

Overview

Country Reports

Fourth project meeting Street Support Project, Cork/Ireland



Country reports

- CR of all partners are available + European Report
- Data collection in the countries was successful:
 - Prevalence (Homelessness, ETHOS, consumption/addiction, poverty, housing)
 - Legal frame and public order (national law and order policy, lobby interests in city centres)
 - Care system and social secure: marginalized groups
 - Regulations, guidelines and local strategies in public space (action plans: regional/local)
 - Ethical aspects, barriers, discrimination and stigma (e.g. Berlin: atonal music, benches with spikes,...)

In most countries strategies are needed for further development and “integration” or “toleration” of marginalized groups in societies and in public spaces. This is a great challenge!

Public space and nuisance

- Lack of a working definition of public nuisance in social services and interventions.
- Every country has specific regulations about order in public space
- Public opinion is a key driver / Lobbyism of shop keepers
- NO EXPLICIT strategy of inclusion or management of public space or specific guidelines to reduce public nuisance and loitering effectively (only at the local level or good practice)

Care system and support

TARGET GROUPS

- Extraordinary vulnerable groups: refugees, IDUs, homeless
- Unfilled rights to housing, health ...
- Tolerance in society vs. “personal wellbeing zones”

SYSTEM

- Organization of care system is different in the countries (from national to regional/local level, by state or NGOs)
- participative models, housing first, right to adequate housing, health are not fulfilled or acceptable developed
- Separation of homelessness and drug use and target groups
- First need – first offer principle: medical aid, housing first, survival aid as important strategies have been highlighted
- Social services are less orientated to public space/nuisance
- Social services are often not included in strategies or measures mixes (SOCIAL WORK FIRST is no principle, but high expertise in support of marginalized)
- Political tendencies of exclusion & gaps in the care system (e.g. DCRs)

Good practice: inclusive strategies

- Local actions and collaboration with legal authorities
- “soft measures”: communication and understanding also exchange with residents, mediation
- “hard measures”: repression and banning, law based
- Community work and involvement of civil society
- Education of service providers in care system as a key measure
- Outreach and focusing to public space (responsibility?)
- Peer work, human rights education, working projects as inclusive measures