 29, 43,
129–30, 223, 268
austerity, 89, 93, 236
Australia, 133, 138, 221
Austria, 74, 91, 166

B

Baptista, I., 2, 5, 41, 48, 50, 62, 80,
82, 86, 88, 107, 112–13,
115–17, 121–2, 127–47, 155,
182, 215–18, 221, 252–3, 268
barriers, 9, 66, 77–8, 82–3, 88–9,
93, 98, 120, 135, 139, 142–3,

Note: Page number followed by “n” refers to notes.

164–70, 172, 184, 200, 222,
236–7, 247, 250, 254, 266–7,
272, 274, 278, 280, 283

biographical research, 46, 129, 219,
249

Bulgaria, 92, 236n1

Busch-Geertsema, V., 5–6, 18, 47,
76, 79, 90, 95–6, 106,
109–15, 117, 119–20, 210,
212–13, 217, 224, 247, 251,
267, 278, 281, 283

C

Canada, 78, 133, 160, 212, 221

casual wards, 16, 23, 26–32, 34

categories, 20n1, 42, 48, 53, 55, 65,
76, 156, 172–3, 238, 254,
270–3, 275

categorization, 43, 46–7, 197, 252,
271–2, 279, 284

causes of homelessness, 253

census, 51–3, 116–18, 215, 218,
247

central Europe, 7, 30, 90, 171, 239,
241, 244, 247

child care, 45, 86

children, 2, 8–9, 15, 20, 27n4, 28,
43–5, 48–50, 55–60, 63–5,
77, 86–8, 93–7, 110–11, 113,
129–30, 136–7, 140, 143,
145, 162, 168, 181–2,
188–99, 216–17, 219–20,
245n5, 246, 254, 266, 271,
276–7. *See also* family
homelessness

chronic, 158, 211

comparative research, 6, 41, 45, 133,
172

concealed homelessness, 5, 10, 107,
121–2, 269, 278–9. *See also*
hidden homelessness

congregate shelters, 17

consequences of homelessness, 275,
277

constructionist approach, 42

cross-sectional research, 33–4, 283

Culhane, D., 18, 34, 79, 83, 116,
118, 120, 139, 187, 210–12,
214, 283

cultural images, 7, 41–67, 269

Cyprus, 92

Czech Republic, 77, 92, 113,
119–20, 218

D

definitions of homelessness, 9, 16,
42, 46–50, 106–15

Denmark, 7, 45, 51, 55, 58, 60–1,
76–8, 89, 92–4, 97, 113–14,
119–22, 159, 166, 196,
212–13, 239, 281

deserving women, 271–2

deviant/deviancy, 17, 21, 25, 30–2,
222, 269, 278

Doherty, J., 2, 41, 44, 47–8, 62, 64,
138, 182, 215, 220, 238, 247,
252–3, 268, 273, 280

domestic abuse, 137–8

domesticity, 17, 33

domestic violence, 6, 9, 48, 60,
83–4, 87–8, 90, 93, 95, 97,
107, 113, 127–47, 156–7,
168, 192, 197–8, 216–19,
221, 223, 245, 248–50, 252,
252n9, 254, 267, 269, 272–6,
279–80

domestic violence services, 83–4,
87–8, 97, 137, 139, 141–2,
145, 192, 217–18, 269, 272,
279–80

drug use/abuse/misuse, 44, 57, 59,
62, 82, 107, 111, 128, 130,
133–5, 137–9, 141–2, 144,
156, 159, 161–3, 167–8,
186–7, 195, 214, 220, 222,
239–40, 248–50, 252, 276

duration of homelessness, 171

dynamics of women's homelessness,
123, 267, 273, 282

E

Eastern Europe, 90, 171, 235, 238,
240, 248n6, 249

Edgar, B., 2, 41, 44, 47–8, 62, 109,
111, 129, 138, 156, 182–3,
220, 235–8, 242, 247, 252–3,
268, 273, 280

emergency accommodation, 3, 51,
106, 111, 121, 180, 191, 195,
211–12, 218–20, 222–3, 239,
267, 277

emergency hostels, 224n2, 250. *See*
also emergency shelters

emergency shelters, 51, 83, 142–3,
195, 211–12, 216, 220, 266,
268, 278, 281. *See also*
emergency hostels

England, 16, 21–5, 28, 30–1, 50,
54–5, 89, 91, 118, 129,
136–7, 143–4, 165, 183, 185,
198, 220n1, 241, 243, 247,
281

enumeration of homelessness, 7,
113, 117. *See also* homelessness

statistics; measurement of
homelessness

episodic, 34, 211–12

Esping-Andersen, G., 44, 76, 80

ethnic minorities, 141, 236–7

ETHOS. *See* European Typology of
Homelessness and Housing
Exclusion (ETHOS)

EU. *See* European Union (EU)

European Federation of National
Organisations working with
homeless (FEANTSA), 4, 47,
49, 89–90, 109, 127, 132,
136, 142, 168, 184, 197–8,
212, 238n2, 239–40, 253,
267, 282

European Parliament, 3–4, 241

European Typology of Homelessness
and Housing Exclusion
(ETHOS), 47–9, 53, 109–11,
117, 156, 172–3, 224, 238,
238n2

European Union (EU), 5, 7, 43, 88,
93, 95, 105, 108, 110,
112–13, 117–19, 128, 140,
155–7, 162, 173, 180, 218,
222, 235–6, 236n1, 238–9,
241, 243, 243n4, 251

exiting homelessness, 42, 65, 66,
189, 267, 281, 283. *See also*
homeless exits

F

family homelessness, 6, 9, 55, 113,
180–4. *See also* children;
homeless mothers

FEANTSA. *See* European Federation
of National Organisations

working with homeless
(FEANTSA)
female-only services, 16. *See also*
women-only services
feminist, 41–4, 64, 130, 269
feminist critiques, 43
feminist research, 42–3
feminization of poverty, 44, 245, 253
Finland, 4, 7, 55, 57, 76, 78, 92, 94,
114, 119–21, 196–8, 212,
214–15, 281
France, 7, 47, 55–6, 76, 78, 89,
92–3, 113, 119, 180–2,
195–6, 198, 212, 218, 281

G

gender-based violence, 4, 111,
132–3, 187, 273
gendered homelessness, 265
gender roles, 244, 246–7, 274
Germany, 7, 24, 51, 55, 60–1, 76,
89, 91–2, 113–14, 119, 181,
192, 196–7, 218
governmental inquiries, 22–3
Greece, 77, 89, 93, 166

H

health, 6, 9, 18, 45, 53, 58, 77–8,
81–5, 88–9, 91, 96, 108, 111,
114–15, 121, 123, 128,
141–2, 155–73, 184, 187,
190–3, 196, 200, 210–13,
216–17, 219, 221–2, 224n2,
239n3, 240, 252, 267, 272–3,
275, 277

health care needs, 156, 164, 168,
170, 172
health care systems, 157, 164, 166,
168, 173. *See also* health
services
health services, 9, 78, 81, 85,
164–70, 172, 187, 222,
272
hidden homelessness, 59–61, 96,
116, 118, 184, 220, 222–3,
266, 282. *See also* concealed
homelessness
history, 19–21, 28, 31–2, 139, 160,
238, 240–2, 245n5, 250,
250n8
home (concept of), 128
homeless exits, 33–4, 135, 242, 278.
See also exiting homelessness
homeless hostel, 2, 49, 60, 136, 195,
219, 223
homeless mothers, 9, 59, 168, 180,
183–4, 187–99
homelessness policy, 56, 92, 141,
268, 280–1. *See also* housing
policy
homelessness statistics, 5, 79,
105–24, 239. *See also*
enumeration of homelessness;
measurement of homelessness
homelessness strategies, 4, 89–90,
280–1
homeless pathways, 46, 255
homeless shelters, 57, 134, 189. *See
also* homeless hostel
hostels, 2, 16, 25, 52, 60, 136, 161,
194–5, 199, 200, 219, 223,
224n2

- housing exclusion, 1, 44, 47–8,
109–10, 170–1, 238, 238n2,
241
- Housing First, 82, 90, 92, 212, 224,
281
- housing instability, 10, 48, 131, 134,
136, 138–9, 146, 155, 182–3,
200, 237, 253, 268–70, 274,
276
- housing-led, 82, 224, 281
- housing markets, 44, 91–4, 98,
138–9, 184, 186, 200, 213,
237, 241, 254, 273
- housing policy, 41, 43, 65, 94,
144. *See also* homelessness
policy
- Hungary, 58, 77, 93, 113, 119,
133–5, 192, 218, 271
- I
- immigration, 182, 236–7, 240,
244–6, 248–50, 253–4
- immigration status, 182, 240,
244–6, 248–50, 254
- individual factors/explanations, 29,
45, 61, 82, 134, 162, 180
- inequality, 3, 9, 131, 135, 236, 245,
275
- insecure accommodation, 31, 49,
156, 200, 224. *See also*
concealed homelessness;
hidden homelessness
- institutions, 16–19, 26–32, 34, 42,
49, 53, 111, 138, 192, 238,
241, 273–4, 278
- intersectionality, 9, 128, 130, 138–9,
238, 252, 254–5, 273–5
- intimate partner violence, 111, 128,
133–5, 189, 219, 249. *See also*
domestic violence
- invisibility, 2, 26–32, 43, 59–64,
135, 255, 268–70, 279
- Ireland, 7, 9, 15, 22–4, 22n2, 28–9,
44, 46, 51, 55, 57, 60–1, 63,
77, 85, 89, 92, 110, 113–14,
117–19, 121, 132–3, 138,
141, 162, 165, 168, 180–1,
183, 185, 188, 191, 196, 198,
212, 214, 218–20, 237–9,
241–2, 245, 247, 248n6,
249–51, 271
- Italy, 7, 77, 89, 91, 93, 113, 119,
243, 247, 267
- L
- labour market, 30, 32–3, 43–4, 77,
91–5, 98–9, 121, 139, 165,
182, 184, 186, 188–9, 213,
236, 243, 245–6, 250
- Latvia, 92
- Lithuania, 92, 113
- living rough, 4, 49, 90, 106, 109,
111, 114, 116, 121–2, 215,
219–20, 225, 267, 277. *See
also* sleeping rough
- local authority accommodation, 55,
59–60, 198
- local connection
longitudinal, 18, 33–4, 123, 199,
211–12
longitudinal data, 18, 123, 211
- lone mothers, 44–5, 55–9, 198, 266.
See also lone parents; single
mothers

lone parent households, 181, 254
 lone parents, 44, 50, 188. *See also*
 lone mothers; single mothers
 longitudinal, 18, 211–212, 267,
 283
 longitudinal research, 33–4, 123,
 199, 267, 283
 long-term homelessness, 209–25,
 277–8, 281. *See also* prolonged
 homelessness
 Luxembourg, 55, 92, 196

M

measurement of homelessness, 6,
 108, 266. *See also* enumeration
 of homelessness; homelessness
 statistics
 Member States, 3–5, 93, 108,
 117–19, 155, 218, 236,
 244–5
 mental health, 18, 58, 62, 81, 123,
 141–2, 156–7, 159–61,
 159n1, 163, 170–2, 184, 187,
 190–1, 200, 210, 213, 221,
 240, 252, 272–3, 277
 mental illness, 32, 45, 77, 84, 88,
 116, 143, 156, 159n1,
 211–14, 221–2
 methodology, 5, 33
 migrant women, 6, 10, 88, 135, 139,
 235–55, 266, 274, 283
 migration, 10, 235–48, 250, 252,
 274–5, 283
 motherhood, 6, 42, 57, 59, 65, 168,
 180, 182, 186, 191–9, 244–5,
 245n5, 252, 276
 mothering roles, 219

N

Netherlands, 30, 113, 119, 158, 160,
 166, 168–9, 180–1, 186, 188,
 193, 196, 197, 212, 216,
 238–40, 247, 248n6, 281
 NGOs. *See* non-governmental
 organisations (NGOs)
 non-governmental organisations
 (NGOs), 53, 114
 Nordic countries, 44, 60, 62, 77–8
 North America, 18, 26, 30, 34, 79,
 127, 157, 171
 Northern Europe, 55–6, 64, 89, 196,
 272, 277
 Norway, 76, 110, 165, 181, 242

O

OECD. *See* Organisation for
 Economic Co-operation and
 Development (OECD)
 ontological security, 130, 137, 146,
 221, 276, 279
 Organisation for Economic
 Co-operation and
 Development (OECD), 164
 orphanages, 19

P

pan European, 3, 109, 265, 270
 parenting, 10, 180, 184, 186,
 188–91, 194–6, 200, 254,
 266, 273, 277
 pathways approach, 46, 46n1. *See*
also homeless pathways
 point in time (PIT) research, 5, 33,
 47–8, 78

Poland, 7, 52, 113, 117, 119, 198,
238, 241, 244, 248–50, 248n6

Portugal, 9, 53, 77, 89, 90, 113,
118–21, 132–3, 141, 144,
146, 166, 192, 212, 267, 271,
281

poverty, 1–2, 22, 26, 34–5, 44, 63,
78–9, 86, 95, 113, 120, 122,
138–9, 162, 172, 182, 185–9,
213, 221, 237, 241, 245, 248,
250, 253, 273, 277

prevention, 94, 144–6, 169, 281–2

private rented housing, 253

prolonged homelessness, 10, 209. *See also* long-term homelessness

prostitutes/prostitution, 19–20, 22,
24, 31, 246

psychiatric treatment, 84, 192, 222

Q

qualitative research, 133, 243

quantitative research, 21, 147, 251,
283

R

recurrent homelessness, 10, 77,
82–3, 85, 97, 116, 133,
209–25. *See also* long-term
homelessness

refugees, 241, 252

relative care, 57, 59, 200, 216

risk of homelessness, 42, 44, 48, 56,
81, 84, 87, 94, 96, 110, 136,
146, 160, 183, 192, 198, 219,
253–4, 268, 273

rooflessness, 48, 50, 172

rough sleeping, 5, 47, 55, 63, 114,
119, 133, 158, 239

routes into homelessness, 9, 180,
185–7, 237, 239, 266. *See also*
homeless pathways

S

Sanctuary schemes, 144–7

Scotland, 16, 23, 89, 91, 169, 282

separation from children, 193

service provision, 10, 16, 18, 56, 62,
65–7, 83, 87, 95, 142, 146,
164, 166, 180, 196–9, 268,
270, 278–80, 283

service response, 129, 140–6,
279–80

sexual deviancy, 21

sexual violence, 31, 128

shelters, 16–18, 26, 28, 32, 34–5,
50–2, 57, 60–1, 63, 109, 134,
136, 142–3, 156, 158, 160–1,
161n2, 163, 184, 188–9,
192–5, 197, 199, 211–12,
216, 218, 220, 240, 249, 278.
See also homeless shelters

Shinn, M., 2, 22, 82–3, 134, 144,
218, 220, 266

single mothers, 58–9, 182, 184, 186,
190. *See also* lone mothers

single women, 55–7, 61, 64–5, 172,
180, 191, 266, 271. *See also*
homeless mothers; lone parents

skid row, 15–18, 20–1, 30, 32, 34–5

sleeping rough, 3, 8, 50–1, 53, 60,
109, 111, 142, 156, 172, 216,
222–3, 239. *See also* living
rough

- Slovenia, 77, 113, 118n2, 165–6, 168–9
- social exclusion, 45, 111, 187, 239, 239n3
- social housing, 45, 58, 88, 91–4, 118, 138, 198, 216, 242, 253
- social protection, 77–8, 89, 115, 121, 123, 272
- social support networks, 188–90
- socio-economic disadvantage, 78, 94, 187–9, 253
- sofa surfing, 8, 59, 110, 112, 116, 121
- Southern Europe, 7, 77, 79, 81, 90, 165–6
- Spain, 7, 58, 77–8, 89, 91–2, 113, 119, 133–5, 138, 157, 160, 162–3, 171, 192, 212, 218, 243, 267, 271
- specialist institutions, 27
- Spikes, 27, 29
- staircase approaches, 224
- state care, 57, 65, 187, 192, 199
- statutory homelessness system (UK), 56, 82
- stereotypes, 57, 66, 252, 252n9
- stigma/stigmatization, 2, 64, 129, 140, 167, 188, 193, 238, 276, 278
- strategy, 4, 53, 83, 89–90, 94, 98, 169, 197, 248
- street homelessness, 2, 47, 129, 173
- structural factors/explanations, 22, 29, 45, 61, 84, 131, 162, 180, 185–6, 200, 239, 245
- substance use, 58, 62, 142, 156, 161–2, 165, 167, 169–70, 172, 187, 192–3, 224n2, 240, 272. *See also* alcohol use/misuse; drug use/misuse
- Sweden, 31, 53, 55, 58, 61, 76, 89, 92, 113, 119, 133–6, 138, 180–2, 185–6, 192, 196–7, 212, 218, 239, 242, 247, 271
- T**
- transitional, 34–5, 49, 51, 79, 168, 211, 217, 224n2
- U**
- UK, 7, 9, 15, 27, 43–4, 46, 55–7, 59, 61, 77–8, 86–93, 110, 112–14, 118, 120–1, 129, 132–4, 137–8, 140, 143–5, 147, 159, 165, 167–9, 171, 180–1, 185–6, 188, 190–2, 194, 196, 212, 216, 220, 222, 238, 240, 243, 247–8, 271, 281
- undercounting of homelessness, 5
- under-representation, 105–24, 209, 267
- undeserving women, 272
- unemployment, 76, 94, 187, 188, 217, 236–7, 245, 249
- US, 25, 160, 161n2, 170, 189, 212, 215–16, 221
- V**
- vagrancy, 19, 22–3, 26, 27, 27n4, 30–1
- victimization, 59, 66, 134, 159, 163, 246, 252

victims of abuse, 142
 visibility, 1–3, 65, 268–70
 visible homelessness, 32, 47

W

Wales, 16, 23, 28, 89, 91, 137
 Wardhaugh, J., 2, 129–30, 220
 Watson, S., 2, 25, 29, 43–4, 46, 61,
 129–30, 137, 223–4, 268
 welfare protection systems, 2
 welfare regimes, 2, 75–6, 78–9,
 86–7, 89–90, 94, 164–5, 217,
 270
 welfare safety nets, 213
 welfare states, 7–8, 32, 42, 75–97,
 99, 196, 199, 270
 Western Europe, 241, 246, 281
 WHO. *See* World Health
 Organization (WHO)
 women-only services, 63–4, 90, 220,
 223. *See also* female-only
 services
 World Health Organization (WHO),
 128, 157