Homeless people attention in the city of Barcelona: a historic and future review
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The city of Barcelona has a long history of attention to homeless people. The city council program of attention to roofless people provides solutions for the most vulnerable situations through the provision of services and resources for the various phases of social exclusion. These devices have increased and become more diversified, adapting thus to the changes in society. At the same time, different non-governmental organizations have carried out important work throughout the years. As a result of this joint work, in 2005 the Network of Attention to Homeless People was born.

However, important challenges need to be faced, such as the implication of other protection services, especially with regards to health, and lead the fight against homelessness beyond the territorial limits of the city, involving therefore other cities and local authorities.

1.Historical background
Homeless people have been the focus of attention by politicians throughout history. Since the 15th century, most European countries started implementing measures due to the impact of urban development, in which poverty played an important role. Their main objectives were control and confinement in the charitable institutions managed by local governments (Beltrán, 1997:86).

Shelters were one of the principal assistance solutions for the poor. According to Cavillac (1975:60), these resources were a new version of the Cases de Misericòrdia (Almshouses). The difference is that beggars were picked up during the night and during the day went out to beg or to work before going back again at night. Barcelona city council started using that care approach in the 19th century. As García Roselló says, before 1936 the city had three public care institutions, two of them addressed to women (located on Cid street and at Santa Caterina market) and another one for men (found at Calàbria street). In the 40's the Valldoncella shelter opened, which would operate in the city throughout the second half of the 20th century, before being closed down in 1998 (1999:79).

In his book “An unsuspected world in Barcelona” (1945), Vilaró makes an interesting description of the begging routes and the care intervention control measures implemented in the city.

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According to the laws “Law of lazy people and villains” and “Local ordinance” (in vigour until 1979), begging was prohibited and had to be controlled, which is why cities employed various measures against it. In Barcelona, the police were in charge of this task and had a Begging Station\(^4\). A van (named “la piojosa”, “lousy”) drove through the streets following a route named “rondín” (little round), where all the beggars and indigents were picked up and distributed to specific centres of the city\(^5\). The day after picking them up, they were taken to the corresponding centres according to their situation: old people went to the Park Home; professional drifters and men and women with disabilities were housed in the industrial community Nostra Senyora del Port, passers-by were taken to night accommodation facilities, ‘accidental’ or ‘good faith’ cases (the cases were examined) and children went to the Asil de la Infància Mendiga home (Vilaró,1945: 24-25).

During the Civil War, the centres of attention to homeless people were in deplorable conditions, which is why a new resource was planned to cover all the city’s needs. The Valldonzella shelter (located at the street of the same name) was created, with a capacity for 250 people (distributed in four big rooms, two for men and two for women and children) and different services: showers, dressing rooms, washing and disinfection. People were allowed to access the shelter services by presenting cards issued by the Begging Station. This shelter provided night accommodation and food was provided through the soup kitchens placed at the Park Home (situated at Wellington street). In 1979 a second centre of attention to homeless people of the city was created: Sant Joan de Déu shelter (at Cardenal Casañas street) managed by the religious Order of the same name. Barcelona City Council agreed to contract 78 places. This resource improved the attention to homeless people, since younger people with better prospects of insertion started being transferred here.

During the eighties, social organizations focused on the attention to roofless people in the city started growing. In 1986 Arrels Foundation was created, providing attention and services to the most vulnerable people, the entrenched homeless. And during 1987, the social organization Santa Lluïsa de Marillac (from the Filles de Caritat order)\(^6\) was born, addressed to male rough sleepers in need of convalescence.

With the entrance of the first democratic city councils, an important municipal reform was launched and the ten municipal districts of the city were decentralised. According to Castiella and Serra (1998), that model generated a new policies approach based on personal services in the neighbourhoods, promoting proximity and the development of primary attention social services throughout the city. During these first years, various emerging topics were tackled and the network of social centres increased markedly in all the neighbourhoods. The primary attention social services became at the end of the eighties the core element of the State Network of Social Services in Catalonia’s first line of assistance care, attending the most vulnerable cases (Matulič, 2004). In the mid 80’s, a public intervention network, led by Barcelona City Council through the Program of Attention to Vulnerable Homeless People, was consolidated, attending the roofless and the homeless people in the city.

2. Barcelona City Council Program of attention to vulnerable people

The Municipal Program of attention to Homeless People of Barcelona City Council was born in 1985. New services tailored to people’s needs were designed, according to their disengagement

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\(^4\) At this Station, from 500 to 1,000 passers-by were picked up monthly.

\(^5\) According to data from the Station Files, 80% of beggars in public spaces used to beg as a job. The majority came from other regions of Spain (Murcia, Andalucía, Extremadura and others). One of the measures was to deport them to their places of origin.

\(^6\) The religious Community Filles de la Caritat has devoted for 35 years to attend the most vulnerable people in the city. In 1980 Sister Genoveva Masip created a convalescence service in the Barceloneta area for men in a situation of severe exclusion, which became the seed of the current institution.
phase (initial, advanced or consolidated), going beyond the care assistance view with new approaches aimed at social inclusion pathways. An educators team carried out forward planning tasks alongside the social workers of the Attention Service of Barcelona City Council (which disappeared in 1992). The social workers and social educators formed work teams, focusing on detection and treatment. At the end of the 90’s, prospecting research was launched in the different areas, requiring teams specialised in detection and prospecting. The 900 phone line was introduced to improve the information channels with citizens in vulnerable situations and agreements with private organizations who were already working in the city like Sant Joan de Déu, Filles de la Caritat and Arrels were set.

In 1987, the Permanent Office of Social Attention and Advice was created, located at Comerç street and which dealt with the city's social emergencies. This service works 24 hours a day and coordinates with the primary attention social services, available throughout the city, and the Homeless people programme.

During the period 1995-2002 the programme became more developed and consolidated: an increase of services, coordination circuits were created between the areas involved (mental health, substance abuse, police) and social organizations strengthened their ties and reached agreements. In 1995 Meridiana Day Centre was launched (a pioneer in the Spanish state) to work on socialization aspects.

On October the 28th 1998, the residential centre Can Planas opened (50 places). This centre provides integrated treatment for the residents. As García Roselló (1999) states at the end of the 20th century “a new network of public attention services in Barcelona has grown and been consolidated, with the centre Can Planas, Meridiana Day Centre, the winter shelter, the Permanent office of social attention and the Social Inclusion Service all becoming part of it; as well as the agreements with non-lucrative organizations which are increasing throughout the city” (1999:21).

During the period 2003-2005 the Programme services were diversified and improved, strengthening the bases of proximity and community attention. In this sense, the model of intervention operating in open spaces changed; the teams worked across all the city (designing maps and reports for detailed monitoring) and detection and coordination measures with the different actors such as Prevention Secretary, Police officers, Technical Services and Basic Network of Social Services were set. In that period a cooperation model between the public system and social initiatives was also consolidated, becoming the Network of Attention to Homeless People in the Citizen Agreement framework for an Inclusive Barcelona (Programa Municipal d’Atenció a Persones Sense Sostre, 2007).

Within the framework of the Social Inclusion Plan of Barcelona 2012-2015, the Citizen Agreement promotes strategy exchange, an action plan involving government bodies, companies and social organizations in order to work together towards a more inclusive Barcelona, facing together the financial recession’s social impact. The support services to roofless people are in line with the action plans outlined in the Social Inclusion Plan of Barcelona City Council approved in February 2005. This plan follows the guidelines of the European Council, which suggests tackling social exclusion from a wider point of view, facing the multi-dimensional aspect of exclusion as part of an inclusive city. The guidelines for a more inclusive city are: fostering and accessing social rights of citizens, launching positive person-centred actions, promoting social and community participation and integrating policies and network strategies. Since the Social Inclusion Plan in

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7 Academic research refers to the three types of disaffiliation phases: initial (up to 3 years without a stable home); advanced (3 to 5 years without a stable home) and entrenched (more than 5 years without a stable home).

8 This device opened in 1995, offering more places than the First Aid Centre (75 places) to cover the winter months attending homeless people and protecting them from the cold. This device is the seed of the future First Attention Centre.
2005, new synergies have been created, and services and actions have been implemented in the city.

Barcelona City Council created the Department of Support for Vulnerable People (including attention to homeless people), which currently depends on the Area of Social Rights. The current City government organisation chart incorporates in this Area Housing, Education and Health, in a way that programs and action plans can be better coordinated, to open up new perspectives on the problem of homelessness.

The structure of services and devices provided by the Department of Support for Vulnerable People responds to the objectives outlined by the public and private network of attention supporting homeless people in their different phases. The following diagram shows the structure of city services and devices:

As we can see, the network of services is divided into different attention levels. All the devices have multi-faceted teams of social workers, educators and psychologists attending people on their diverse inclusion paths. Other professional profiles such as community workers, occupational advisors or supervisors are included according to the function of each service. At the first level, we find the Outreach Services, first attention and treatment (SIS) and SASPI (Attention Service to the itinerant Galician-Portuguese Population). These services are coordinated with other first line resources like the basic social services of the geographical area (SSBT), the Centre of Social Emergencies in Barcelona (CUESB) and other social and health teams and support networks. Among them, we must highlight the task carried out by the Mental Health Teams for Roofless People (ESMESS) formed by nurses, psychiatrists and psychologists. These teams were created in 2007 (after a long fight by the professionals) and they intervene on the street, attending situations where mental health problems (severe mental illness and double morbidity patterns) have been neither diagnosed nor treated.

The Social Inclusion Service attends people and families in initial, advanced or consolidated phases of social disengagement. The service is organized into different teams: street outreach, first attention and treatment teams, formed by social workers, social educators and psychologists. The street detection teams work in every area of the city. Their intervention seeks to engage roofless people to the specific resources of the attention network and help them keep to individual support plans concerning aspects such as improvements of routines, information, orientation and monitoring of their complex needs.

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9 Currently SISFA Roma (Social Inclusion Service for Roma families with children)
The professionals connect these people to the adequate services and monitor their social inclusion process. The treatment teams are in charge of giving support to their individual inclusion pathways, working on a recovery-basis using a proactive approach. SIS has two lines of intervention: detection and social attention to the people who are on the street and management of the impact on public space. Coordinated measures have been designed between all the different city areas to tackle extreme vulnerability situations causing conflict or social concern in a multi-faceted way (educators, technical services, police…). These teams also create monthly maps of people detected on the street (ordered by area), providing a graphical vision of profiles and their evolution. The SIS detection teams’ scale of support is described in the following diagram. The Attention Services to Basic Needs turn into centres of palliative attention to stop the process of personal and social deterioration suffered by the people who sleep on the street. The City Program of Attention to Roofless People tends to offer integrated resources, such as Meridiana Day Centre, where diverse services co-exist: centre of housing accommodation for housing needs, soup kitchen, day centre and personal hygiene services.
The Day Centre services provide daytime support to homeless people, attending their basic health, social and occupational support needs, complementing that way the individual support plans initiated by the case workers. There are various private organizations in the city providing that service along with other activities.

The Temporary Housing Support Services are specialized depending on the different profiles. There are the following types of housing support:

- First attention housing support (access from the street, contact and initiation of the individual support plan), up to a three-month stay.
- Basic needs "low threshold" housing support (addressed to chronic people with little capacity to stick to individual support plans or acquire the commitment to change), up to a year stay.
- Inclusion housing support (agreeing to participate with a support plan geared towards the highest possible autonomy) up to a six-month stay.

The city of Barcelona has many public and private services that offer these social inclusion pathways through care provision aimed at promoting homeless people’s autonomy. Residential centres have grown and social inclusion flats rather than large accommodation structures have been prioritised.

The City Council has launched new devices to attend emergent demand. Among them, the Centre of Temporary Housing Hort de la Vila (sponsored by the City Council and managed by the organization Sant Joan de Déu), the social hostel Mambré (a Mambré Foundation initiative) and the Temporary Housing Centre for Families (CATF) created by Barcelona City Council (Sales, 2013).

On a second level are the Social Housing Services for Social Inclusion with Social and Educational Support. These services attend people and families with specific needs in order to finalise their social inclusion path. Barcelona City Council currently has 50 inclusion flats. People are referred there by SSBT, SIS and SASPI.

Throughout 2006 Barcelona City Council provided 1,776 places, distributed in 22 housing centres or support services in the ten city areas. This increase in the number of places and support services tailored to the Social Network according to the Citizen Agreement for an Inclusive Barcelona have contributed to an improvement in the attention to homeless people in the city at the end of the 2003-2007 period.

The Vulnerable People Department which leads the care assistance network has been able since 2007 to quantify and observe the evolution of homelessness in Barcelona using a series of instruments: city counts every three months, location maps and annual records. According to 2015 data, the places offered have been the following:
In 2008 Barcelona City Council joined the Focus Group of attention to homeless people within the EUROCITIES Social Affairs Forum (network founded in 1986 bringing together local governments of more than 130 large cities in more than 30 European countries). It operates by holding one or two annual meetings to share and discuss policies and decision-making on different topics; among them, homelessness. The homeless people Focus Group is composed by 12 members, among them a representative of Barcelona’s Attention to Homeless People Programme.

The objectives of the network are: share best practices to reduce homelessness, develop principles for quality of services and prevention and outline recommendations on local and European policies. Among the main actions carried out are: consensus regarding concepts and strategies, catalogue of the functioning of local programmes of attention to homeless people of every participant city, report about programme implementation in every city and design of a comparative instrument to detect the differences between the cities’ members –integrated chain–. Topics related to housing have also been dealt with at joint meetings with other groups; housing, migration from Eastern Europe, Housing First, etc.

3. The Network of Attention to Homeless People (XAPSLL) in the city of Barcelona

The Network of Attention to Homeless People (XAPSLL) was founded in 2005 with the objective of strengthening the organizational capacity in Barcelona. 33 associations and organizations participate in this network, accompanying homeless people on their social inclusion and recovery process. This network was launched by Barcelona City Council in the framework of the Citizen Agreement for an inclusive Barcelona. The organizations included in the XAPSLL are:

<table>
<thead>
<tr>
<th>Types of service</th>
<th>Centre</th>
<th>Places</th>
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<tbody>
<tr>
<td><strong>Reception</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Zona Franca</td>
<td>120</td>
<td>70</td>
</tr>
<tr>
<td>- Nou Barris</td>
<td>73</td>
<td>30</td>
</tr>
<tr>
<td>- Sant Gervasi</td>
<td>60</td>
<td>-</td>
</tr>
<tr>
<td><strong>Basic needs</strong></td>
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<td></td>
</tr>
<tr>
<td>- Meridiana</td>
<td>45</td>
<td>60</td>
</tr>
<tr>
<td>- Poble-sec</td>
<td>30</td>
<td>-</td>
</tr>
<tr>
<td>- Horta</td>
<td>30</td>
<td>40</td>
</tr>
<tr>
<td><strong>Inserción</strong></td>
<td></td>
<td></td>
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<tr>
<td>- Can Planas</td>
<td>50</td>
<td>-</td>
</tr>
<tr>
<td>- Sant Joan de Déu*</td>
<td>32</td>
<td>-</td>
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<tr>
<td>- Santa Llúcia Marillac*</td>
<td>34</td>
<td>45</td>
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<tr>
<td>- Llàt Pere Barnes*</td>
<td>25</td>
<td>-</td>
</tr>
<tr>
<td>- Hostels and pensions</td>
<td>100</td>
<td>-</td>
</tr>
<tr>
<td>- Hort de la Vila</td>
<td>90</td>
<td>-</td>
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<tr>
<td><strong>Accommodation centres</strong></td>
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<tr>
<td>- CAT Fàbregas 25 rooms</td>
<td>100</td>
<td>-</td>
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<tr>
<td>- Maternity centres</td>
<td>10</td>
<td>-</td>
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<tr>
<td><strong>Inclusion housing (50 housing units)</strong></td>
<td></td>
<td></td>
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<tr>
<td>- Zona Nord, Sud</td>
<td>221</td>
<td>-</td>
</tr>
<tr>
<td><strong>Housing First</strong></td>
<td>-10 housing units (RAIS)</td>
<td>10</td>
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<tr>
<td><strong>Total</strong></td>
<td></td>
<td>1.022</td>
</tr>
</tbody>
</table>

The main objectives of the XAPSLL are: denounce and raise awareness, constant analysis of the real situation, improve services and resources, definition of the support model and information exchange between professionals and services (XAPSLL annual report, 2014: 7-8).

During the first years the bases were created (objectives and goals, members which were allowed to participate, methodology and organization, as well as services and resources that should be run from all the organizations participants) and, from 2007, great progress was made, increasing the number of meetings and creating operational groups. The most important actions have been: the first night count of homeless people in March 2008; two seminars in 2009 and 2010; a catalogue of services available at the City Council website (http://vulnerables.bcn.cat/catalegxapss), a participation board of people attended by organizations, focus groups such as the Women with children Focus Group, the people in an illegal situation Intervention Group and the Night Count and Diagnosis Group of homeless people in Barcelona, among others.

The XAPSLL has also contributed considerably to different raising-awareness actions such as the Flashmob, roofless Portraits or different actions of diffusion and raising awareness in the media (radio, press and television). Various discussion groups between the XAPSLL members have been organised to improve both data collection and the organization of focus groups and fundamental topics aimed at improving the intervention with homeless people in the city (XAPSLL report, 2014).

The XAPSLL is currently increasing the number of focus groups and action plans aimed at improving attention and social awareness. These activities are possible through participatory processes with the city organizations working on this theme, as well as with other external collaborators coming from the national and international academic field. In 2015 the Housing First model was launched in the city. A Communication Group was also created in the same year, aimed at increasing diffusion of the XAPSLL activities and promoting new synergies between the organizations involved and the citizenship.
4. Intervention approaches addressed to homeless people

Barcelona is one of the European cities which has a model of attention to homeless people based on the “integrated chain” concept; that is, a group of services addressed to autonomy in a coordinated and integrated way. The system is focused on the staircase model or continuum of care, being a gradual and step-by-step based approach seeking progress, both in care provision (basic needs attention, brief temporary accommodation, temporary resource until permanent housing) and in regular social intervention. This approach is used in the majority of European countries (Busch-Geertsema, 2012) and is described in the following diagram:

Diagram 4: Staircase model of intervention in the fight against homelessness

Proximity and social accompaniment are the fundamental bases of the social intervention under this model. The proximity enables an intervention methodology based on a proactive, progressive and intensive approach. According to Funes and Raya’s definition (2001), to accompany is to progress “alongside”; sharing a common project of social inclusion pathways, complementing the community support and developing social rights, guarantee of income and support resources (Raya and Caparrós, 2014:83).

Since 2014, the city Council is implementing new action plans: some of them focused on the creation of new resources to attend people and families in entrenched situations and others oriented to new intervention models. Regarding the second proposal, Barcelona City Council is especially committed to the Housing First approach. This model focuses its attention on offering housing first, providing secondary support through professional teams, a marked difference from the staircase model where housing is the last step on the continuum of care. During 2015, through an open request for tenders, the management of two stocks of 25 apartments was awarded to a UTE composed by Suara, Sant Pere Claver i Garbet and the entity Sant Joan de Déu.

These interventions are implemented according to the guidelines of several reports by national and European organizations about homelessness (EAPN, 2013; European Comission, 2013; FEANTSA, 2013; FEPSH; 2013; Sales, 2013; Uribe, 2014). We can see it in the following diagram:

10 Housing First approach is based on the housing-led strategies and was born from a programme launched in the United States by the organization Beyond the Shelter in 1988.
Housing First implies a change in the balance of power between service providers and users (Busch-Geertsema, 2012). We are facing a new paradigm consisting of transforming the conception of the people attended and the methodology used. The model focuses on the needs expressed by the people attended, working on a multi-faceted level, on the base of principles such as proximity, maximum flexibility and the firm belief that change is possible.

The attention to homeless people in the city of Barcelona currently has two intervention approaches: the staircase model, conceived as a series of stages when accessing social support, and a Housing First model based on the right to housing as the principle core of housing exclusion support. One of the main challenges of the organizations and entities is to tailor their services and intervention models to the diverse social exclusion paths.

5. Future challenges

The attention to homeless people in the city of Barcelona has risen remarkably in the last few decades with regards to provision of accommodation and services array. The XAPSLL has been working since 2005, and there is a commitment to the use of new attention approaches based on the right to housing. But during this time a series of problems have also emerged, affecting the different services integrated in the Network. Some of these problems go beyond local competence and correspond to situations and how other services and, even, other local authorities work. In this sense, the approaches are operated on a local level, even though the transversal problems outlined make it difficult to find solutions without the intervention of other local authorities. For that reason, collaboration between municipalities must be established in order to design coordinated and comprehensive policies with regards to people, sharing common policies and objectives.

Despite the increase and diversification of resources, they are not very efficient and promote repeating patterns of intermittent access to the social care system. The system’s response is limited to some specific benefits and admissions to temporary accommodation centres which fail to provide long-term solutions. The people sheltered in centres of specialized attention with serious problems of integration, caused by health, psychological and age factors and the people in an illegal situation –to expose briefly some examples easily observed– pass through the different resources without a mid or long-term solution. It has been demonstrated that a percentage of the roofless population receive only a partial response from the current attention
services of the network. They're what we could call disaffiliated or enduring a situation of serious chronification; people who, due to a range of causes, won't reach personal and financial autonomy and who, lacking family support, will need continued support. Three groups enduring serious difficulties when tackling their situation are identified:

1.- People resistant to social attention, long term rough sleepers, with difficulties of adaptation and associated unresolved problems, preventing their adaptation to the different care centres provided by the network. There's no engagement or continuity with services, frequent abandonments for failing to respect the cohabitation rules and being unable to follow the agreements and actions of their attention plan, regular readmissions in a short period of time.

2.- People with no alternatives, who, despite their need to receive attention and care services, can't access them because these systems are saturated or because they lack some of the access requirements. Also, people recovering from illness who have no housing alternatives while convalescing; people with chronic illnesses and without support who require continuous social and health attention. To summarise, a collective of people that, once all the possible interventions are finished, can't live without support, either because of their age or personal and/or physical disability, among others.

3.- Migrants in an irregular legal situation. The problem of attention is clear: the legal situation hinders short-term solutions via successful inclusion pathways, condemning these people to a sort of social invisibility, as they have no legal rights. In these cases, the legal situation blocks effective attention strategies and reduces the support to covering basic needs: health, food and temporary accommodation. These attention frameworks create a return problem, that is, people access again and again the care system, which is incapable of breaking this dynamic. The person's inclusion through employment (a large part of them are looking for a job) is impossible due to legal reasons. If one-off attention is demanded to cover basic needs, what is the adequate attention period? If the attention provided by SIS and other accommodation and integrated attention centres is defined as temporary, as a previous step and support to inclusion, what is the best time frame in these cases? Should the legal procedures allow access to a job, income and, as a result, housing? Unfortunately, there are, by now, no answers to these questions. The reality is that undocumented people are recurrent users of the system, which fails to provide anything beyond palliative and temporary solutions, putting the person at risk of consolidating his situation.

To sum up, there are specific situations that contribute to the current attention model's failure to respond to their needs in an efficient and effective way. The conditions of users of non-transitory accommodation services or people without a defined temporality (centres/apartments) must be established to face the social needs of the people with inclusion difficulties, requiring, thus, technical criteria to set these conditions, as well as well-defined user referral channels. However, the new resources, with the exception of the Housing First approach in Barcelona, are still temporary, provisional and not tailored to these profiles. The outcomes produced by this experience need to be studied, since it could reflect the current gaps in the care intervention system.

On the other hand, certain legal requirements become expelling mechanisms, since they don't recognize people who don't meet specific conditions as having the right to receive attention. The mobility of roofless people, as they try to meet their needs, doesn't adapt to the attention policies based on geographical roots criteria. Barcelona and the surrounding cities, even the ones further afield, play the same game, but with different rules. That's why in some municipalities, the residency registration is a must to access certain types of attention, whereas in Barcelona, this registration is not always demanded. In addition, this registration can be ambiguous, as with the registration without a stable home. This formula allows the registration requirement to access attention to be invalidated: residency in the city can be vaguely proven. So, if we consider, first, that Barcelona has a dense network of attention services for roofless people, bigger and more specialized than in other local authorities and, second, a loose criteria with respect to attention
depending on a real relationship with the city, the problem doubles. In first place, the geographical unbalance of services and resources in the attention to roofless people or people in situation of extreme poverty makes Barcelona a unique city with respect to attention resources; in second place, while Barcelona applies flexible measures regarding attention criteria based on relationship and affiliation to the city, other municipalities have restrictive criteria based on residency, with registration needed to prove this residence. In this sense, all the municipalities which form the Metropolitan Area of Barcelona, which has more than three million inhabitants, should design policies to deal with this unbalance.

Another key element in the attention to homeless are the social professionals who accompany people on their social inclusion phases. The work carried out by professionals in the current services hasn’t been thoroughly examined in order to distinguish which methodologies and praxis have been used and with which results. Until now, what little research has been carried out on this problem in this city has generally been focused on the homeless population characteristics (social and demographic traits, demands, problems…), but doesn’t include an analysis of the professionals’ intervention. The professionals’ knowledge of social work with homeless people must be gathered, using the corresponding mechanisms, in order to be able to help improve new approaches and resources based on internal knowledge, and not on foreign experiences. Therefore, the types of accompaniment and intervention policies which have been successful and provided quality attention need to be examined (Matulič, 2015).

Finally, visualizing the need to include gender in the evaluation and design of social policies. Women face greater discrimination and endure different risk levels, which make them more vulnerable in homelessness situations (Cabrera, 2000; Escudero, 2003; Fernández-Rasines and Gámez-Ramos, 2013; Sales et.al, 2015). The strategies used throughout their pathways must be identified in order to prevent situations of serious exclusion (Matulič, 2016).

Considering all that, four future challenges are of great importance. Firstly, to ensure coordination of the local authorities so that the different services are united under a single action policy in the fight against homelessness with a transversal perspective of the phenomenon, without separating the person according to problem type, as that’s not possible as the person is not just the sum of a set of circumstances, but also (and especially) the connection between these circumstances. This includes not only social and health services, but for all the mechanisms linked to justice, housing and occupation policies, culture and –why not– the promotion of participation in the community and proximity policies. It’s especially important to establish a co-production of attention policies with the Catalan Health Service, especially for those cases requiring attention with a health component; and the Government Department in the case of foreigners in an irregular situation.

Secondly, unified policies between local authorities must be established mid-term through a unique action plan. On one hand, to avoid an unbalanced aggregation of services in some areas which forces people to move and uproot themselves from their natural surroundings. On the other hand, to unify a services array tailored to the needs and potential of every municipality and act on a prevention basis.

Thirdly, local authorities must be coordinated to avoid an accumulation of resources which is usually inefficient and doesn’t respond to realistic planning criteria. On one hand, the different services and centres operating in a specific network of attention need to be organised. These need to be arranged to prevent duplication and improve efficiency and effectiveness. The action plan against homelessness requires a coordinated response by local social services. The services must be organised to improve detection strategies of unattended situations, not only by the specific network of attention, but also local social services. These services must predict and warn of future homeless situations before they reach the services and centres, working preventively. In this sense, the coordination of programmes with other services of the area is fundamental, such as primary social services, which attend people and families in serious social exclusion situations.
The attention model must diversify the types of attention, with multiple ways in and an adequate distribution of resources tailored to people’s needs. Not only are residential places important to face the lack of housing problem, but also housing alternatives to the residential centres. That way, the first problem to tackle is housing. Brendan O’Flaherty (1996) and Cristopher Jenks (1997) define ‘rooflessness’ as a housing condition. “A person or family finds themself in a ‘roofless’ situation because, due to some determined circumstances, they can’t live in a better quality of housing than the place they are living in at that time”. One of the advantages of such a simple definition is that it goes beyond individual causes and focuses basically on the housing market as the source of the problem. It’s urgent to set out solutions in order to broaden social housing stock. Nevertheless, housing is not a unique and definitive solution for everybody. If the circumstances and problems that have caused people to become homeless aren't eased and are not addressed, we can’t expect that just providing a home will eradicate these problems. What’s more: in some cases, new problems are generated. Credit defaulting that affects the social housing stock, the problems of coexistence and conflicts are good examples. Because of that, the approach must be tailored to different individual circumstances. Attention based on inclusion housing that provides private facilities and community spaces could be a good option for the future.

Fourthly, it's crucial to study in depth the key elements related to professional intervention in order to identify successful pathways in the different phases of the process. Finally, research on social policies addressed to gender must be carried out in order to outline schemes and professional interventions tailored to the situation of women facing severe social exclusion. These great challenges can be met by a mutual commitment aimed at reviewing and broadening the current social policies in the city tackling the diverse situations of homelessness.

6. Bibliography


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