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**EUROPEAN OBSERVATORY ON HOMELESSNESS**

**INTER-AGENCY WORKING**

**IN POLICIES AND SERVICES FOR THE HOMELESS  
IN GREECE**

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## **Introduction**

Co-operation among the various organisations and bodies of the Greek society is not particularly developed. Apparently, the modest tendency for teamwork seems to have become so endemic in the country that most members of the society take it for granted. In extreme cases this lack of co-operation manifests itself even between horizontal departments of the same organisation. Thus it is not uncommon to observe agencies which belong to the same public administration, not being willing, not only to cooperate, but even to allow information to be transmitted from one department to the other.

Taken into consideration the manner in which policy-makers operate in Greece as well as what could be called “local” mentality, one might rightly assume that it is the absence of systematic planning at various levels, as being responsible for confusing both the end of a campaign, as well as, the expected tasks of each of the potential contributors. In other words, the delay in planning allows the development of haphazard action and the materialisation of isolated and sporadic ventures. Here it is interesting to note that another side effect of these spasmodic actions is that more often than not, individuals that feel isolated tend to develop an illusion of omnipotence manifesting itself in pronounced reluctance for co-operation.

The battle against homelessness and the struggle to ameliorate access to housing for vulnerable social groups in general, could not evade the aforementioned underlying trend. Despite the pronounced social sensitivity of institutions dealing with the homeless, the belated development of policies and measures supporting the homeless may be held responsible for the alienation between the contributing bodies who have indeed learned to operate on their own in a field where very little has been planned for too long.

Besides, one should also note that statutory authorities have been reluctant to cooperate with NGO's and other bodies of the voluntary sector in Greece apart from those already well established like Caritas and the Red Cross. Thus ideas shaped by

novel interest groups and small scale community initiatives are confronted with uneasiness and sometimes even mistrust.

Still, despite the complaints of lack of co-operation among the bodies addressing the issue, what exactly happens has not been adequately recorded. Although the need for increased agency co-operation is recurrently been brought up by interest groups, little has been done to reduce the incidence of the specific phenomenon. It must further be noted that, apart from a few very recent exceptions, partnership working between statutory and voluntary agencies in Greece has not been supported by law.

The present paper constitutes one of the first ever attempts to appraise the level of co-operation among the various agencies involved in the promotion of access to housing for vulnerable social groups. The aim of the paper is not only to assess inter-agency working in the struggle to support access to proper housing in Greece but also to arrive to specific conclusions concerning the manner in which the level of co-operation affects the efficient delivery of services for people who are threatened by or are already experiencing homelessness.

The comprehensive approach to the issue demands the scrutiny of all levels of intervention. Thus, it is essential to consider inter-agency working at the strategic (macro), organisational (meso) as well as operational (micro) levels. In this procedure, both the planning as well as the implementation period will be included.

It is firstly important to note that on the strategic level there is no national policy to support homeless people as such in Greece. In the absence of a strategic plan to combat homelessness, the safety net for those in need consists of a number of relevant policies which have been elaborated and implemented by different central and sometimes local government agencies for specific vulnerable social groups. It must be noted that, apart from a few exceptions, as for example policies for young ex-offenders, the policy-making stage is characterised by very little inter-agency teamwork.

Being typically less bureaucratic, the lower levels of service provision are characterised by increased levels of teamwork. Thus at the organisational and operational levels, cooperation among different bodies usually occurs in the form of specialists' contribution to the various facets of the multidimensional needs of homeless people. The input of counsellors and other experts is often apparent in the

planning and, above all the implementation stage of service provision which frequently involves excessive consultation.

Naturally, a very common form of collaboration at the operational level is the link that exists between different services in order to provide the suitable solution to the users' specific needs. The outcome of such group effort may merely be in the form of a simple referral to another institution.

In view of the above, the present paper will focus on the issue of interagency working as it appears in the struggle to combat homelessness relating to specific target groups, namely:

- a. to mental health patients who are in the process of being de-institutionalised,
- b. members of the romani population in Greece who struggle for adequate housing conditions and
- c. young ex-offenders who are in desperate need for a home after leaving an institution.

The above target groups differ fundamentally in almost all their characteristics, namely their level of self-consciousness, their degree of social exclusion, even the manner in which state and local authority policy attends to their problems. Still the common link among them is their undoubted need for psychosocial and infrastructural support in order to become full members of the community. It is evident that access to proper housing is a direct prerequisite commonly shared for this end.

As these groups have differentiated needs, it is essential to relate the present review to specific data and procedures at the levels outlined above. It should be noted however that differences are not only 'inherent' but also exogenous as they depend on the approach and characteristics of the bodies who have undertaken to organise and implement their support. In fact, as the presentation that follows will show, the particular manner in which each resettlement campaign has been organised is characteristically responsible for the outcome, especially inasmuch as anticipated teamwork has been involved.

### **Mental health patients**

Greece is one of the few European Union member states that are currently undergoing what is officially called psychiatric reform. The campaign started nearly two decades ago as a reaction to the inhuman conditions in a number of psychiatric hospitals and the obsolescence of the psychiatric care system as a whole (Gionakis N., Hondros D., 2005). It is interesting to note that, at the time, there had been evidence to believe that an undefined number of people living in psychiatric hospitals were capable of resettlement in the community but had no access to a proper home. These people prolonged their stay by necessity while still having to endure the disagreeable psychiatric environment.

Thus, since the mid 80's and in line with the EEC Regulation 815/84, which funded psychiatric reform in Greece, a number of rehabilitation and community mental health services have been launched in all 9 public psychiatric hospitals in the country. The implementation of the individual programmes has been undertaken either by the hospitals themselves or by non-governmental mental health organisations. A presentation of the de-institutionalisation programmes in each hospital, in conjunction with the community services involved would amount to a presentation of the whole network of mental health services set up in Greece in recent years and falls outside the scope of this presentation. The programmes generally combine housing rehabilitation with some form of vocational training. The housing provided is either in short-stay guest-houses or in long-stay residential care hostels, with a longer term view of moving patients on to private-rented supported flats.

At the same time there have been special schemes offering vocational training, according to people's capacities, leading on to work placements, either arranged specially with employers in the private sector, or in special projects that are part of the rehabilitation programme. Long-term housing resettlement, at least in theory, amounts to the former patient being able to live - either alone or with others - in private-rented accommodation, the rent of which is covered either by a disability pension or by the earnings or other income of the patient, with the supervision and support of community mental health services, unless he/she can be rehabilitated within their family environment.

In the case of best known example in the field, the psychiatric asylum of Leros, the Department of Health funded the creation of a number of medium to long-stay residential care hostel spread all over the country, with a total capacity to

accommodate 110 patients (Madianos, 1994). The main criterion for placement in a particular hostel has been patients' place of origin prior to their hospitalisation. At the same time it has to be noted that significant steps were taken in order to upgrade the patients living conditions in the hospital itself, to re-arrange and improve the physical environment at the hospital, to attract qualified staff, to introduce various therapeutic activities, etc.

It must be noted that since its initial stages, the campaign for psychiatric reform has been characterised by a strong urge to develop and sustain peripheral institutions that will act complementary to the aims of the programme and support the patients' resettlement effort. Undoubtedly, this spread of actions among a number of different bodies is a direct reflection of the issue's composite nature. In this respect, inter-agency working is an inherent characteristic of the de-institutionalisation process.

Thus, as early as 1990, an Agricultural co-op has been established on the island of Leros employing a sizeable number of members/patients while, later, patients were moved to supported flats and guest-houses operating on the island. In addition to these, patients attended pre-vocational training programmes in order to improve their skills. This stage of the programme has asked for a certain degree of collaboration of doctors with other specialists and agencies of the voluntary sector.

Since 1997, psychiatric reform has been codified under the continuous programme 'Psychargos' which has undertaken to organise the transition from hospital to community based mental health services. The programme develops in two distinct branches, the first relates to the actions and measures that are needed to de-institutionalise patients from the psychiatric institutions and the second relates to the new structures that must develop in the community in order to cover the needs in the mental health field as these are spread across the country geographically.

The programme and psychiatric reform in general, have been supported by novel legal instruments. Law 2716/99 provided the foundations for the development of psychiatric health services in the country and set the basis for the establishment of peripheral units for psychosocial resettlement, like shelters, boarding houses and protected flats. These units should be both technically and institutionally capable of providing temporary shelter for the multitude of chronic patients who have been staying in psychiatric institutions. Thus, one of the most important objectives of the planned psychiatric reform is to develop mental health services that will aim to

prevent, to diagnose, to heal as well as to provide psychosocial resettlement to psychiatric patients.

The implementation of the first phase of 'Psychargos' took place during the period 1997-2001, while the second phase is currently being implemented and will last until the end of 2006. The programme's next phase for the period 2006-2015 will be decided after the completion of the current stage.

During the first phase, the emphasis has been placed on the actual process of de-institutionalisation. Thus as many as 66 new shelters, 14 boarding houses, 10 protected flats and several specialised units have developed across the country to house nearly 1000 former mental patients. At the same time, 35 vocational training units have been established. Thus intervention covers transitory housing, health, development of skills as well as psychosocial support. In this effort, interagency working has remained minimal apart from several noted exceptions, as for example the case of Leros.

Most of these actions and measures have been undertaken by the agencies of existing psychiatric hospitals, while the contribution of the voluntary sector and other institutions has remained minimal. Funding has generally tended to follow a similar pattern as expenditure has mainly been drawn from the hospitals' budget.

The evaluation of the initial phase of Psychargos had been commissioned to independent experts (Grove S., Henderson J., Marturini S., 2002). The overall impression of the psychiatric reform procedure has been assessed as very positive. More specifically and in as much as inter-agency working is concerned, the report stresses the significance of the development of a differentiated network of services and mental health structures in the community.

Thus, apart from the continual de-institutionalisation process, the second phase of the programme aims at the improvement of the network of complementary structures and services as well as the establishment of specialised units for target groups whose needs are not attended to satisfactorily by existing structures. These additional units will cater for the needs of people suffering from Alzheimer's disease, autistic disorders, substance abuse and especially alcohol etc.

A most important aspect of the approach adopted at this stage is the reinforcement of the contribution of voluntary organisations based on the need to develop new structures and services that will embrace the community. The voluntary sector has already been involved in the organisation of services of transitional accommodation for psychiatric patients.

Law 2716/99 provides the ground for their operation on novel grounds based on the need to support resettlement of mental patients in the labour market. The novel instrument is described in article 12 and concerns the establishment of what is termed as 'Social Cooperatives of Limited Responsibility'. These new structures aim to develop the users' vocational capacity on specific skills based on the close cooperation of public and voluntary agencies.

The necessary procedures for the establishment of these cooperatives are currently under way. As it is almost the first time ever in Greece, that inter-agency cooperation is supported by law, it is hoped that the usual bureaucratic obstacles will be overtaken in view of the need to cooperate for a well defined cause.

Being the outcome of a specific department, the Department of Mental Health of the Ministry of Health and Social Securities, the Psychargos programme and the issue of psychiatric reform in general retain the characteristics of a typically introvert campaign even though the users' needs have multifaceted characteristics. The highly centralised character of the Psychargos approach has already left its traces on its users who remain reluctant to receive novel stimuli and develop an energetic perspective to life. After several years of change, they tend to live in the same manner they used to when still in the hospital.

The long and tedious path for the final resettlement of ex-psychiatric patients has to undergo a phase in which users become gradually familiar with the outside world. From what has been analysed so far, it appears that the proposed 'Social Cooperatives of Limited Responsibility', which involve enlarged partnership cooperation, may play exactly this delicate role. The question is whether the contribution of these novel structures in the campaign for resettlement will finally be as supportive for the users as anticipated.

## **The Romani population**

The substandard living conditions as well as the never-ending inability of the Romani population for social inclusion have attracted a growing amount of concern during the last decades. The pressures that have been exerted on central and local authorities have led to the establishment of what has been called the Pan-Hellenic Trans-municipal Network for the Support of the Greek Gypsy Citizens, or else the “Rom Network”, since September 1995. The aim of the network has been to improve living conditions in gypsy settlements in Greece and to confront racism. To achieve these aims it has been essential to focus on the following issues: (a) Housing, (b) Welfare, (c) Exclusion from the labour market, (d) Lack of education opportunities and illiteracy and (e) Poverty.

The immediate obligation of the network’s members has been to provide services such as: the provision of the necessary infrastructure (water supply, sewage system) so as to improve their living conditions, sanitation, and the registration of members of the romani population in the municipal rolls.

The network emphasised the issue of housing and urged the Ministry of the Environment to accept a sizeable number of newly designed settlement layouts for specific sites across the country. These projects will accommodate existing romani communities who currently live in unsanitary conditions in precarious settlements, lacking even elementary infrastructure networks.

In order to arrive at this end, central government and especially the Ministries of Environment and Internal Affairs agreed on the funding pattern of the campaign. However, it appears that this particular phase, which involves continual co-operation between central and local government agencies, took much longer than expected.

The measures that had started to be implemented with reference to housing and the improvement of the living conditions of the Romani population in Greece are the following:

1. The establishment of temporary accommodation areas in regions considered to be ‘passages’ (reception areas). Such establishments would be created in specific areas in the regions of Menemeni, Messini, Theba, Karditsa and Rhodes during the first year. All basic requirements ensuring the amelioration of living conditions

for gypsies would be provided (water supply, sewage system, cooking utilities, electricity, and system of refuse collection).

2. The promotion of improvement works along with welfare works of gypsy encampments. These camps are estimated to be about twenty (20). Six of them will be treated as mentioned above during the first year.
3. The beginning of a study concerning the establishment of organised gypsy accommodation areas in Attica.
4. The beginning of a study to encounter the gypsy housing problem in a comprehensive manner. Preparation of a National Master Plan dealing with the issue.
5. The forming of a mobile home acquisition programme by means of proper motives, allowances and facilitation that would encounter the housing problem of gypsies in Greece. The provision of gypsy families with 200 mobile homes during the first year is the primary aim, and,
6. The establishment of in-house support centres that would advise gypsies on issues of labour, educational and health subjects. These centres would also be able to provide gypsies with social and legal support.

Apart from the improvement of the target groups' housing conditions the programme intended to cover issues relating to their Welfare, their exclusion from the labour market and their lack of education opportunities and illiteracy, such as:

- The establishment of a travelling student log book to facilitate the lessons' attendance of gypsy students whose household's heads are travellers.
- The sensitisation and further training of educators based on the principles of the intercultural education.
- The forming of a campaign to gain the attendance of a larger number of gypsy students and upgrade their education, as well as to limit the number of gypsy students out of school.
- The establishment of reception areas for young gypsies to every organised camp that would prepare them for their induction to the educational system.
- The provision of the proper infrastructure regarding gypsies' vocational training.
- The design of a systematic study and research for each predominant social and/or educational situation of gypsy youth.

- In relation to culture and sports, the preparation of Applied Arts workshops, a Greek Festival of Gypsy art, the promotion of both classic and collective sports etc.
- The design of educational and training programmes on ironwork, tin constructions, woodwork, car maintenance, agricultural works and planting works.
- The establishment of a medical observation programme that would cater for: the provision of gypsies with health books, acquaint them with welfare procedures and sensitise them so as to be regularly observed by doctors.
- The establishment of mobile units which would provide gypsies with health services.
- The design of a research programme on welfare subjects aimed at ascertaining gypsies' health condition, listing their needs, recording their views on health services and ascertaining the existence or non-existence of access to Health Services.

It is embarrassing to state that the above programme, the formulation of which has been the outcome of recurring interagency cooperation, has never materialised. Given both the objective and subjective limitations of the Greek society, it appears that the campaign to improve living conditions and to alleviate the stigmatisation of members of the romani community in Greece perhaps has been too ambitious to arrive safely at the desired end.

The programme's multidimensional character, as it appears in the above presentation, demands the persistent collaboration of a wide variety of agencies. In the context of the present paper, it is very interesting to note that probably the main reason responsible for the failure of the programme has been the inability of cooperation among the various ministries, local authorities and bodies of the voluntary sector involved.

### **Young ex-offenders**

De-institutionalisation complexities are faced not only by mental health patients under the psychiatric reform programme but also by young people leaving care homes as well as prisoners coming out of jail. Unlike the psychiatric reform programme and its organised approach to resettlement described above, the other two vulnerable groups do not benefit comparable attention. Thus, in the absence of a systematic

statutory approach, their specialized needs are either deal with by fragmented contributions of usually voluntary services or by themselves individually.

Young ex-offenders constitute a specific target group which involves additional difficulties. While in the institution they faced problems such as minimal understanding, self destruction tendencies, high levels of violence, sizeable percentage of immigrant youths, while if they are near twenty they also face the threat to finish their deed in an adult prison. Evidence shows that the majority of these people are homeless when leaving the institute, while as many as two out of three eventually end up returning after being offensive again.

The majority of young ex-offenders lack family support and have particular difficulties in getting a steady job that would allow them to pay for proper rented accommodation. Some people in the above categories may find temporary accommodation in the shelters and hostels, yet not only suitable services are few but there also exists very little provision of long-term accommodation. The only service providers currently addressing the needs of young ex-offenders are Arsis, Perissos Youth Shelter and to an extent Onissimos. Lack of funding however, an issue pertinent to NGO's of the voluntary sector, has kept the output of these bodies minimal and primarily operational despite the rising needs.

The interest in enhancing resettlement opportunities for young people has risen recently, especially in relation to the improvement of the legal framework concerning the youth. Novel legal instruments pertaining to the specific issue have been the outcome of cooperation among specialists who originate from different backgrounds such as educators, criminologists, psychologists, legal advisors etc.

The main problem concerning the legal framework related to the resettlement of young ex-offenders is that the structures that are anticipated to carry out and support its provisions have not yet developed in Greece. Thus, even though local authority agencies are required to support young ex-offenders by offering them a steady job, in practice they are unable to do so. In addition to this, the situation in reformatories is so backward that only very recently NGO's have been allowed to enter the premises in order to offer elementary tutorials to the captives. Thus although skill developing programmes and other training courses to facilitate access to the labour market are provided by law, in practice they are not allowed due to bureaucratic complexities and, above all, the reactionary attitude of the statutory authorities.

As a result, despite the favourable legislation which has been the outcome of multidisciplinary cooperation, the somewhat 350 young detainees in Greece still face a multitude of problems in the reformatory. In addition to these, they are expected to confront severe obstacles in their strife for proper insertion in the labour and housing market.

## **Conclusion**

The overview of the three different fields of intervention outlined above has revealed that interagency working in the struggle to combat homelessness in Greece is a prerequisite that is rather difficult to sustain. Although the sensitive nature of the issue is always expected to trigger the participants' eager commitment, it appears that both objective as well as subjective deficiencies of the mechanisms of the Greek society tend to arrest procedures and allow the system to stay inert.

The campaign to de-institutionalise and resettle psychiatric patients is a long term programme which is organised by the Ministry of Health. It concerns a highly centralised campaign that chiefly involves mental health institutions and allows minimal participation of other agencies. It is only during its recent stages that interagency and partnership collaboration has been implemented. In this case, one should clearly welcome the new legal instrument which promotes the required teamwork.

On the other hand, the programme to resettle and support the country's Romani population ended up remaining a collection of wishes with no realistic effect. Although the programme was the result of collective multidisciplinary activity, its implementation has been arrested both because of financial shortages, which clearly reflect the lack of the necessary political will, as well as due to the reluctant approach of statutory authorities and their unwillingness to cooperate.

Similarly, the needs of young ex-offenders have only been approached at the strategic level, again through multidisciplinary input. Nevertheless the approach has not been particularly thorough as it resulted in legal instruments that are incapable for implementation since they do not take into account the lack of the needed structures as well as the poor will of statutory authorities to materialise the provisions.

To conclude it appears that interagency working exceeds the obvious form of cooperation in which public authorities provide the voluntary homeless sector with funds, as teamwork is often apparent in consultation and policy making matters especially on the strategic level. Still there is a long way to go since certain legal instruments needed to support partnership collaboration have only recently been launched, yet only relating to specific target groups. A most persistent obstacle to teamwork however lies in the mentality of a sizeable portion of statutory authorities who are indifferent to change and still have difficulties in cooperating with the voluntary sector.

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