User influence at Section-110 accommodation facilities for homeless people in Denmark

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projekt UDENFOR is a private foundation which combines active social street work with training and research in approaches to homelessness and social marginalisation.

SAND is a user organisation for the homeless in Denmark. We provide a social and political platform for marginalized people, and actively support the establishment of tenants' councils in all hostels for the homeless

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Foreword

The background to the present survey arose in early 2006 when FEANTSA[1], the European interest organisation, created the Working Group on Participation, the object of which is to address the involvement of homeless people in decision-making processes affecting the services that they use, and through national surveys and studies, to come up with proposals for how to strengthen user influence over such services to homeless people. Further to these efforts, in spring 2006, the decision was made to investigate within which areas and to what extent user influence is exercised at accommodation facilities for homeless people in the individual European states.

To that end, Preben Brandt, Danish representative in the Working Group on Participation, contacted SAND[2] – The Danish national organisation for homeless people – and what is now the Danish Centre for Research on Social Vulnerability under the National Board of Social Services[3] with a view to coordinating and carrying out a survey of Denmark's Section-110 accommodation facilities for homeless people. For that purpose, in August 2006, a working group was created, consisting of Torben Høecke (President of SAND); Ask Svejstrup (Head of Secretariat for SAND, MSc (Social Sciences); Stine Hvid Burmølle (then trainee with SAND, BSc unpubl.), Preben Brandt (Chairman of the board of Projekt UDENFOR (English: Project OUTSIDE), MD) and Ole Elbæk (adviser with the Esbjerg branch of the Danish Centre for Research on Social Vulnerability, MA (Social Sciences and History). All representatives in the working group participated in coordinating the survey and in collecting data, while Stine Hvid Burmølle and Ask Svejstrup had overall responsibility for disseminating the results of the survey.

It is our hope and intention that this survey will contribute knowledge – nationally and internationally – concerning the nature of the mechanisms that promote constructive user influence and concerning the frameworks within which a culture of effective user involvement may be achieved at Section-110 accommodation facilities for homeless people in Denmark.

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[1] FEANTSA is an acronym for "La Fédération Européenne d'Associations Nationales Travaillant avec les Sans-Abri", a European NGO established in 1989. The some 100 member organisations of FEANTSA come from 30 European countries, and all work at national level to improve social support and accommodation services to homeless people (FEANTSA 2007).
[2] SAND – is a voluntary interest organisation working to promote user organisation among homeless people. The SAND secretariat is staffed by four salaried employees. The remainder of the some 100 staff and board members of SAND are currently or previously homeless people who work for the organisation on a voluntary basis.
[3] The Danish Centre for Research on Social Vulnerability merged with The National Board of Social Services (formerly The National Board of Specialist Consultancy and Social Services) on 1 January 2007.

1. Introduction

1.1 Homelessness in Denmark

In Denmark there is a considerable group of individuals who to a greater or lesser extent may be characterised as excluded from and by mainstream society[4]. A common trait of this group is that it comprises the very poorest and most disadvantaged individuals in society, who have difficulty availing themselves of the services and institutions offered by society (Brandt 2004: 305 ff.). According to the Danish Ministry of Social Affairs, socially excluded individuals include homeless people, alcoholics and drug addicts, people with mental disorders and prostitutes (Ministry of Social Affairs 2002: 19).

It is difficult to put a figure on the number of socially excluded individuals in Denmark, partly because to date there has been no real attempt to make a census of the socially excluded, and partly because there is considerable overlap between individuals in the different groups (Brandt 2004: 307 ff). However, estimates put the number of socially excluded individuals in Denmark in 2004 at some 50,000, of which at least 15,000 were homeless (ibid.). In that context it should however be mentioned that in early 2007 the Ministry of Social Affairs decided that a census should be conducted of homeless people in Denmark. This census was undertaken 5-12 February 2007 by the Danish National Institute of Social Research. In practice, the census was conducted by sending out a questionnaire to all relevant authorities, organisations and providers of services to homeless people in Denmark. In the questionnaire, the respective bodies were asked to provide various identifiers – including national ID no. and initials for all homeless persons they were in contact with during the census week. The results of the census have not yet been tallied, but extensive criticism of the survey's delimitation of homelessness and the methods employed in conducting the census indicate that a number of the principal organisations that provide services to homeless people have refrained from contributing to the census (Rindholt and Bay-Petersen 2007). According to the Danish National Institute of Social Research, the results of the census are expected during summer 2007.

As a distinct group, homeless people in Denmark are predominantly men, although recent decades have seen an increasing number of women joining this group. Moreover, there is much to indicate that the demographic composition of the homeless persons group has changed in the direction of more young individuals becoming homeless, and the proportion of ethnic minorities heavily rising (Tilia & Vincenti 2004).

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[4] According to Fridberg, an individual is socially excluded if he or she for an extended period is incapable of providing for him/herself in a manner acceptable to society or the individual (Fridberg 1992: 32)

1.2 Social Services Act, Section 110 – temporary accommodation provision for homeless people

Under the Social Services Act, which came into force on 1 July 1998 and was revised with effect from 1 January 2007, the Danish local authorities are under obligation to make various forms of temporary accommodation available to persons, who, due to impaired physical or mental function or extensive social problems, are unable to reside in their own accommodation (Ministry of Social Affairs (2) 2006: 36f.). In this legislation, the provisions laid down in Section 110[5] of the Act especially are aimed at homeless people: *"Accommodation facilities under Section 110 of the Social Services Act are 24-hour accommodation provisions aimed at individuals with special social problems, who do not have or are unable to reside in their own accommodation, and who have a need for accommodation provision and for provisions for enabling support, welfare services and subsequent assistance […]"* (Ministry of Social Affairs (2) 2006: 36)

The difference between accommodation facilities sorting under Section 110 and other temporary accommodation provisions for vulnerable groups is that the facilities are aimed specifically at individuals with special social problems, who either do not have – or are unable to reside in – their own accommodation, whereas the other accommodation provisions for especially vulnerable groups which sort under related sections of the Social Services Act are also aimed at individuals with physical and mental disabilities (Ministry of Social Affairs(2) 2006: 26 ff.). In the present report we will not be going into any more detail on the differences and similarities of the different types of temporary accommodation provisions for especially vulnerable groups laid down in the Social Services Act[6], but would merely make the point that the accommodation provisions aimed specifically at homeless people are those comprised by Section 110 of the Social Services Act.[7] In this report we have therefore chosen to restrict ourselves to focusing on Section-110 accommodation facilities for homeless people in spite of

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[5] As of 1 January 2007, Section 94 of the Social Services Act became Section 110 as a result of adjustments to the Act to incorporate the changes entailed by the local government reform. As such, while the Act was revised, in our view, no material amendments were made. The present survey was conducted in autumn 2006 while the accommodation facilities still sorted under Section 94 of the Social Services Act. We have nonetheless chosen to refer to the accommodation facilities as Section-110 accommodation facilities, since at the time of writing this is what they are called, and in consequence of the above we hold that our results would have been the same had the survey been conducted after the amendments to the Social Services Act.

[6] For further information about accommodation provisions for especially vulnerable groups, please see the Ministry of Social Affairs' guide no. 4 to the Social Services Act: *"vejledning om botilbud mv. til voksne"* (Guide to accommodation provisions, etc. for adults) (Socialministeriet (2) 2006).

[7] The Social Services Act (effective as of summer 1998) together with the Legal Protection Act directed focus at user involvement as opposed to former institutionalist concepts. What had previously been referred to as 'institutions for the homeless' and which consisted of shelters, reception centres and boarding-houses were now designated Section-94 accommodation facilities (the present Section-110 accommodation facilities). The terms shelter, reception centre and boarding-house have not disappeared from discourse on homeless issues, and nor have the different practices that distinguish these three types of accommodation provision either. In the present report we therefore distinguish between the different types of accommodation provision, and point out some of the relevant differences.

the fact that homeless people also stay at other types of temporary accommodation facilities which sort under other sections of the Social Services Act (Ibid.).

According to *"Vejledningen for Lov om social service"* (Guide to the Social Services Act), the object of accommodation provisions for homeless people is for residents, during their stay, to receive tenancy sustainment training with a view to *"preparing them for an independent existence in mainstream society"* (Ministry of Social Affairs 1998: 72). After moving out of the temporary accommodation facility, the residents are to be offered support and assistance with the aim of *"improving their situation in life and thereby increasing the prospects for their integration into mainstream society"* (ibid.).

The Social Services Act contains no definition of the maximum duration of a *temporary stay* and the "Guide to the Social Services Act" sets out that the determinant for the duration of the stay is fulfilment of the object of the stay and the capacity of residents to manage, after their stay, without the support provided in the temporary accommodation facility (Ministry of Social Affairs 1998: 71). In practice, the duration of each individual resident's stay at a Section-110 accommodation facility differs greatly. In 2005, the average individual stay was 39 days, while stays of 2-5 days accounted for 17% of resident enrolments at the facilities. Further, 11% of the stays lasted more than 120 days, of which 2 per cent were stays for an entire year (National Social Appeals Board, 2006).

During 2005, 7,291 different individuals were living at a Section-110 accommodation facility (then Section-94 facility) for short or long periods. A relatively large proportion of these individuals used the accommodation facilities several times in the course of the year. 4,540 were enrolled once, 1,161 individuals were enrolled twice, while 1,590 individuals were enrolled at least three times a year (ibid.).

Three-quarters of the residents were men, and one quarter were women. The average age of the residents was 41.2 years, with the average age of the men slightly higher than that of the women. Of the enrolled users, 77% were Danish nationals, while just 1% were nationals of another EU country or another Nordic country and 6% of registrants were nationals of countries outside of the Nordic Region and the EU (ibid.).

1.3 User involvement in Denmark

Within the past ten years, the political agenda in Denmark has been characterised by growing interest in and increasing demands for user involvement in the public sector. In the domain of social policy this saw the former Social Assistance Act replaced in 1998 by three new acts: the Active Social Policy Act, the Social Services Act and the Legal Protection Act. Common to these acts is that they are designed, among other things, to ensure user involvement in public provision for society's most vulnerable groups. The introduction of these acts saw the

requirement for user involvement become a reality; a requirement which actors at all levels engaged in social policy work must observe and act in conformity with.

Under Section 16 of the Social Services Act[8], local authorities are required to lay down guidelines to ensure that residents at Denmark's Section-110 accommodation facilities are guaranteed influence on the organisation and utilisation of the facility's provisions, services and other conditions of significance for residence and daily life at the facility (Ministry of Social Affairs(4) 2006: 30)[9]. In addition, Section 4 of the Legal Protection Act[10] is intended to ensure that each individual resident has the opportunity to get involved in programming his/her stay at the Section-110 accommodation facility, and the subsequent stages the resident undergoes after staying at an accommodation facility (Ministry of Social Affairs, 2000).

However, studies to date indicate that user involvement at Denmark's Section-110 accommodation facilities is fraught by conflicts and dilemmas arising out of discrepancies between the management's and the residents' wishes and needs (Tilia 2002). This is unfortunate, since the individual's right to self-determination – and thereby the opportunity to create a satisfactory existence for him/herself – serves to enhance quality of life and the sense of having influence to a greater extent than do material and residential circumstances (Thomsen 2002: 28).

1.4 Clarification of concepts

In order to facilitate understanding and allow the reader to address the issues set out in the present survey, in this section we clarify the most essential and prevailing concepts used in the report.

1.4.1 Homelessness in Denmark

It would appear that it is not possible to arrive at a generally accepted definition of homelessness in Denmark. In all attempts to date to define and delimit the concept, elements or individuals have cropped up which the concept should, but has been capable of, including (Svendsen-Tune 2002). One explanation for this might be that for the last century, attempts to account for the causes of and mechanisms underlying homelessness have been made in terms of a continual interplay between, on the one hand, predominantly structural factors such as the

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[8] Section 16 of the Social Services Act: "*the municipal authority shall ensure that the users of services under this Act are able to influence the organisation and use of those services. The municipal authority shall set out written guidelines for the user influence.*" (Ministry of Social Affairs (1) 2006: 30)
[9] As of 1 January 2007, operation of the vast majority of accommodation facilities for homeless people was transferred from the counties to the local authorities as a result of the local government reform. Consequently, for many years, it was the counties who were responsible for operating the facilities or for concluding operating agreements with privately owned facilities. Although the counties – in a similar way to the local authorities today – were able to prescribe guidelines for user involvement, in practice, it was left to the individual facility to interpret the law and ensure user influence in daily life at the facilities.
[10] Section 4 of the Legal Protection Act: "*The citizen shall have the opportunity to contribute to be handling of his case. The local authority and county shall coordinate the processing of client cases in such a way that citizens are able to avail themselves of this opportunity.*" (Ministry of Social Affairs, 2000).

rate of unemployment and a shortage of housing, and on the other hand, predominantly individual factors such as negative personal development, addiction and inadequate childhood care (Järvinen 1993: 17ff.). Nowadays, the majority of those who deal with homelessness appear to agree that the phenomenon arises in an interaction between structural and individual factors, in that they mutually cause and reinforce homelessness. This means that the concept of homelessness today has to be defined in very broad and unspecific terms in order to include all the aspects that cause homelessness. According to Järvinen, the consequence of this is that the concept has become relative and flimsy. She maintains that all attempts to define homelessness are based on social constructs, and that there is no single logical or obvious way of defining homelessness (Ibid: 16, 42). But this is not to say that researchers should refrain from defining homelessness. Paradoxically, the very fact that homelessness is difficult to define is what makes it so important to delimit and define in precise terms when researching homelessness. Without an explicit definition of the concept, it is impossible to evaluate and compare different studies of homelessness (Järvinen 1993: 42f). According to Tobias Børner Stax, there is a tendency for homelessness to be defined either in relation to where homeless people stay or the personality traits and psychosocial problems that characterise individuals classed as homeless (Stax 2001: 66ff).

Based on this categorisation, FEANTSA's definition of homelessness comes under the first of these categories. According to FEANTSA individuals are homeless if they:

- *are roofless*
- *are houseless*
- *are living in insecure accommodation or*
- *are living in inadequate accommodation*

(FEANTSA 2007).

However, according to legislation on accommodation provisions for homeless people in Denmark and the manner in which Denmark regards and articulates homelessness, FEANTSA's definition lacks subtlety. We have therefore chosen to use Preben Brandt's definition of homelessness from 1992, since this reflects many of the aspects that characterise our view of homelessness in Denmark anno 2007.

"A person is homeless if that person does not have a home that may be regarded as stable, lasting and meeting that person's requirements for a reasonable standard of accommodation. This coincides with that person's incapacity to avail him/herself of society's relationships and institutions in the broadest sense – that is, familial, private and public networks of any kind whatsoever, since the reason for this may be evident or less evident circumstances in the individual or in the manner in which society is arranged." (Brandt 1992)

10

This definition includes all the angles of homelessness upon which FEANTSA's definition is based. But it also reflects the difference between the concepts of houseless and homeless in that it asserts that an individual can be homeless in spite of the fact that he or she has accommodation, if the homeless person is unable to feel at ease in that accommodation or the accommodation does not meet a number of minimum criteria. The Brandt definition also takes into account the complexities of homelessness by referring to the incapacity of homeless people to avail themselves of society's relationships and institutions, and finally asserts that the causes of homelessness can be attributed to both individual and socially-induced factors. Moreover, the homeless people who took part in the present survey, were staying at Section-110 accommodation facilities. According to Section 110 of the Social Services Act, the intention of these facilities is for them to function as temporary accommodation provisions for *"[…] individuals with special social problems who do not have or are unable to stay in their own accommodation […]"* (Ministry of Social Affairs (2) 2006: 36). All things being equal, these individuals can be said to sort under Brandt's definition of homelessness. Geerdsen et al. (2005) goes so far as to assert that the delimitation of homelessness on which Section 110 is based, draws heavily on Brandt's definition of homelessness (Geerdsen et al 2005: 15f).

In effect, the above means that when we refer to the concept of homelessness in this report, it covers more than the simple fact of having no home. Homelessness should instead be understood as symptomatic of a more complex problem – one that often arises and exists in an interaction with factors such as mental disorders, a lack of social networks, violence and alcohol/drug dependency.

1.4.2 User involvement and user influence

Our survey is based on Ole Thomsen's definitions of the concepts of "user involvement" and "user influence". According to Thomsen, besides the act of implicating a user, the concept of **user involvement** entails engaging the user to participate or occupying the interest of the user (Thomsen 2002:16).

In the present survey, our use of the concept of user involvement covers those conditions at the accommodation facility which management decides officially to allow the residents to get involved in.

User influence, according to Thomsen, is where the user has a say on something or has an impact on something. One condition for user influence is that the users are actually able to become part of something, that they know what they can become part of and how this can be achieved in practice (ibid.). In the present survey, the concept of user influence comprises the active involvement of residents which is facilitated by and arises out of the parameters for user involvement which management defines. In other words, user influence is what occurs when

residents choose to avail themselves of the opportunities for user involvement that exist within a given area.

As a logical consequence of the above, user involvement is thus a precondition for the possibility of exercising user influence.[11].

In the practical work on user involvement and user influence it is however important to bear in mind that both concepts are relative. It is thus not meaningful to conclude black on white whether user involvement and/or user influence occur at a given accommodation facility. In order to arrive at a viable evaluation of the activities that take place and in order to be able to compare user involvement/user influence at several different accommodation facilities it is however meaningful to investigate *to what degree or in what form* the two concepts occur.

In our operationalisation of the concepts we have opted to apply the scale for different degrees of user influence employed by the National Association of Activity Centres (drop-in and counselling centres for socially vulnerable individuals, including alcoholics and drug addicts) (National Association of Activity Centres, 2005:18). Figure 1.1 is an illustration of this scale. As the figure indicates, various forms of user influence may be ranked on a scale with "informed" and "self-determination", respectively, at the two extreme ends of the scale. These two extreme ends of the scale lie beyond what would normally be characterised as influence. It follows that influence is what lies between having no say at all and making unilateral decisions.

Figure 1.1: Degrees of user influence

| Informed | Consultation | Involvement | Co-determination | Self-determination |

No influence   **Full influence**
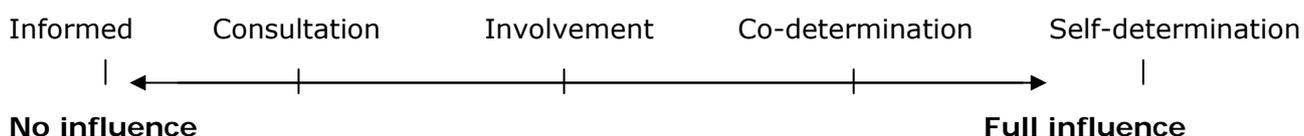
(Source: National Association of Activity Centres, 2005)

Between the extreme ends of the scale, we have the concepts of "consultation", "involvement" and "co-determination". "Consultation" covers the residents' right to express their opinions; "involvement" comprises dialogue between staff and residents concerning what matters to the users, while "co-determination" refers to residents engaging in decision-making processes (ibid.).

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[11] Based on the above definition of terms, it is *user influence* that we will investigate in this survey, inasmuch as we will focus in the following on the influence that is exerted in practice in the country's Section-110 accommodation facilities. Had we alternatively opted to investigate *user involvement*, we would have focused on the management's intention for and willingness to involve the residents in different conditions at the accommodation facility. We would thus have investigated what influence the residents could, from a theoretical standpoint, have exerted on the accommodation facility.

In our operationalisation of the concepts we have however opted to extend the extreme end of the scale for low influence by adding the concept of "uninformed". The rationale for this is that we maintain that the original extreme end ("informed") in itself forms the basis for exercising influence and should therefore not be off the scale. We have also chosen to make the scale stricter by adding the concept of "dialogue" which covers what LVS distinguishes between in the concepts of "involvement" and "consultation". In our survey, the concept of "dialogue" thus covers the act of expressing one's opinion and engaging in dialogue. Figure 1.2 illustrates the scale applied in this survey to operationalise user involvement.

Figure 1.2: Scale applied in operationalising user influence

Not
Informed   Informed   Dialogue   Co-determination   Self-determination

No influence   **Full influence**
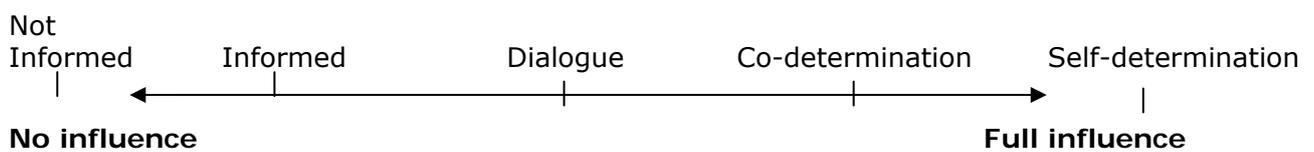
1.4.3 Programming of personal development plans

In the survey, we operationalise user influence at Denmark's Section-110 accommodation facilities on the basis of 8 different areas (see Section 2.2.1 Compilation of quantitative questionnaires), one of which we refer to as "Programming of personal development plans". However, this concept requires amplification. When a citizen is enrolled at a Section-110 accommodation facility there is a statutory requirement for that resident to undergo a personal development plan, which essentially entails that the resident is to resolve whatever problems he or she may have and engage in a process aimed at (re)integration into mainstream society. The resident typically has an addiction problem, mental problems, lacks a place to live and is unemployed at the time of enrolment at the facility. These problems must be mapped so that a number of initiatives may be instituted within a manageable timeframe to remedy the problems.

"On enrolment at a Section-110 accommodation facility, the usual practice will be to draw up a programme for the residency in which, in dialogue with the resident, goals are set for what is to be achieved during the residency at the accommodation facility and what support the facility is able to offer in order to achieve those goals."
(Ministry of Social Affairs (2) 2006: 37)

What we refer to in this report as a plan for the resident's personal development plan ["*udviklingsforløb*"] is referred to by some as a"residency plan" ["*opholdsplan*"]. In using the term "personal development plan", our intention is instead to emphasise the comprehensive

13

aspect described by the Social Services Act: A residency plan cannot stand alone, and must be coordinated with a programme of action lodged with the local authority, which is a more general plan for the citizen which might for example comprise proposals for debt relief and adult education. The residency plan must also be coordinated with a job plan in order to establish a coherent and comprehensive programme to encompass employment, accommodation, personal finances, drug/alcohol rehabilitation, etc. (Ministry of Social Affairs (2) 2006: 37). Under Section 4 of the Legal Protection Act, a resident is to have the opportunity to participate in the programming of this plan. In relation to the residents' stay at a Section-110 accommodation facility, this means, more specifically, that the residents – by law – are to be involved in programming their personal development plan, which is drawn up by staff following the residents' enrolment at the Section-110 accommodation facility.

1.4.4 Empowerment

The concept of empowerment reflects the importance of being actively involved in one's own life. Active participation in matters and processes that are of importance for the individual promotes the individual's sense of satisfaction with and control over his or her own life. According to Minkler et al. (2002), empowerment may be defined as follows:

"A *social action process for people to gain mastery over their lives and the lives of their communities"* (Minkler et al. 2002: 288).

As indicated by the definition above, empowerment is a sense of power and control over one's own life that is achieved and reinforced through active participation in social processes that affect a group of individuals with common interests or characteristics (ibid.: 282)[12]. According to Minkler et al., both the process and the results of social participation are key to empowerment of the individual. The social effort to achieve those common interests is what enables the individual to achieve a greater sense of self-confidence and control over his or her own existence, and to gain insight into how both social and political processes in his/her context may be influenced (ibid.: 289).

The principle of empowerment is singularly important and pertinent in work with socially vulnerable groups, including homeless people. In empowerment-based social work, the focus is on the importance of involving and engaging socially vulnerable individuals in matters that are of importance and relevance for their situation in life. This is founded on the thinking that in work with vulnerable groups it is essential for the contextual society to cease to perceive and treat vulnerable individuals as "*helpless victims of the injustices of life*" (Cohen 1989, paraphrased), as this provokes and locks the individual in a sense of powerlessness (ibid.).

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[12] According to Minkler et al., the term "community" does not necessarily cover a geographically delimited area, but rather what might be elaborated as a "commonality of interests". A community may thus be constructed around shared interests or characteristics (Minkler et al. 2002: 282).

Instead, as a society, we must strive to demonstrate our confidence in individuals in vulnerable groups by giving them responsibility for matters that relate to their own needs and situation – and thereby increase their sense of mastery of their own lives (ibid.).

1.5 The survey's general objective

The objective of this survey is, as mentioned, to map the areas in which and the degree to which there is user influence at accommodation facilities for the homeless in Denmark. This information may assist in creating a common European basis for comparison of user influence in the area of homelessness, as well as a forum for exchanging national experiences of user influence among the homeless.

This problem is also relevant to all actors who are concerned with user influence in the area of homelessness, since increased knowledge of this area will help to improve future user involvement and, concomitantly, the daily lives and quality of life of society's most vulnerable individuals.

Since there are many examples of and theories about socially vulnerable individuals' empowerment being strengthened through active participation in social processes relevant to their life situations, in the working group we considered that it would also be relevant to investigate the extent to which user influence at Section-110 accommodation facilities for the homeless can be categorised as a determinative factor in strengthening and improving empowerment of the homeless as a group in Denmark.

1.5.1 The survey's specific objectives

In the following, the problems set out above will be elucidated on the basis of an operationalisation of the following focal points:

- What degree of user influence exists within different areas at Section-110 accommodation facilities, and is there agreement between the degree of user influence experienced by, respectively, the residents and the staff within the individual areas?
- Which areas do the residents and staff, respectively, identify as being the most important for user influence?
- Is there agreement between which areas the residents rate as being most important to have influence over and which areas they have the most influence over in practice?
- Is there a correlation between the degree of user influence at Section-110 accommodation facilities and the residents' satisfaction with their daily lives at the accommodation facilities?
- How do managers and residents, respectively, experience the phenomenon of user influence at the Section-110 accommodation facilities and is there a correlation between user influence and empowerment?

In relation to the problem as formulated above, we have opted to restrict the focus of this report to cover exclusively the *collective* user influence that takes place at the country's Section-110 accommodation facilities. In practice, this means that we do not concern ourselves with the *individual* aspects of user influence – influence in individual matters – as represented in Section 4 of the Act on Legal Protection and Administration in Social Affairs ("Legal Protection Act") (see section 1.3 User involvement in Denmark).

2. Materials and methods

For the survey we used a methodological triangulation between quantitative and qualitative methods to examine our problem. Since quantitative research is suited to revealing the frequency, intensity and distribution of a phenomenon in a group of individuals, this was an obvious method to use to investigate the aspects of the problem that related to where and to what extent user influence was exercised at the Section-110 accommodation facilities. At the same time, user influence at accommodation facilities for the homeless is a relatively new phenomenon, about which there is limited knowledge. This spoke in favour of employing a qualitative phenomenological method to elucidate the problem, since this provides a *"detailed description of the structure and structural variations in the consciousness for which each and every object, event or individual appears."* (Giorgi 1975: 83, paraphrased), and is therefore an obvious method to use to achieve in-depth insights into a phenomenon. Moreover, one of the aspects of the problem was to investigate the residents' *experience* of user influence and its associated effects, which is precisely this phenomenological method's forte (ibid.).

2.1 The survey's quantitative aspect

This survey's quantitative material consists of 279 questionnaire responses collected at 36 Section-110 accommodation facilities for the homeless in Denmark from 23 October to 6 December 2006. At each accommodation facility, one manager, one member of staff and 5-10 residents were given a questionnaire to complete. The survey was anonymous and the subjects were selected randomly[13] in terms of gender, age, ethnicity, physical appearance, etc.

2.1.1 Compilation of quantitative questionnaires

In order to identify relevant parameters to reflect the user influence that exists at Section-110 accommodation facilities for the homeless in Denmark, we performed a comprehensive literature review of Danish studies dealing with conditions and dilemmas at Section-110 accommodation facilities for the homeless, and the residents' experiences of user influence. In addition, one of the members of the working group undertook some brief fieldwork[14] at a Section-110 accommodation facility in the Copenhagen area, in order to observe a concrete example of how user influence is organised in practice and how residents, staff and managers perceive and relate to this phenomenon. On the basis of the above, and the working group's long-standing involvement in user organisation at accommodation facilities for the homeless,

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[13] The accommodation facility managers were, for obvious reasons, not selected randomly, since there was most frequently only one manager at the accommodation facilities.
[14] The fieldwork consisted of 7 visits to a Section-110 accommodation facility in the Copenhagen area, which each lasted between 4 and 7 hours. The visits were carried out between 29 September and 15 November 2006. The fieldwork consisted of a combination of observation and discussions with residents and staff at the accommodation facility.

we confined and refined the survey's focus to cover only the most essential aspects of user involvement. In extension of this, we formulated a number of hypotheses which provided the foundation for the design of the questionnaire.

2.1.1.1 Pre-testing and pilot testing of the questionnaire

With a view to optimising the questionnaire's validity, we carried out pre-testing and pilot testing of all questions in the questionnaire. The pre-test included a total of 11 people, of whom three were former residents of a Section-110 accommodation facility, who, by virtue of this, had an insight into the terms and discourse which are used in the homeless environment for the phenomena we wanted to investigate. Three other participants in the pre-test had experience of homelessness through user-related work with the homeless and the accomplishment of scientific studies with the homeless as a target group. The remaining 5 pre-test participants were MSc students of public health programmes at the University of Copenhagen. This latter group was able to contribute primarily through criticism of the questionnaire's design, layout and the wording of questions.

We performed the pilot test with a group of 8-10 currently and formerly homeless people from the Danish Red Cross activity centre for the homeless in Northwest Copenhagen, and two managers of two different Section-110 accommodation facilities in the Copenhagen area. The pilot test with the current and former homeless people was carried out in the café at the Red Cross activity centre, while the pilot test with the managers was carried out at their offices in the two Section-110 accommodation facilities.

2.1.2 Operationalisation of the problems identified

The degree of user influence was operationalised on the basis of 8 questions, designed to elucidate the degree to which the residents experienced having influence within 8 different areas:

Question 9: Which of the following statements best describes the residents' influence on which recreational activities are on offer at the accommodation facility?

Question 10: What influence do the residents have on decisions about the food which is served at the accommodation facility?

Question 11: What influence do the residents have on the arrangement of common rooms in the accommodation facility?

Question 12: What influence do the residents have on the accommodation facility's house rules?

Question 13: What influence do the residents have on planning of the accommodation facility's budget?

Question 14b: What influence do the residents have on the programming of their <u>personal development plan</u>?

Question 15: What influence do the residents have on when the accommodation facility's <u>staff are available</u> to the residents (the staff's working hours)?

Question 16: What influence do the residents have on the <u>work tasks</u> they are to perform while they are living at the accommodation facility?

The response categories to these questions consisted of multiple choice statements which operationalised our scale of different degrees of user influence (see section "1.4.2 User involvement and user influence" and "Appendix 1: Questionnaire").

Questions 17 and 18 in the questionnaire aimed to operationalise the residents' and the staff's rating of the *importance* of user influence within the 8 same areas used to shed light on the degree of user influence. These questions were:

Question 17: How important do you think it is for the residents to have influence over the following areas?

Question 18: In which <u>3</u> of the following areas do you think it is <u>most important</u> for the residents to have influence?

The residents' satisfaction with their daily lives in the Section-110 accommodation facility was operationalised through these questions:

20: Within the last fortnight, how satisfied have you generally been with your everyday life?

21: How often do you feel you are in a position to achieve the goals you set yourself?

22: How often do you feel accepted by the other residents at the accommodation facility?[15]

23: All in all, how satisfied are you with living at the accommodation facility?

The other questions in the questionnaire were asked in order to monitor the extent to which the background factors of gender, age, education, ethnicity, length of stay at the accommodation facility, number of years of homelessness and feeling of acceptance by other residents affected the residents' experience of user influence and/or their satisfaction with their everyday lives at the Section-110 accommodation facility (see Appendix 1: Questionnaire).

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[15] Question 22: In connection with the subsequent scale design of an overall measure for the residents' satisfaction with their daily lives at the accommodation facility, Question 22: How often do you feel accepted by the other residents at the accommodation facility? was excluded and incorporated subsequently as an independent background variable in the analysis (see "2.1.4.2: Scale design and summing of variables").

2.1.3 Issue and collection of the questionnaires

At the start of 2006, shortly before data collection commenced, we sent out a letter with a description of the project's aims and methods to all managers at the country's Section-110 accommodation facilities. This description was accompanied by a poster which we asked the managers to put up in the accommodation facilities, so that both residents and staff would be informed of the project and that between 23 October and 6 December 2006 we would be visiting all the Section-110 accommodation facilities, bringing with us questionnaires which we would be inviting residents to complete. Immediately before these visits, we phoned the individual accommodation facilities to announce our arrival. The collection of the quantitative data was done by one or more project representatives supplying questionnaires, during the visits, to the residents, staff and managers and then collecting the completed questionnaires.

We judged that it would raise the quality of the survey material if one or more representatives of the survey were present to guide and assist the residents in their responses, where individual residents demonstrated a need for such help. In practice, this means that some of the residents completed the questionnaire themselves, while other questionnaires were completed as structured interviews. [16] The questionnaires that were completed without our assistance were examined by the survey representatives on collection, with a view to checking that they had been correctly completed[17]. Where this was not the case, the residents were notified of the errors/omissions and asked to correct them. These procedures were carried out exclusively with a view to increasing the number of usable completed questionnaires, so that the greatest possible number of responses could be included in the subsequent analysis.

In order to optimise the survey's response rate, we made every effort to collect all the completed questionnaires from the residents and the managers and staff during our visit to the accommodation facilities. If the staff or manager were either too busy or absent during our visit, we left the questionnaires and a stamped addressed envelope in their office and asked them to return it to us within a week. No residents were offered the option of sending in their completed questionnaires.

We ensured that all responses were anonymous, so that none of the respondents could subsequently be identified. In practice, this meant that we noted the *accommodation facility's name* on the outside of the residents' questionnaires, so we could identify which

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[16] Structured interviews refer in this context to a representative of the survey reading aloud all the questions and their response categories to the resident who then decided which response category he/she found most appropriate.
[17] The expression "correctly completed" refers to the extent to which the respondents have put the number of crosses specified for each question, and whether all relevant questions in the questionnaire have been answered.

accommodation facility the individual residents' responses came from, but we omitted any form of registration of the managers' and staff's responses[18].

In total, 14 survey representatives took part in the issue and collection of questionnaires. These were either members of SAND - the national organisation for homeless people[19] - or employees of either SAND or the Esbjerg branch of the Danish Centre for Research on Social Vulnerability. In order to make the collection procedure and assistance in completing the questionnaires as cogent as possible, we prepared a set of guidelines, which all representatives of the survey were closely instructed to adhere to.

2.1.4 Processing of the data

The statistics program SPSS, version 13.0, was used for all quantitative data processing. This included data input, cleaning, recoding and analysing.

2.1.4.1 Data input procedure and criteria for inclusion in the survey

Before we started data input, we decided that, in order for their responses to be included in the survey, the respondents had, as a minimum, to have responded to 4 of questions 9 to 16 inclusive, concerning the degree of user influence within the 8 different areas, and at least one of questions 17 and 18 which dealt with the importance of user influence within the 8 different areas. This was because these questions were essential for elucidating the general purpose of the survey.

Since a relatively high proportion of the respondents in our survey population had difficulty understanding and complying with the instruction to put only one cross next to each question in the questionnaire, we decided that respondents who had put more than one cross in response to questions which specified placement of a single cross – and where this was not corrected during collection of the questionnaires – would be recorded with the highest ranking response category[20]. We similarly chose the highest ranking response category in those cases where the respondent had put the cross between two response categories.

In question 18, the respondents had to state which 3 of 8 possible areas they rated as most important to have user influence over. If the respondent put fewer or more than 3 crosses in answer to this question, the response was coded as missing.

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[18] Since only one manager and one staff representative at each accommodation facility were to complete the questionnaire, it would have been an indirect breach of the guarantee of anonymity, if we had put the accommodation facility's name on the managers' and staff's completed questionnaires.

[19] As mentioned previously, all members of SAND are currently or formerly homeless people. This means that 9 of the 14 people who participated in collecting data are currently or formerly homeless.

[20] This is of course only meaningful in those cases where the variable was at least ordinal in nature. In other words, when there was a systematic question of degree between the possible answers in the response category. If a respondent had put two crosses where a nominal variable applied, such as stating he/she was both male and female, this was coded as an erroneous response.

2.1.4.2 Scale design and summing of variables

Our analysis includes a scale which measures the total degree of user influence at Section-110 accommodation facilities. This scale was based on 8 variables for the aforementioned 8 questions each of which measures the degree of user influence within a given area at the accommodation facilities (questions 9-16). Each of these variables was coded with response categories, which assumed values from 1 to 5, where 1 expressed the lowest degree of influence ("Not informed") and 5 the highest ("self-determination"). The scale was based on a summing of the values for the different variables and, on the basis of the average values of these, the respondents were placed in the categories "low", "medium" or "high" degree of involvement.

Using Cronbach's alpha, we constructed a scale for "Satisfaction with daily life at the accommodation facility". This scale was to cover questions 20, 21 and 23 in the questionnaire, while question 22 was excluded from the scale and was instead included in the analysis as an independent background variable. On the basis of this scale, the respondents were assigned to the categories "low", "medium" and "high" degree of satisfaction using the same methodology as in the scale "Overall degree of user involvement" as described above.

2.1.4.3 Statistical significance tests

In the analysis of the quantitative data we used general two-sided Chi-square tests and Gamma tests and worked on the basis of a significance probability of 5%.

2.2 The survey's qualitative aspect

The survey's qualitative material consists of 4 semi-structured phenomenological interviews with two managers and two residents' committee representatives from two different accommodation facilities in the Copenhagen area. All the interviews were carried out between 24 October and 17 November 2006 and lasted between 35 and 60 minutes.

2.2.1 Preparation of an interview guide

Our qualitative interviews were based on a semi-structured interview guide constructed partly around aspects and correlations we wished to elucidate, including primarily the relationship between user influence and empowerment, and partly around the themes that, in connection with the fieldwork and discussions with various residents, we had identified as relevant and significant for the individuals in the target group. According to Kvale, it is important to undertake such fieldwork before conducting one's qualitative interviews, since one thereby establishes familiarity with the local language, the local routines and the power structures which manifest themselves in the environment where the research is to be conducted. The

researcher thus arrives at a sense of what factors the interviewees see as relevant to discuss in the interview (Kvale 1997: 103).

2.2.2 Selection of informants and conducting of phenomenological interviews

We recruited our interviewees from 2 different accommodation facilities in the Copenhagen area which are known for working ambitiously on user influence. The appointments with the informants were set up by phoning the respective accommodation facility managers, who both consented to take part in the survey. We asked the accommodation facility managers to find a residents' committee representative able and willing to participate as an informant on the agreed interview day.

The four interviews were all carried out at the accommodation facilities in private, with only the informant and two interviewers present. All four interviews were conducted by the same two interviewers. During the interviews, the informants were asked to describe one good and one bad experience they had had of user influence at the accommodation facilities. In order to optimise the internal validity, the interviewers posed elucidatory questions during the interview and asked the informants to describe what circumstances pertaining to their experiences had made these good and bad, respectively, and what feelings the experiences had evoked in them. The interviewers also strove throughout to repeat the informants' descriptions of their experiences, in order to ensure the best possible correspondence between the informants' descriptions and the interviewers' comprehension of them.

2.2.3 Transcription and analysis of the interviews

All the interviews were recorded by dictaphone and transcribed on the spot. The transcriptions were made word-for-word, such that pauses, hesitations, register and repetition were noted and included in the analysis on equal terms with the respondents' verbal utterances. All transcriptions were compared with the recordings of the interviews and subsequently analysed on the basis of the guidelines for phenomenological analysis as described in Hycner 1999. In this manner, we identified five essential experiential dimensions of the user influence phenomenon.

3. Results and analysis

3.1 The quantitative results of the survey

3.1.1 Description of the survey population

At the 36 Section-110 accommodation facilities we visited, we collected a total of 281 questionnaire responses. In respect of the above-mentioned criteria for inclusion in the survey, 279 responses met these criteria. Of these, 210 were from residents, 38 from staff and 31 from managers of the accommodation facilities[21]. The survey population comprised 66 women (24%) and 212 men (76%).

Of the 210 residents' responses, 63% were collected from residents of accommodation facilities in Zealand, while 31% of the responses came from residents of accommodation facilities in Jutland and only 6% from residents of accommodation facilities in Funen.

A description of the characteristics of the residents is given in Figures 3.1 - 3.5.

Figure 3.1 The gender of the residents
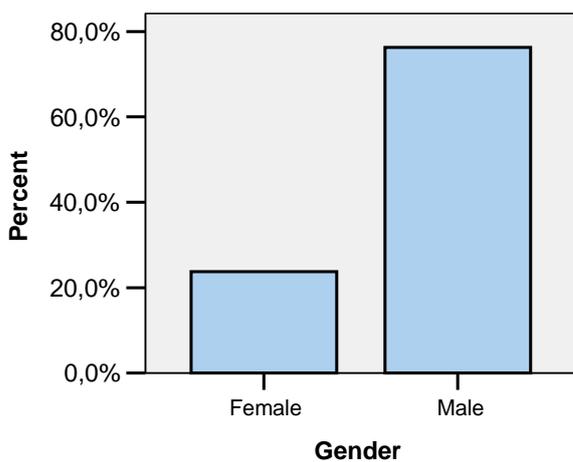
Figure 3.2 The ethnicity of the residents
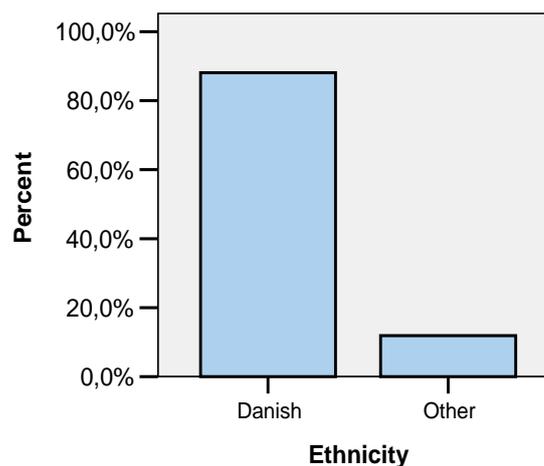
As indicated, 18% of the residents were female, and the remaining 82% were male 179 (85%) of the residents were of Danish ethnic origin, while 31 (15%) were of a different ethnic origin. Of the residents with a different ethnic origin than Danish, Somalis (30%) and Greenlanders (21%) were the most numerous.

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[21] In the analysis, the responses from the staff and managers were combined into a single category: "Staff", since there was no significant difference in the relevant tendencies in staff and management responses.

In terms of the age distribution of the residents, the breakdown was 26% aged 35 and under, 46% aged 36-50 and 28% aged over 50.

Figure 3.3 Age of the residents
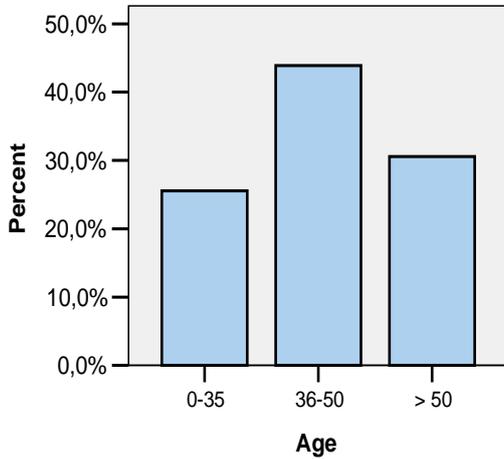
Figure 3.4 The length of residency at the accommodation facility
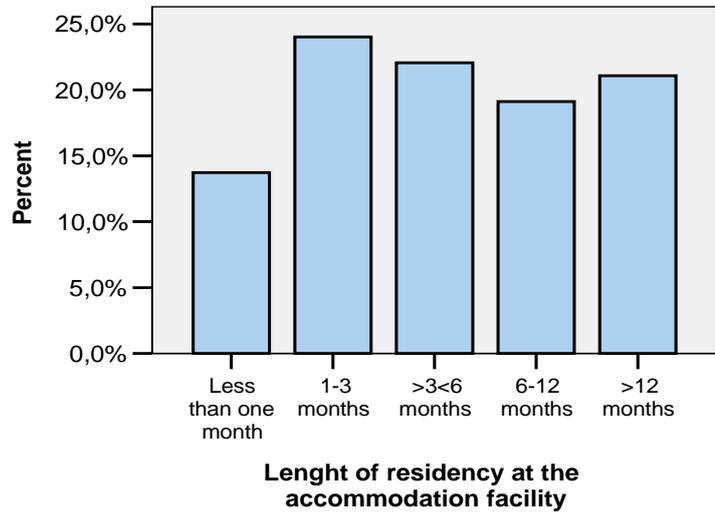
At the time of survey, 14% of the residents had resided in the Section-110 accommodation facility for less than one month, while 24% had been in the accommodation facility for 1-3 months, 22% for more than 3 but less than 6 months, 19% for 6-12 months and finally 21% had resided in the accommodation facility for more than 12 months.

In response to the question as to how long the residents had been homeless, 40% stated that they had been homeless for less than 1 year, 38% that they had been homeless for 1-5 years, while 22% had been homeless for more than 5 years.

Figure 3.5 Number of years of homelessness
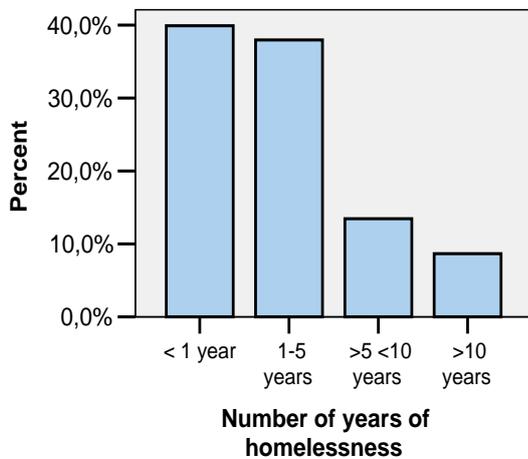
With regard to the existence of residents' committees at the accommodation facilities, 81% of the residents stated that there was a residents' committee at their accommodation facility, while 11% said there was not and the remaining 8% did not know if there was a residents' committee at their accommodation facility. Furthermore, 37% of the residents questioned stated that they were members of the residents' committee.

According to our information on the operation of the accommodation facilities, 44% of the residents lived at public-sector accommodation facilities, while the remaining 56% lived at private-sector accommodation facilities. The majority of the residents (51%) lived at accommodation facilities that were formerly reception centres, 25% at former shelters and 24% at sheltered boarding-houses.

3.1.2 The degree of user influence at Section-110 accommodation facilities

Table 3.1 shows, in order of priority, the areas in which residents and staff, respectively, stated that there was the highest degree of user influence.

Table 3.1 The residents' and staff's rating of which areas the highest degree of user influence occurred in.

	Areas with the most user influence RESIDENTS	Areas with the most user influence STAFF
1	Programming of personal development plans	Programming of personal development plans
2	Voluntary activities	Voluntary activities
3	Work tasks	Work tasks
4	Food	Food
5	House rules	House rules
6	The staff's working hours	The arrangement of common rooms
7	The arrangement of common rooms	The staff's working hours
8	Budgeting	Budgeting

The table shows that there was solid agreement between *which areas* in which the residents and staff, respectively, found the greatest degree of user influence. Only the areas of "The staff's working hours" and "The arrangement of common rooms" were ranked differently by residents and staff as the residents' areas of influence numbers 6 and 7 and the staff's areas of influence numbers 7 and 6. Within the remaining 6 areas, there was complete agreement

between the residents' and the staff's assessment of which areas the residents had most influence in.

The statistical tests indicated, however, that there was disagreement between *the extent* of user influence which the residents and staff, respectively, perceived in 7 of the 8 areas (see table 3.2). Within all of these 7 areas, the tendency was for staff to perceive a higher degree of user influence than the residents (not shown in table 3.2). Only in the "Programming of personal development plans" area was there no significant difference in how the residents and the managers rated the degree of user influence.

Table 3.2 The difference in the residents' and the staff's rating of the degree of user influence in the different areas evaluated by gamma test.

	Area of user influence	Significance probability
1	Voluntary activities	$P<0.001*$
2	Food	$P=0.001*$
3	The arrangement of common rooms	$P<0.001*$
4	House rules	$P<0.001*$
5	Budgeting	$P=0.014*$
6	Programming of personal development plans	$P= 0.173$
7	The staff's working hours	$P<0.001*$
8	Work tasks	$P=0.023*$

* = $P\leq0.05$

In addition, we found a significant difference in the residents' and managers' perception of the *overall degree of user influence* at the Section-110 accommodation facilities (P= 0.002). This difference is illustrated in Figure 3.6, which shows that a full 33% of the residents indicated that there was a "low" degree of user influence at the Section-110 accommodation facilities, while only 8% of staff perceived this.

Figure 3.6 The overall degree of user involvement.
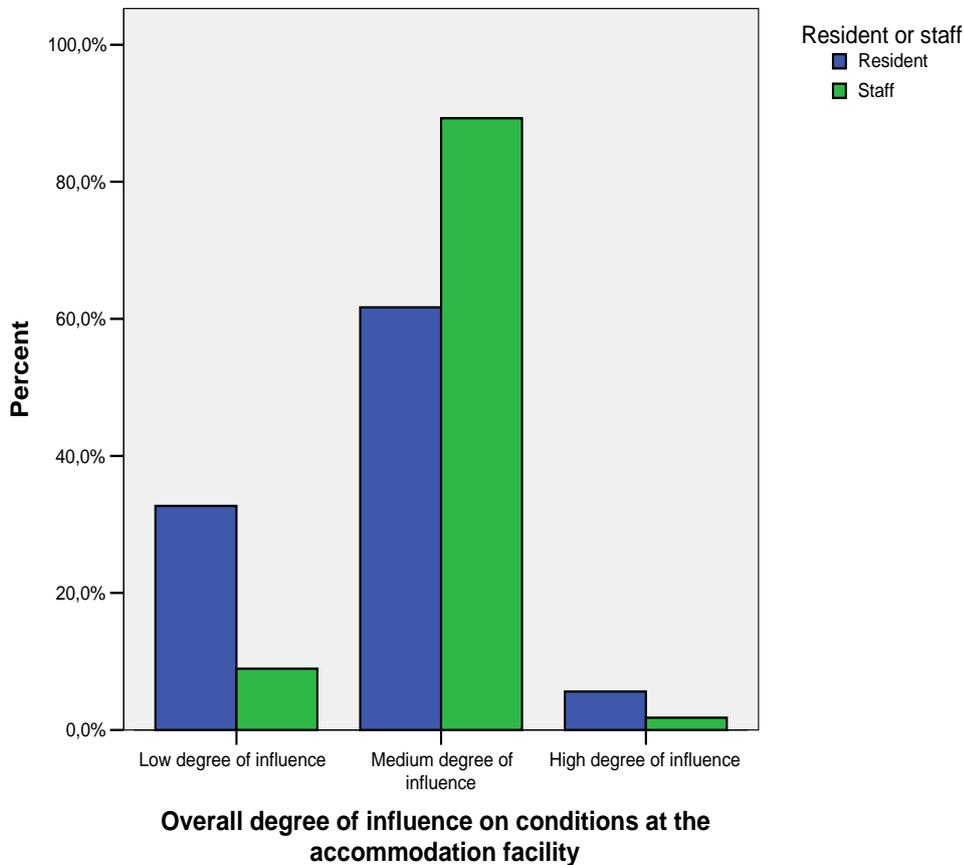
61% of the residents and 90% of the managers indicated that the degree of user influence was "medium", while 6% of the residents and 2% of the staff perceived that there was a "high" degree of user influence at the Section-110 accommodation facilities.

Furthermore, our results pointed to a tendency for residents of private-sector Section-110 accommodation facilities to perceive a higher degree of user influence than residents of the public-sector accommodation facilities (P=0.002). Figure 3.7 illustrates that 41% of the residents of the public-sector Section-110 accommodation facilities perceived that there was a low degree of user involvement, while only 18% of the residents of privately owned accommodation facilities indicated this. Similarly, 57% of the residents of public-sector accommodation facilities indicated that there was a medium degree of user involvement, while this proportion was 71% for the residents of the private-sector accommodation facilities. This means that, while only 2% of the residents of the public-sector accommodation facilities indicated that they perceived a high degree of user influence, this proportion was 11% among the residents of the private-sector accommodation facilities.

Figure 3.7 The difference in user influence at public-sector and private-sector accommodation facilities
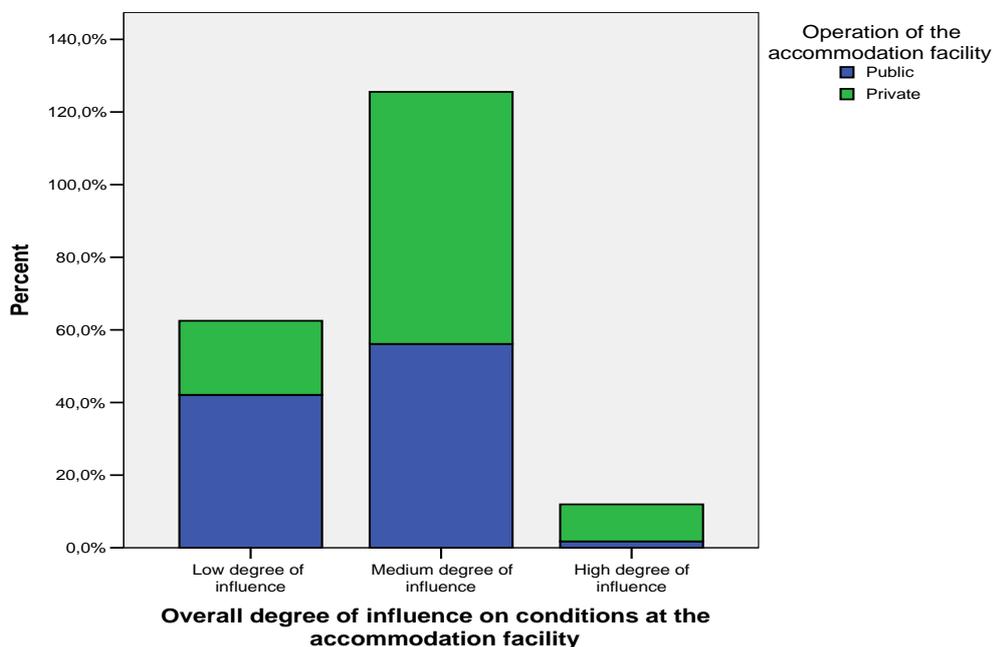
Our analysis also showed a correlation between the degree of user influence and the accommodation facilities' original classifications as shelters, reception centres and boarding-houses (P=0.001). Here the trend was that the degree of user influence was lowest at the former reception centres, higher at the former shelters and highest at the boarding-houses. For example, only 55% of the residents of reception centres indicated that they had a "medium" or "high" degree of influence, while this proportion was 86% for residents of the shelters and 88% for residents of the boarding-houses.

However, gender, age, education, the accommodation facility's geographical location, the resident's ethnicity, the number of years of homelessness, the length of residency at the Section-110 accommodation and whether the resident was a member of the residents' committee were not significant factors for the residents' perception of the degree of user involvement.

3.1.3 The importance of user involvement within the different areas

In answer to the question as to in *which three areas* user influence was most important, the majority of both residents (66%) and staff (94%) stated that the "Programming of personal development plans" was *one* of the three most important areas, while "Voluntary activities" was the area which the second most residents (59%) and staff (85%) identified as one of the three most important areas. After that, the similarities between the staff's and the residents' assessments of which areas were most important for the residents to have influence over ended.

Table 3.3 shows the proportion of residents and staff, respectively, who identified a given area as being one of the three most important for user influence, and within which areas there was a significant difference as to how important residents and staff respectively rated user influence. Note in particular this disagreement between the residents' and the staff's rating of the importance of user influence in the areas of "Budgeting" and "Staff working hours".

Table 3.3 The proportion of respondents who identified an area as being one of the three most important areas for user influence, evaluated by gamma test.

Area	Residents	Staff	Significance Probability
Programming of personal development plans	66 %	94 %	P< 0.001*
Voluntary activities	59 %	85 %	P< 0.001*
House rules	50 %	36 %	P=0.004*
Food	49 %	23 %	P=0.249
Work tasks	32 %	47 %	P=0.103
Budgeting	20 %	2 %	P< 0.001*
Arrangement of common rooms	18 %	14 %	P=0.103
The staff's working hours	6 %	0 %	P< 0.001*

$* = P \leq 0.05$

The far-right-hand column of Table 3.3 shows that, within the areas of "Voluntary activities", "Budgeting", "House rules", "Programming of personal development plans" and "The staff's working hours", there was a significant difference as to how highly the residents and staff, respectively, rated user influence.

Within the areas of "Voluntary activities" and "Programming of personal development plans" the trend was that staff rated user involvement as more important than did the residents, while the opposite was the case for the remaining three areas: "House rules", "Budgeting" and "The staff's working hours"; here the residents rated user influence as more important than did the staff.

Within the other three areas, "Work tasks", "Food" and "The arrangement of common rooms" there was no significant difference in how highly the managers and residents, respectively, rated user influence.

3.1.4 The correlation between the areas which the residents found most important to have influence over and the actual user influence

A comparison of Table 3.1 and Table 3.3 shows that, in general, there was solid agreement between the areas which the residents found it most important to have influence over and the areas in which, in practice, they experienced the highest degree of influence. The tables show that the areas "Programming of personal development plans" and "Voluntary activities" were in each case the areas which the residents stated they had the highest degree of influence over and the areas which the residents found it most important to have influence over. Similarly, it can be seen that the areas "The staff's working hours", "Arrangement of common rooms" and "Budgeting" were the three areas which the residents had the lowest degree of influence over and also the three areas which the majority of the residents rated as *least* important to have influence over. *This agreement cannot, however, be interpreted as an expression of the residents having the degree of influence that they wished for within the various areas.*

Overall however we can reasonably deduce from the above that there was a high degree of agreement between the areas which the residents wished to have influence over and the areas where they actually did exert the highest degree of influence.

3.1.5 The residents' satisfaction with their user influence and their daily life at the accommodation facility

The results of our analysis showed that there was a significant correlation between the overall degree of user influence over the Section-110 accommodation facility and the residents' satisfaction with their user influence over the accommodation facility (Figure 3.8), such that the higher the degree of influence the resident experienced, the more satisfied he/she was with user influence over the accommodation facility ($P < 0.001$).

Figure 3.8 Correlation between the degree of influence and the residents' satisfaction with user influence at the accommodation facility.
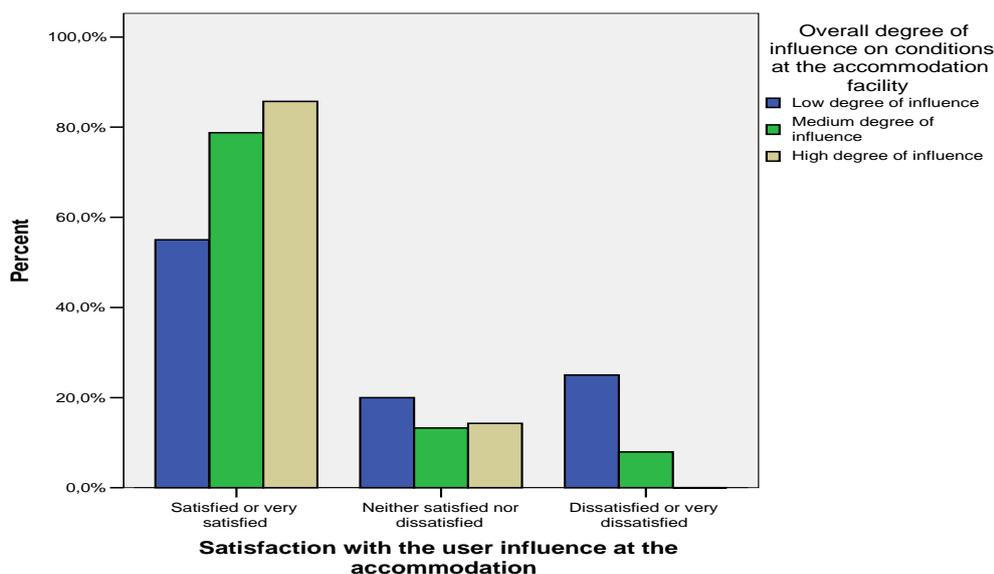
The results of the residents' satisfaction with their daily lives at the Section-110 accommodation facility showed that 66% of the residents indicated that they had a "high" degree of satisfaction with their daily life at the accommodation facility, while 29% indicated that they had a "medium" degree of satisfaction and only 5% a "low" degree of satisfaction with their daily lives. The statistical tests showed no significant correlation between the residents' satisfaction with their daily lives and the overall degree of user influence at the accommodation facilities.

Table 3.4 illustrates the significance of different factors for the residents' satisfaction with their daily lives at the Section-110 accommodation facility. This shows that length of education, number of years of homelessness, length of residency at the Section-110 accommodation facility or the accommodation facility's geographical location are not factors that appear to influence the residents' satisfaction with their daily lives at the accommodation facility. On the other hand, there was a tendency for residents to be more satisfied with their daily lives, the more often they felt accepted by the accommodation facility's other residents; for their satisfaction with daily life at the accommodation facility to rise in line with their age; and for male residents to be generally more satisfied with their daily lives than female ones. Furthermore, there was a tendency for residents of non-Danish ethnic origin to be more dissatisfied with their daily lives than residents of Danish origin.

Table 3.4 Correlation between different background variables and the residents' satisfaction with daily life, evaluated using a chi-squared or gamma test

Background variable	Significance probability
The accommodation facility's geographical location	P= 0.209
Gender	P=0.001*
Age	P=0.006*
Ethnicity	P=0.038*
Length of education	P=0.508
Number of years of homelessness	P=0.995
Length of residency at accommodation facility	P=0.305
Accepted by other residents	P<0,000*

* = P≤0.05

3.2 The qualitative results of the survey

From the analysis of the phenomenological interviews, it appeared that user influence was a multi-faceted phenomenon. On the basis of the interviews, we inferred five key experiential dimensions to user influence, which we categorised as "Organised and non-organised user influence", "Lack of commitment and motivation", "Limitations", "Deference and reciprocity" and "Personal satisfaction". These experiential dimensions will be described and analysed in the following section. Text in italics is drawn directly from the interviews.

3.2.1 Organised and non-organised user influence

By and large, the structures ascribed to the phenomenon of user influence can be divided into two categories which are not mutually exclusive, but simply describe different aspects of the phenomenon. On the one hand, there is organised user influence, the basis for which is user influence through residents' committees and residents' meetings. This type of influence is exerted in a fixed framework. On the other hand is non-organised user influence, which consists of the day-to-day relationships between staff and residents.

These two different - but co-existing - aspects of user influence are reflected in the quotation below.

"*At the more organised level, we have a residents' committee with 3-4 representatives, selected by the residents at the monthly meetings... and then we have the non-organised influence, where, in my experience, many of the residents find they are listened to on a wide variety of things. They do not need a residents' committee to be heard... or a monthly meeting. The things they want influence over or are dissatisfied with are also dealt with everyday [...] We don't say to them: "You have to wait for that until the monthly meeting". We deal with it there and then. After all, that's part of the dialogue that goes on every day to make things run smoothly. It is not as if we say: "Right, you want to go to the cinema... well, we'll make a decision on that at the monthly meeting"* (Accommodation facility manager).

As the above quotation implies, organised user influence is wide-ranging and covers all the residents at the accommodation facility, in the sense that all the residents are involved in selecting who will represent their interests on the residents' committee. This organised user influence is a sign of the visible and planned involvement of the residents at the accommodation facility. In contrast to this, the non-organised user involvement is more latent and difficult to identify. It occurs in the daily relationships between management and the residents, where the residents gain influence on a more ad hoc basis over various aspects of the accommodation facility and in their daily lives. Where the formal user influence implicitly covers all the residents at the accommodation facility, informal user influence is characterised by pertaining to - or initiating with - only one individual.

Since the two forms of user influence require a different degree of motivation, planning and commitment on the residents' part, there are different dilemmas, conflicts and consequences bound up with organised and non-organised user influence. In analysing the remaining four experiential dimensions, we will try to illustrate these differences.

3.2.2 Lack of commitment and motivation

User influence is complicated by a lack of commitment on the residents' part. In the first place, organised user influence consisting of the establishment and organisation of a residents' committee appears to involve major difficulties connected with a discrepancy between the management's and the residents' commitment to and work on user influence. Where managers *"push hard to get people to commit themselves"* and to get a residents' committee *"up and running"*, the residents are *"lethargic"* and lack the *"dynamism"* which is a prerequisite for user influence. This emerged, for example, from one manager's perception that his personal commitment and work on user involvement was the reason that the residents' committee at the accommodation facility existed at all:

"We have huge problems getting these residents' committees set up. *The residents are lethargic and it could be said that the reason we have a residents' committee at all is down to me - it sounds crazy, but it's true"* (Accommodation facility manager).

This is further underpinned by one of the residents' representative's description of how he ended up a representative on the residents' committee:

"*I put myself forward in the end...because someone had to, and no-one else wanted to* [...] *if I hadn't volunteered, we might still be sitting there. It wasn't as if I actually wanted to"* (resident).

The discrepancy between the managers' and the residents' commitment to establishing a residents' committee and participating in residents' committee work can be attributed to the residents not having the *"personal drive"* required to be actively involved in residents' committee work and the fact that *"they [the residents] have enough to do dealing with their own situation"*. This is underlined, for example, in the following remark from one of the managers:

"*You have to remember that this user influence thing has never been one of the users' greatest wishes. In fact, it was essentially an academic construct. That doesn't make it a bad idea, but we should just bear it in mind. who actually wants it?! We are talking about addicts, with more than 10 years of addiction, living on the streets, who suddenly come in and then have to decide where they stand on a whole lot of things. They're not even able to work out where they stand on their own lives"* (Accommodation facility manager).

Other reasons for the residents' failing to get involved in residents' committee work include their frequent expectation that their stay in the accommodation facility will be temporary, and they accordingly find it *"pointless"* and *"trivial"* to *"get involved in anything"* and *"to influence anything"*.

3.2.3. Limitations

Beyond external impediments such as legal and financial circumstances, user influence at Section-110 accommodation facilities is limited by a number of *"paedagogical considerations"* which the management has to take into account to *"protect the individual resident"* and maintain the accommodation facility's *"paedagogical concept"*.

In terms of user influence there are therefore limits to the areas in which and the extent to which the residents will be able to exert influence. If the residents are burdened with more responsibility than they can cope with, there is a risk of them *"forgetting themselves"*, which may result in a relapse in their addiction and induce a sense of *"failure"*. This means that there are a number of areas which, for paedagogical reasons, the managers avoid involving the residents in, for example, recruitment of staff to the accommodation facility, budgeting, and decisions on whether a resident is to be expelled from the accommodation facility if he/she breaks the house rules:

"If we also give them the responsibility of having to consider other people's addiction problems and consider the way we [the staff] manage things, they do not get time for themselves. That is our responsibility - not theirs!" (Accommodation facility manager).

On the other hand, there are also areas where management requires the residents to *"discuss amongst yourselves"* because *"getting involved in everyday life at the accommodation facility is training in getting involved in their own lives and the real world outside the accommodation facility"*. These areas often concern conditions that affect the residents directly in their daily lives:

"As for what affects them in their daily lives – we simply can't be bothered to discuss with them. We want them to discuss those things amongst themselves, but it's their responsibility! I mean, I'm not interested in whether they read this or that newspaper or whether they get to spend two hours on the net or three. What matters to me is that what they decide to do is fair on everyone." (Accommodation facility manager).

In the interests of their social education, management does occasionally have to "intervene" in responsibilities that are otherwise lodged with the residents to ensure that no residents are charged with a task they are "not up to". This intervention is a limitation on the organised user influence because the residents perceive it as *"frustrating"* and *"pointless"* to get involved in conditions at the facility if management subsequently overrides their decisions. One concrete

example of this type of situation emerged from two interviews – one with a manager, one with a resident at the same accommodation facility, both of whom emphasised the same issues in the interviews. The issues concerned how the various tasks that have to be performed at the facility are distributed among the residents. The manager described this process as follows:

"They work out their own list of tasks. We release it on Wednesday or Thursday and then it's the residents who get together and work it out jointly. They then put their names down: "Where I want to be", and it is then obviously – yes, obviously – vetted by us because we know the weaknesses – physical and mental – the different people have, so we know if there is anyone who should be let off doing certain tasks. So, ultimately, we can make changes to it, but we prefer not to" (Accommodation facility manager)

The resident, however, did not see management's intervention in the distribution of tasks as being equally necessary and obvious. The quotation below reflects that the resident apparently perceived management's intervention in drawing up the list of tasks as an unnecessary and patronising intervention in the residents' decisions.

".. then they [the staff] take it [the list of tasks] into the office and sit down and redo it…so you can't be sure that you'll end up with what you put your name down for. I'm planning to raise it at the next residents' meeting because that makes it pointless to release a form out for us to spend time putting our names down on. That simply can't be right!" (Resident)

The fact that user involvement is limited by the point at which the accommodation facility's *"paedagogical concept"* breaks down also means that there are a number of conditions at the facility which management is under no circumstances prepared to *"cede on"*, irrespective of the residents' opinion on these conditions. A manager described for example how management at the facility – against the residents' wishes – had decided to keep the facility's computer room shut in the morning because they found that the facility's paedagogical concept – for tasks at the facility to be performed jointly by staff and residents – was starting to *"disintegrate"* because the residents preferred to spend the time in the computer room or watching TV. Keeping the computer room shut in the mornings was intended to *"promote the residents' motivation"* for taking part in the common activities. The manager described how the accommodation facility's staff *"stand firm"* on this decision, in spite of the fact that several residents are *"pushing"* to change it: *"That's our educational principle, and we won't stand down on it. We simply want to be able to exert the right to decide."* (Accommodation facility manager).

3.2.4 Deference and reciprocity

"Reciprocity" in everyday interaction between staff and residents is a precondition for user influence. User influence may be regarded as *"cooperation"* between management and the

residents that arises where two people "*get to know each other*". This emerges from reflections such as the following from an accommodation facility manager:

"*User involvement arises out of a reciprocity between staff and residents. Not because of a monthly meeting. It is in the day-to-day interaction between residents and staff that they [the residents] suddenly assume far more responsibility.*" (Accommodation facility manager).

Reciprocity is about "*daring to give a part of yourself*". It is vital for the residents to get to know the staff as "*completely normal people*". A kind of "*professional friendship*", where they listen to each other and respect each other's resources and capabilities. This calls for staff to demonstrate "*respect*" and "*deference*" towards "*what the residents come up with*". In this process, the residents' "*vast resources*" are reinforced and activated, which paves the way for *a repeated sense of achievement* and *promotes the residents' commitment* to user influence.

The fact that respect and reciprocity in everyday interaction between residents and staff is essential for the resident's sense of user involvement emerged in an interview with a residents' committee representative, who was asked to describe a positive and a negative example of user involvement. In the negative example, the resident described a situation in which staff had asked the residents to come up with a suggestion for how a sum of the accommodation facility's money should be spent. Since the residents had come up with several suggestions, the residents' committee and the manager sat down to discuss these. In the following quotation, the resident describes how he experienced this episode:

" *I didn't care for the* <u>manner</u> *in which he [the manager] rejected the suggestions, although I could see the logic in it. It was just like he talked down to us. We had after all come up with some suggestions. We were told: Come up with some suggestions – and we'll talk about it – and so people did, just like they were asked to…but then there just weren't any of them that were good enough […]. We felt like we were a laughing stock. We had spent 3 weeks writing suggestions and then they weren't used. (hesitates).. Seems to me that was messing the residents about.*" (Resident)

The resident's statement reveals that it was not the fact that the suggestions were rejected that made the situation a negative example of user influence, but rather the manner in which the manager rejected the suggestions which made the residents feel ridiculed and patronised.

As an example of positive user influence, the resident described a process based on conversations between himself and his contact at the accommodation facility. The resident described how, through these conversations, he had experienced being met with trust and respect, which had engendered a sense of self-confidence:

"*These sessions are what helped me to get myself relatively sorted out. I've been told several times: You're too good to be living here, you've a lot of resources and so on […]. They've given me the self-confidence it takes to move on.*" (Resident)

3.2.5 Personal satisfaction

As emerges from the experiential dimension of "Deference and reciprocity", for both managers and residents, user influence is associated with a sense of personal satisfaction. When the residents are shown trust, they gain a sense of *satisfaction* and one of *growing*, which promotes their commitment to user influence. However, it is the non-organised user influence – the daily reciprocity and respect – that influences and is significant for the residents' satisfaction – whereas the organised user involvement – monthly meetings and residents' committee meetings – do not appear to influence this process. This is illustrated for example in the two following quotations. The first quotation describes a residents' committee representative's experience of being involved in getting a motion approved at the accommodation facility through the residents' committee work:

"Resident: *Once in a while we get things carried through in the residents' committee. For example, we've just had the spring clean at the facility, and there are lots of us who work off the premises. So there was a proposal that those who work off the premises should be exempted from the cleaning. That idea came from the residents' committee and it was approved.*
Interviewer: *Could you try to describe how you felt after this experience – after the committee's motion was approved?*
Resident: *Personally, it was all the same to me. I mean, it's nice enough when one of our ideas gets approved, but other than that I wouldn't say I get that much out of it personally."* (Resident)

Against that, the residents conveyed a sense of great *personal satisfaction* from getting a suggestion seen through, which *they themselves* had formulated and devised outside of the residents' committee. The following quotation reflects how a resident had a feeling of *standing 3 heads taller* and being inspired to repeat the initiative after managing to organise a successful outing to an ice hockey match:

"[…] *It was nice to see that something came of it. You feel like: "Right, so it is possible to get something like that arranged". To my knowledge, it's the first time we ever had an outing to a match like that. And then you stand 3 heads taller, don't you? It makes you want to organise another trip some other time, doesn't it?".* (Resident)

3.2.6 The essence of the phenomenon of user influence

The above analysis allows us to deduce that user influence at Section-110 accommodation facilities for the homeless is a phenomenon that occurs at an interface of differing wishes and

needs that must be catered for. The result is that user influence becomes restricted by a number of paedagogical *considerations*, the purpose of which is to ensure the *protection of individual residents* and preservation of the accommodation facility's *paedagogical foundation*. The biggest limitation on user influence would, however, appear to be the residents' *lack of commitment* to participating actively in residents' committee work and other *organised user influence activities*. The *non-organised user influence,* which arises out of day-today *deference and reciprocity* between management and residents, appears however to promote the residents' *self-confidence* and increase their *commitment to user influence.* The fact that the residents' suggestions and wishes are met with respect and deference from management is a source of *personal satisfaction* for the residents, that makes them *stand taller*.

4. Discussion

4.1 Discussion of the results of the survey

In the survey, we identified several results and correlations for which we found it relevant to discuss the underlying mechanisms. In order to obtain several different angles on the issues represented in the discussion, we asked the members of the board of SAND to come up with likely explanations for why the survey yielded the correlations that it did.

In the following discussion, we have also compared the quantitative and qualitative analyses in the hope of creating consistency and cohesion out of the results of the survey.

4.1.1 The residents' and staff's perception of actual user influence at Section-110 accommodation facilities.

In the survey, we found a high level of consistency between *which areas* the residents and staff indicated as being the focus of the highest degree of user influence, but that there was a tendency for the staff's perceived *degree* of user influence to be higher than that of the residents. What does this finding mean? - and to what may we attribute this discrepancy?

The immediate interpretation would have to be that the residents and staff to a certain extent have the same perception of the user influence exerted on a daily basis at the accommodation facility, but that factors in the daily routine cause the residents to rate user influence as more limited than the staff do. This may be due to the fact that the staff and residents generally have different perspectives on user influence, which results in different perceptions of how much influence the residents in principle have a right to exert. This is supported by a comment left by one of the residents in the questionnaire: *"I find it hard to see that user influence at the institution could improve while there is such a huge gap between the reality as I see it and the reality as management sees it."* (Questionnaire comment, resident)

If the staff essentially have an expectation that it is management at the accommodation facility that is responsible for running the facility and for making decisions about how daily life is to be structured, then simple initiatives such as making decisions on the residents' proposals for changes could be regarded as a high degree of influence. However, this kind of initiative would presumably be regarded as a low degree of influence – or non-existent influence – if the immediate expectation is that staff and residents have the same right to influence conditions at the facility, or perhaps even hold that the residents should have the greatest degree of influence since it is their life and everyday existence that are directly affected by the conditions and the structure prevailing at the facility. One possible explanation for the fact that the residents in our survey generally rated the degree of influence as being lower than staff did might thus be that the residents essentially maintain that they have a right to exert a greater degree of influence than staff can go along with.

Another likely explanation for the fact that staff rate the degree of user influence higher than the residents do might also be that the staff intend in principle to involve the residents as much as possible, but that they at times feel forced to restrict the residents' influence for "paedagogical reasons", which the residents are not made aware of or which they do not find relevant. An example of this kind of situation would be the example of the "list of tasks" presented in the qualitative survey. Here the facility manager stated that the residents had the responsibility for distributing work tasks at the facility amongst themselves, while the resident apparently felt that his influence was limited by the fact that the manager could change the distribution of tasks at his discretion at any time. Examples such as this might explain why staff in some areas maintain that the residents have co-determination or perhaps even self-determination because this is *in principle* the intention, while the residents perceive their influence as far more limited based on the view that management always has overriding decision-making authority.

The discrepancy between the management's and residents' perception of user influence could however also be attributed to the fact that management, in the daily running of the facility involves small groups of residents in different tasks and decisions at the facility, or complies with requests submitted by a small group of residents. In this way, "non-organised" user influence does occur, but only a small group of residents is aware of it, while more members of staff are in the picture.

4.1.1.1 The difference between user influence at private-sector and public-sector accommodation facilities

Our survey indicated that residents at the private-sector accommodation facilities achieved a higher degree of user influence than their counterparts in public-sector facilities. A possible explanation for this might be that staff at the public-sector facilities are, to a greater extent than staff at the private-sector facilities, dependent on documenting visible and measurable results of their work with the residents, which meet the political objectives for the residents' stay at a Section-110 accommodation facility whereby "*residents are to receive tenancy sustainment training with a view to preparing them for an independent existence*" and to "*increase their prospects for integration in mainstream society*" (Ministry of Social Affairs 1998: 72). In his survey on the implementation of welfare programmes, the American sociologist, Michael Lipsky, addresses the problem that public-sector employees in their daily dealings with the public are driven by the interests of short-term legitimation in relation to public administration and politicians – at the expense of the public (Andersen and Larsen 2003: 160f). According to Lipsky, there is a tendency for public-sector employees to strive for visible and measurable results of their work to the extent that they at times act directly against the interests and wishes of the public in order to meet political objectives (ibid.). If we

pursue Lipsky's train of thought, this tendency would result in the success criterion for staff at public-sector accommodation facilities becoming oriented towards normalisation of the residents to a greater extent than is the case at the private-sector facilities. This might mean that there would be more space and time at the private-sector facilities for showing the reciprocity and respect which our qualitative survey indicates is required in order to establish a culture of user involvement, where residents are slowly given the impetus and motivated to engage in the work of the residents' committee.

4.1.1.2 The difference between user influence at former shelters, reception centres and boarding-houses

The survey also indicates that a higher degree of user influence prevails at the accommodation facilities that were originally boarding-houses and shelters than at the former reception centres. One possible explanation for this might be that reception centres are generally larger than shelters and boarding-houses, such that user influence is complicated by multiple processes. First, large residents' and staff groups mean that proposals from the residents' committee and from individual residents have to be considered at more levels than at the small accommodation facilities before a decision on them can be made. This complicates and prolongs decision-making processes at reception centres as compared with those at the often smaller shelters and boarding-houses, which may result in residents at reception centres experiencing that their proposals are not translated into actual changes: *"I could do with getting something concrete out of the things we agree with the staff. They are good at listening, but not much comes out of it afterwards".* (Questionnaire comment from resident at reception centre)*. This is compounded by the fact that effective user influence is conditional on a certain degree of agreement both internally within the resident and staff groups and between the groups. All things being equal, this kind of agreement will be easier to achieve at small facilities than large ones. In this way, the residents' perception of a higher degree of user influence at boarding-houses and shelters than at reception centres might be attributable to the fact that reception centres often house more residents than the boarding-houses and shelters.

However, the possibility should also be considered that there may be a difference in the residents who are enrolled at the different types of accommodation facility. Thus, those residents who stay at boarding-houses and shelters may have greater personal drive to involve themselves actively in different aspects of life at the facility than those staying at a reception centre. Historically, it was the reception centres that were charged with taking care of those citizens who had the greatest problems – that is, alcohol or drug dependencies, social or mental problems. In the light of this, it would not be surprising if there were better

preconditions for achieving a positive culture of user influence at boarding-houses and shelters than at reception centres.

4.1.2 The importance of user influence over different conditions at the accommodation facility
The survey revealed a tendency for the majority of both residents and staff to hold it to be most important for user influence to be exerted in areas of immediate significance for the residents' life in general and existence at the facility, for example, in "Programming of personal development plans" and "Voluntary activities", while areas concerned more with operation of the facility, such as "The staff's working hours" and "Budgeting" were aspects which the majority of both residents and staff found less significant for the residents to exert influence over. On the face of it, this would suggest a concurrence between the residents' and staff's rating of the importance of user influence in various areas. However, our survey revealed that while the residents rated user influence as more important than staff did within the operational areas, staff rated user influence more highly than the residents in areas of direct significance for the residents' life in general and daily existence at the facility. This means that what appears to be harmony masks two tendencies separating the staff and residents; in those areas where the staff and residents rated user influence as most important, staff rated it *as even more important* than the residents did, while the residents rated their influence as *more important* than staff did in those areas which were identified by both parties as being least important areas for user influence. What do these tendencies indicate?

One possibility might be that these tendencies reflect the difference between the residents' and staff's ambitions for and expectations from the residents' future? According to the members of the board of SAND, staff at Section-110 accommodation facilities often have an expectation for residents to *"move out into their own home within the near future",* while many of the residents do not wish to move into their own home, and are instead keen to stay living at the facility for an extended period: *"There you have a roof over your head and a room of a manageable size. You get to be left in peace and look after yourself."* (Quotation, member of the board of SAND).
These differing ambitions among managers and residents, which result in different expectations regarding the timeframe for the residents' stay at the accommodation facility may account for why staff see it as essential for the residents to have influence over the programming of their personal development plan and other immediate aspects from which they stand to benefit in the immediate future. At the same time, the residents find it more important than staff do that they also have influence over operational areas, in spite of the fact that the prospect of these being finalised and implemented is in the far future. The staff's expectations that the residents will have moved out before any change comes into effect might

also account for why they rate the importance of user influence as lower than the residents do within operational areas. This hypothesis is supported by the following quotation from an accommodation facility manager: *"If we were offering permanent accommodation I would involve them in recruitment interviews. If it was a residential, 24-hour care centre for psychiatric patients who were to live here the rest of their lives I would find it appropriate for them to be heard – but this is not what we have here! We also don't want them to serve on the board because we only hold 4 board meetings a year."* (Quotation, accommodation facility manager).

However, there might be other likely explanations for the two tendencies. The fact that staff rate it as important for residents to have influence over programming of their own personal development plan may be due to the fact that user influence in that area especially can function as an 'instrument' for staff to use in directing residents to act in compliance with what the staff wants. This can occur through several mechanisms. The staff may, for example, lay down certain specific requirements which the residents must comply with before they can be recommended for what they themselves desire for their future, such as moving into a standard flat or non-standard accommodation, e.g. a caravan community. In this way, the residents are given an incentive to comply with the conditions and rules that prevail at the accommodation facility and to act consistently in compliance with the staff's requirements.

Moreover, user influence over programming of the residents' personal development plan can provide a natural basis for a number of one-to-one interviews between staff and residents to discuss the resident's future prospects. The object of these interviews is to *"promote the citizen's influence over decisions on his/her case"* and *"provide the framework for an implementational process with the citizen, in which the goals of the initiatives to be taken are matched with the citizen's own wishes and capacities"* (Ministry of Social Affairs (1) 2006: 33). The historian Signild Vallgarda uses Michel Foucault's concept of *governmentality* to describe how interviews of this kind between therapist and client may be regarded as a form of governance (Vallgarda 2005). The concept of *governmentality* refers to the phenomenon whereby one individual steers another individual to *opt* to act in compliance with the 'governing' individual's interests. This form of control is expressed through diverse techniques and forms of knowledge whereby the controlling individual seeks to shape the controlled individual's conduct by operating through its wishes, interests and convictions (Dean 2006:43 ff.).

According to Signild Vallgarda, there are several reasons for regarding empowerment as exercise of power in the context of motivational sessions between a therapist and client – here between staff and resident. On the one hand, the aim of empowerment is to 'mould'

individuals by building their capacity for action in such a way that they develop resources for realising their aims, while on the other hand, the aim is to influence the individual to opt to realise "the right" aims so that the individual alters his/her conduct in a certain direction (Vallgarda 2005). Through interviews between residents and staff concerning the residents' personal development plans, staff are thus able to influence the residents' future aims in a direction that is desirable for the accommodation facility in terms of the political guidelines to which the facility is subject, e.g. whereby the residents undergo preparation to take up residence in their own home, an independent existence and (re)integration into mainstream society (Ministry of Social Affairs 1998:72). In Foucault's hypothesis there is no question that the individual – i.e. the resident – is either firmly resistant to or willing to submit to this exercise of power. The individual works actively with him/herself in relation to the advice and counselling provided by the staff and thus colludes in the disciplinarianism to which he/she is subjected. (Järvinen et al 2005: 14).

In extension of the above it is worth pointing out that the very fact that a plan is drawn up for the residents' personal development, which gives the resident a means of influencing his/her own case, serves as tangible proof that the facility is in compliance with the political guidelines to which it is subject (see Section 4, Legal Protection Act).

In this way, user influence on "Programming of the resident's development plan" is to the advantage of the staff because it serves both as a means of controlling the residents' conduct and as a means of producing and documenting measurable results that meet the facility's political obligations.

In spite of the fact that the foregoing might give the impression that staff are consciously seeking to manipulate residents to make a number of choices that will cater to the staff's need to meet political obligations, this is far from always the case. The exercise of power achieved through empowerment is, from a staff perspective, a positive form of power. It is an expression of "best intentions", legitimised by law and founded on social and socio-paedagogical science. The intention is "… *to create and develop active, healthy, well-functioning and responsible citizens*" (Järvinen et al., 2005: 187). The exercise of power is regarded as a "symbolic assault", where the dominated party – in this instance the resident – does not perceive the exercise of power as oppression. The efforts are in fact based on a number of "truisms", which per se are not open to debate, such as, for example, it being best for the resident to move out into his/her own home and get a job. In the context of the residents' influence over operational conditions at the accommodation facility, one might imagine that various more or less implicit attitudes, values and norms ordain that residents

should, above all, concentrate on their own lives and sort out their own problems rather than get involved in more overarching issues which they are not competent to deal with.

The explanation for the other tendency: that staff generally rate user involvement as "not important" in operational matters might very likely be attributable to the fact that staff do not feel they themselves have sufficient influence over such matters. This would in all likelihood cause scepticism among staff concerning the exercise of user influence in these areas due to fear that if the residents are to have influence over these matters then the staff's – already restricted – scope of action will become even more limited, and because staff simply do not find it reasonable for residents to be involved in matters which the staff do not even have sufficient influence over. Another explanation would be the "paedagogical considerations" presented in the qualitative analysis; that there are matters at the accommodation facility which the staff refrain from involving residents in because they maintain that the residents are incapable of dealing with them if they also have to deal with their own personal affairs. But what does the concept of "paedagogical considerations" actually embody? And what is the underlying motivation for paedagogical considerations? In order to shed light on these questions, in the following sections we will be discussing some of the correlations identified in our quantitative analyses.

4.1.3 Paedagogical considerations ≠ paternalism

The quantitative analysis indicated that, in practice, the residents' perceived degree of influence is very low – if not actually absent – in operational matters, and that the residents also want to exercise more user influence in these matters than staff want them to. This reality should not be neglected or overshadowed by the fact that residents and staff area are agreed on the matters where user influence is most important and that in practice the highest degree of influence is duly exercised in these matters.

The fact that staff nonetheless apparently refrain from involving residents in operational matters may be attributable to two factors: either that staff, for personal/managerial reasons, do not want residents to be involved or that staff maintain that it would be *best for the residents* not to be involved. While the outcome of these two possibilities is identical – that no user influence is exercised over operational matters – the two possibilities are distinct in terms of the motivation underlying the practice. Based on the terms of reference the accommodation facility managers use to explain the "paedagogical considerations" in the qualitative analysis, the concept implies that staff refrains from involving the residents in operational matters because they maintain it is *best for the residents* not to be involved. In such instances, in the

best case, staff can be said to be practising paternalism[22] towards the residents. However, paternalism requires that an individual – in this case a resident – is incapable for a given period of determining which choices and actions would be most appropriate for him/herself (Rossel 1986). It follows that if "paedagogical considerations" are an expression of paternalism, then the motivation underlying the staff's decision not to involve residents in operational matters is that staff maintain that the residents, during their stay at the accommodation facility, are in a state of being incapable of determining how it would be most appropriate for them to act. Is this assumption fair? – and to what extent do the staff have the right to draw such a conclusion?

The above issue also raises another question: if the residents, during their stay at the accommodation facility, find themselves in a situation where they are incapable of determining which choices it would be most appropriate for them to make, will they then not be equally incapable of dealing with other matters which staff want to involve them in, such as making plans for their future?

Might the motivation underlying the paedagogical considerations in fact be that it is staff – and not necessarily residents – who are incapable of establishing user influence in operational matters in such a way as to make it acceptable to both staff and residents?

4.1.4 Lack of commitment to user influence?

A consistent theme in our qualitative analysis was the residents' lack of commitment to user influence. This might readily lead to the conclusion that the residents are not interested in user influence or, even more harshly, that the residents do not *want* user influence. Before venturing to draw such bold conclusions, one should however consider what circumstances might underlie such a finding.

Both the questionnaire comments and statements from SAND board members indicate that the residents would in principle like to gain insight into and influence over various matters at the Section-110 accommodation facilities but find themselves prevented from doing so by various barriers. For example, the residents often encounter a negative attitude on the part of the staff if they express an interest in different matters at the accommodation facility, including matters concerning operation of the facility, such as the facility's budget: *"We tried to get access to budgets – what money was spent on – before they were published officially on the Internet. But when it came to individual budget items we were told in no uncertain terms that they didn't concern us!"* (Member of the board, SAND)

"It could be nice if the residents were involved in making the rules. Right now it depends on who you are and who's on duty" (Questionnaire comment, resident).

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[22] Paternalistic treatment consists of encroaching on the decision-making competence of a person, and justifying this out of concern for the person himself/herself, e.g. his/her physical or mental well-being (Rossel 1986).

Another possible reason for the residents' lack of commitment to user influence might be that many of the residents come from circumstances in which they have not previously become acquainted with the principles underlying residents' committee work, such that this may seem meaningless and alien to them. It is also problematical that several residents have the attitude to the residents' committee work that it doesn't result in *genuine* influence because their proposals and ideas do not actually come to anything: *"You don't achieve real influence over anything through residents' committee work. It'll always be the staff who decide"* (questionnaire comment, resident). If this is the prevailing attitude to residents' committee work among residents at Section-110 accommodation facilities, it may seem obvious for the residents – as a consequence of this – to show a lack of commitment to user influence. This is unfortunate and should give pause for thought!

However, let there be no doubt that the staff at the vast majority of Section-110 accommodation facilities are dedicated in their efforts to involve the residents in different matters at the facilities. It would also be unfair to doubt that the residents do in fact show a lack of commitment to user influence: *"I am a manager at an accommodation facility for homeless drug addicts, where it is difficult – bordering on the impossible – to develop and motivate dialogue with the residents. The majority of activities and initiatives to encourage user influence run aground due to the residents' passivity and lack of interest. That doesn't mean we don't try to raise the level of user influence. As staff, we see this as an important area and we implement new initiatives continuously to get the residents to talk to us or just turn up for residents' meetings and other activities.*" (questionnaire comment, manager). This discussion is therefore not about lodging responsibility for the complications associated with user influence but about identifying possible implications in the issue. This is necessary above all in order to be able to improve future user involvement but also in preventing residents' lack of commitment to user involvement from resulting in the mistaken conclusion that residents *do not want* to exert influence over matters affecting their daily life and future.

4.1.5 Non-organised user influence… or?
In our analysis, we identified two forms of user influence; organised and non-organised user influence. In that context, we arrived at the conclusion that non-organised user influence appears to be a contributory factor in building the residents' capacity for action and in their empowerment, which ultimately motivates them to get involved in circumstances at the accommodation facility and in their own lives. This conclusion underlines the importance of residents being met with acceptance, respect and reciprocity in their day-to-day relationships with staff. It also raises the issue of the extent to which the phenomenon embodied by the concept of non-organised user influence in fact appropriates the concept of user influence? - or

whether this phenomenon simply covers the qualities that should naturally be a component of any interpersonal relationship?

The *non-organised* user influence would appear to be a condition for establishing successful *organised* user influence at the accommodation facilities, and hence seems to be an essential element in the development of a culture of user involvement at the accommodation facilities. And does this aspect then favour the concept of "user influence" or does it merely indicate that the implementation of a culture of user involvement at the accommodation facilities has to be framed by acceptance, respect and reciprocity between staff and residents? And if non-organised user influence does not merit the designation "user influence" – what then does the concept denote?

In our definition and operationalisation of the concepts of user influence and user involvement, we asserted that *user involvement* covers those matters at the accommodation facility which management gives residents the opportunity to involve themselves in, while *user influence* comprises the actual involvement of the residents which is facilitated by and arises out of the parameters for user involvement which management defines. In that context, is it then reasonable to argue that the concept of "non-organised user influence" in fact covers the same conditions as the concept of user involvement? The fact that non-organised user influence – like user involvement – represents staff's acceptance that user influence may be exerted within a given area? Or are the two concepts distinguished by the initiatives underlying the actions; whereas user involvement in its purest form embodies management's decisions as to which areas residents can achieve influence over, while non-organised user influence arises in interaction between staff/management and the residents?

The extent to which the concept of non-organised user influence may justifiably be categorised as user influence proper, we will leave the reader to judge. Whatever the case, the present survey underlines the importance of reciprocity and respect in the relationship between staff and residents in efforts to achieve user influence. Our interpretation of the results of the survey queries the dilemma for staff of catering to the residents' interests versus the staff's dependency on delivering visible results in their day-to-day work on user involvement. This dependency must to a great extent be attributed to the political objectives for sociopolitical programmes for the homeless, which at present strive for normalisation as the primary goal. We would argue that successful user influence at accommodation facilities for the homeless will entail that future efforts acknowledge and appreciate, to a greater extent than in the past, phenomena such as non-organised user influence. This claim is supported by the tendencies we identified in both our qualitative and quantitative surveys; it is not the organised, visible and measurable user influence that enhances the residents' empowerment and their

satisfaction with their daily lives, but rather an atmosphere of acceptance, respect and reciprocity in which staff are motivated to take their lead from the residents' own wishes and needs.

4.2 Evaluation of the survey

In this section we will be evaluating factors that may have strengthened or weakened the validity[23] and reliability of the survey[24].

4.2.1 Internal validity in the quantitative component of the survey

Throughout the survey we made every effort to select our respondents at random from among residents and staff at the accommodation facilities. In spite of this, there is a risk that those who chose to take part in the survey may have been residents and staff with a particular interest in user influence. This may have affected the results of the survey in different directions. First and foremost it is conceivable that residents who perceived a low degree of user influence at their accommodation facility were the ones who opted to take part in the survey in order to direct focus at this problem. This may mean that the estimate of the residents' perceived degree of user influence at the accommodation facilities was set too low in relation to the actual perceived user influence among residents at the Section-110 accommodation facilities. The opposite may have applied to staff, if those representatives of the staff who took part in the survey were those with a keen interest in user influence and who were perhaps even responsible for it in their day-to-day work at the respective accommodation facilities[25]. Were that the case, there would be a high risk that, for those representatives of the staff who participated, a higher degree of user influence was perceived than among the rest of the staff at the accommodation facilities, which would then render our estimate for staff's perceived user influence too high.

Overall, these two tendencies, that the estimate for residents' perceived user influence is too low, while the estimate for staff's perceived user influence is too high, would entail that the difference between residents' and staff's perceived user influence appears greater than it actually is.

However, there is another possibility to consider. It is reasonable to imagine that a majority of those residents who agreed to participate in the survey are also those residents who possess the greatest personal drive to involve themselves in other activities at the accommodation facility. This might have entailed that these residents' perceived degree of user influence in their daily lives at the facility is higher than that of the other residents in that they themselves

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[23] The term *validity*, relating to the survey, may be divided into internal and external validity, where internal validity refers to the extent to which the survey measures that which it purports to and hence evaluates the validity of the comparisons made in the population under survey. External validity, on the other hand, refers to the potential for generalising the survey results to other people than those included in the survey (Rothman and Greenland 1998).

[24] The term *reliability* refers to how dependable and precise the survey is; high reliability means that the survey is *not* encumbered by random errors or statistical uncertainties (Rothman and Greenland 1998).

[25] This situation is not inconceivable, since, on several visits to accommodation facilities, we were obliged to leave a certain number of questionnaires at the facility, which we asked the staff to complete and return. In these instances, it is likely that those staff who work most on user influence took on/were assigned this task.

seek out and involve themselves in different matters and activities. This situation would then affect the estimate for the residents' perceived user influence in the opposite direction to that described above; the estimate for the residents' perceived degree of user influence would be too high in relation to the actual state of affairs and the estimate for the difference between staff's and resident' perceived user influence would consequently be estimated too low.

As described in the section "2.2.4 Issue and collection of the questionnaires", collection of the survey's quantitative material took place on the basis of two different methods: (1) by the respondents completing the questionnaires themselves and (2) through structured interviews. This methodological differentiation may have led to differentiated misclassification of the respondents within the categories of "low", "medium" and "high" degrees of user influence. This would be attributable to two factors. Firstly, that the two methods were not applied identically among the respondents, since only residents – and not staff – were given the option of responding to the questionnaire in a structured interview. Secondly, responses to the questionnaire may be affected by the method which was used for completing the questionnaire, since residents who responded through a structured interview would have had better opportunity for having the significance and intention of certain questions explained to them, and may have been affected by the interviewer's very presence. It is, however, impossible to determine in which direction this factor might have influenced the results of the survey. However, it cannot be denied that the interviewer in his/her capacity as representative of SAND might have influenced the residents to report, more or less consciously, a lower degree of user influence than they might otherwise have done, either in the hope that this would give impetus to SAND's efforts to improve user influence at Section-110 accommodation facilities in the future, or because the residents assumed that responses of that order were what the interviewer wanted to hear[26]. Were that the case, the result would be an overestimation of the difference between the residents' and staff's perceived actual degree of user influence at the accommodation facilities, since too many residents in relation to staff would end up miscategorised in the direction of a low degree of user influence.

As illustrated above, there are several potential sources of bias in this survey which might have resulted in misclassification of the respondents. However, we maintain that our method of data collection (see section "2.2.4 Issue and collection of questionnaires") served to reduce the risk of both selection and information bias substantially compared with the risk if we had chosen to issue and collect questionnaires by post. Had that been the case, the residents

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[26] A known risk affecting data collection by interview is that respondents, consciously or not, try to make a positive impression on the interviewer and therefore allows their responses to be coloured towards what they expect will please the interviewer (Juul 2006: 114).

would have had to complete and return the questionnaires unaided, which would have entailed more organisation and initiative on the part of the residents and thus increased the risk that only residents with a particular level of commitment and personal drive would have participated in the survey.

As described earlier, the questionnaire was pre-tested and pilot-tested by suitable individuals with knowledge of homeless issues and questionnaire design, respectively. However, it should be pointed out that additional validity testing could have been carried out on the questionnaire to establish its validity more firmly (for further details, see Fayers & Machin, 2001). For example, several questionnaire comments from respondents indicated that the questionnaire questions and associated response categories were in several instances not satisfactorily designed to reflect the response the respondents wished to provide, for example:

"Question 10 does not allow for the response I need: I plan the menu independently, but tend on the whole always to accommodate any requests from the residents. It's just not that often that I get any requests." (Questionnaire comment, staff)

"The user influence issue isn't quite as black and white as the responses in the questionnaire would have you think. There is more influence than the responses allow for." (Questionnaire comment, manager)

This circumstance is attributable either to the fact that the pilot-testing of the questionnaire was not sufficiently thorough, or that the amenities at the disposal of Section-110 accommodation facilities are so different in nature that they cannot be rated on the basis of a single, standard questionnaire. The following three questionnaire comments from staff and managers support the latter hypothesis: *"Dear me – it's really difficult to complete this questionnaire. We could almost do with one for each of our amenities."* (Questionnaire comment, manager)

"We are very atypical in relation to what must be your assumptions. The residents live in independent flats and use us as an amenity – not a must […]" (Questionnaire comment, manager)

"The residents receive no meals. They shop for and prepare food themselves" (Questionnaire comment, manager)

In any circumstances, the deficiencies and imprecisions described above will have impaired the internal validity of the survey. This entails that in future surveys of user influence – and other aspects – at Section-110 accommodation facilities, the viability of questionnaires as a method of data collection should be carefully considered.

In connection with completion of the questionnaires, we found repeated instances of residents misunderstanding the questions to one extent or another. Our intention for questions 9-16, which operationalise what degree of user influence occurs at the accommodation facilities, was

to get the respondents to indicate how *the residents' group as a whole* was involved in different matters at the facility. What we found, however, was that a number of the residents indicated instead the extent to which *they themselves* participated in various activities at the facility.

We also found several instances of residents misinterpreting the response categories for questions 9-16, in that they checked the "Don't know" category instead of "No information" if there was an area they were not involved in – and hence knew nothing about. These misinterpretations of questions and response categories encumbered the body of data with a lack of precision which may have resulted in a systematic miscategorisation of the respondents. In the statistical analysis, the "Don't know" categories were either discarded or recoded so that they were weighted as neutral in the analysis. The residents' misinterpretation of the response categories, e.g. "Don't know" category checked instead of "No influence", may thus have resulted in the relevant responses indicating that the residents perceived there to be a higher degree of user influence than they had. However, it must be expected that this problem would be restricted to those responses that were not obtained through structured interviews.

4.2.2 Reliability in the quantitative component of the survey

Our relatively small survey population entails that the statistical surveys obtained in the analysis are encumbered by a fair amount of random uncertainty. It is therefore not inconceivable that we would have identified additional significant correlations in our survey if the body of our data had been based on responses from more respondents[27]. This factor presumably accounts for why our statistical analysis precluded the notion that a number of different background variables affect the residents' perceived user influence (see section "3.1.2 The degree of user influence at Section-110 accommodation facilities").

However, the survey does reveal certain distinct correlations that are highly significant and which there are no grounds to call into question. That said, there can be no doubt that both the survey's informative basis and its reliability would have been considerably improved had the body of data been larger.

The fact that the survey material was collected with the aid of two different methods and that 14 individuals participated in this process may have impaired the reliability of the survey. In spite of the fact that all 14 individuals were familiarised with a set of guidelines that was to be

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[27] The P-value in a statistical test is an expression of the probability of significance and is a function of the strength of the correlation and the size of the sample. This means that the more people there are in a survey, the better the statistical test will be able to reveal even weak correlations, whereas moderate to strong correlations will be non-significant or only weakly significant in surveys with few respondents (Kreiner 1999: 265 f).

adhered to closely in connection with collection of data at the accommodation facilities, there can be no doubt that these individuals will have influenced and guided the respondents to different degrees and in different directions, which will have weakened the precision of the survey.

We believe however that certain factors served to improve the reliability. For example, we presume that the anonymity of the survey and the fact that the respondents had to hand in their questionnaires to us immediately after completing them ensured that both manager and residents felt they could be honest in their responses since they did not have to worry that the responses could subsequently be identified with them. In addition, the methodological fact that the overall degree of user influence was estimated on the basis of 8 different questions/variables, increased the probability that the respondents were classified correctly within the categories of a "low", "medium" or "high" degree of user influence[28].

4.2.3 Internal validity and reliability in the qualitative component of the survey

Before conducting the interviews we mapped our understanding of user influence at Section-110 accommodation facilities. In this way, both during the interviews and their subsequent analysis we were fully aware of how our own expectations concerning various dilemmas and correlations might influence the types of questions we posed the respondents, as well as the manner in which we subsequently identified key themes in the interviews. This is an essential criterion for sound qualitative validity (Jørgensen 1989).

Throughout the interviews with respondents, we sought to achieve maximum agreement between the respondents' statements and our comprehension of these by asking probing questions about topics raised by the respondents, until the respondents were able to affirm our reiteration of their statement. This approach presumably made a positive contribution to the intersubjectivity criterion of qualitative research and thereby increased both the reliability and the validity of the survey (ibid.). All the interviews were conducted at the respective accommodation facilities in a closed room, where only the informant and the two interviewers were present. We assume that these arrangements increased the sincerity and honesty of the interview responses and thereby increased the reliability of the survey.

However, certain factors and circumstances in the survey must be presumed to have impaired the validity. The fact that only one person performed the analysis of the interviews means that identification of key themes may be coloured by this individual's understanding and subjective interpretation of the results.

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[28] Since the respondents' answers to each individual question involve a certain degree of chance, the questionnaire's reliability increases by having more questions elucidate the concept one wishes to investigate (Fayers & Machin 2001:72).

4.2.4 Overall evaluation of the results of the survey and external validity

In spite of the fact that the survey's quantitative component is encumbered by a number of methodological and statistical uncertainties, we maintain that all in all the internal validity of the survey is relatively high. Both the limited body of data and the methodological uncertainties that prevail in the survey can by and large be attributed to the fact that homeless people are a difficult population group to survey. If we compare our materials, methods and approaches with those in other surveys of and relating to homelessness in Denmark, we can only be satisfied with the outcome. For example, the number of respondents in our survey was high compared with many other quantitative studies in this field.

We maintain that it is reasonable to assume that the results of the survey provide a reliable picture of user influence at the 36 Section-110 accommodation facilities included in our survey. In addition, it should be noted that many of the correlations identified by the survey are unequivocal, significant and also supported by the qualitative results of the survey. These factors tell in favour of the viability of abstracting the results from time and place and generalising them for a broad cross-section of Section-110 accommodation facilities for the homeless in Denmark. It should, however, be reiterated that the failure of our survey to identify factors that influence the residents' perception of user influence is probably ascribable to the body of data being too small, meaning that they *should not be interpreted as insubstantial factors*.

In a follow-up survey it will be relevant to devote more resources to increasing the number of respondents and minimising the occurrence of bias. Among other things, it would be ideal if resources were allocated to carrying out an even larger survey in which all data were collected as structured interviews.

5. Conclusion

The present survey shows that there is good agreement between *which areas* residents and staff state that they find the greatest degree of user influence over at Section-110 accommodation facilities, but that the staff generally perceive there to be a *higher degree* of user influence than the residents do.

We also identified a tendency for residents of private-sector accommodation facilities to report a higher degree of user influence than residents of public-sector ones.

The survey's results show furthermore that residents and staff are agreed that user influence is most important in matters which affect the residents directly in their daily lives at the accommodation facilities, while user influence in operational matters is assessed as less important. However, there is a clear tendency for the residents to rate user influence in the operational matters as *more important* than the staff do.

In general, on the basis of the present survey, we may conclude that there is good agreement between the matters which the residents find it most important to have influence over and the matters where they, in practice, actually exercise the greatest degree of influence.

User influence at Section-110 accommodation facilities is a multi-faceted phenomenon, enacted in an arena in which different interests, needs and power struggles are in play. As a result, user influence is complicated by the management and staff, on the one hand, perceiving that the residents exhibit a lack of commitment to user influence, while the residents, on the other, perceive that they have no possibility of achieving real influence on conditions at the accommodation facility, since, in the last analysis, it is the management which has the power to decide.

In daily life, two forms of user influence are exercised at the Section-110 accommodation facilities, organised and non-organised. While non-organised user influence may be instrumental in strengthening the residents' capacity for action and empowerment during their residency, organised user influence appears *not* to affect the residents' empowerment.

Several trends in the survey underline the importance of reciprocity and respect in the day-to-day relationships between staff and residents at Section-110 accommodation facilities. In working towards a productive culture of user-influence, it is essential for the residents to be included in the organisation of user influence, and that specific efforts are made to develop methods to encourage a rapprochement between staff and residents over the question of user influence.

6. Outlook

The survey on which this report is based was carried out in the autumn of 2006. At this time, it was the Danish county councils which had the obligation to offer the homeless temporary residency at an accommodation facility. As a consequence of the local government reform which came into force on 1 January 2007, the social services domain – including responsibility for ensuring sufficient accommodation placements for the homeless – has become a municipal responsibility. Through this process, the legislation has been redrafted and slightly amended, but accommodation provision for the homeless (Section-110) is fundamentally the same as before the local government reform.

The change from a county level framework to a local authority one offers new prospects for user involvement at the accommodation facilities. We believe it is worth outlining some of these.

Just as was the case for the counties, the local authorities have the option to lay down rules and parameters for how user involvement at Section-110 accommodation facilities is to take place. To date, the practice has been for the accommodation facilities themselves to interpret the legislation and prepare their own guidelines for how the users should be involved. It is difficult to imagine that the local authorities will change this.

But what is more certain is that the support the accommodation facilities have provided to the individual users in their relationships with the local authority assistance system will be reduced. When the accommodation facility's staff are actually "local authority employees", this gives them an obligation to act in accordance with the guidelines the local authority sets out for the accommodation facilities and other social services. There are therefore two scenarios to be feared, both of which will have consequences for the homeless.

Firstly, the local authority now has a financial interest in the user staying for the shortest possible time at the accommodation facility, since a stay here is much more expensive for the local authority than covering the costs of a standard tenancy. The resident's possible desire to stay longer at the accommodation facility and, in general, to be involved in programming his personal development plan for the residency may therefore be put under pressure.

Secondly, there is a concern that this economic consideration will produce a general trend for the local authorities to cut into the accommodation facilities' range of services to this user group. This will reduce the residents' opportunities for involvement in shaping the services to their needs, since the local authorities will not actually be allowing the accommodation facilities the scope of action to offer the users more than having their most basic needs met.

In extension of this scenario, there actually arises a potential for the local authorities, albeit indirectly, to restrict the users' opportunity to influence conditions which are important for

their daily lives at the accommodation facility. At worst, such a development would lead to less user influence and more of the old workhouses' "toe the line" doctrine.

A powerful challenge must therefore be sounded to the Danish local authorities to tailor their services to the homeless on the basis of the wishes and needs the homeless actually have, rather than allowing short-sighted economic arguments to prevail. If the homeless are to receive services that address their complex problems, it will require active participation and commitment from the homeless themselves. In the last analysis, this will offer the best services, the most satisfied citizens and the lowest costs – both human and financial.

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A questionnaire concerning user influence at Section- 110 accommodation facilities for the homeless

Your opinion matters to us
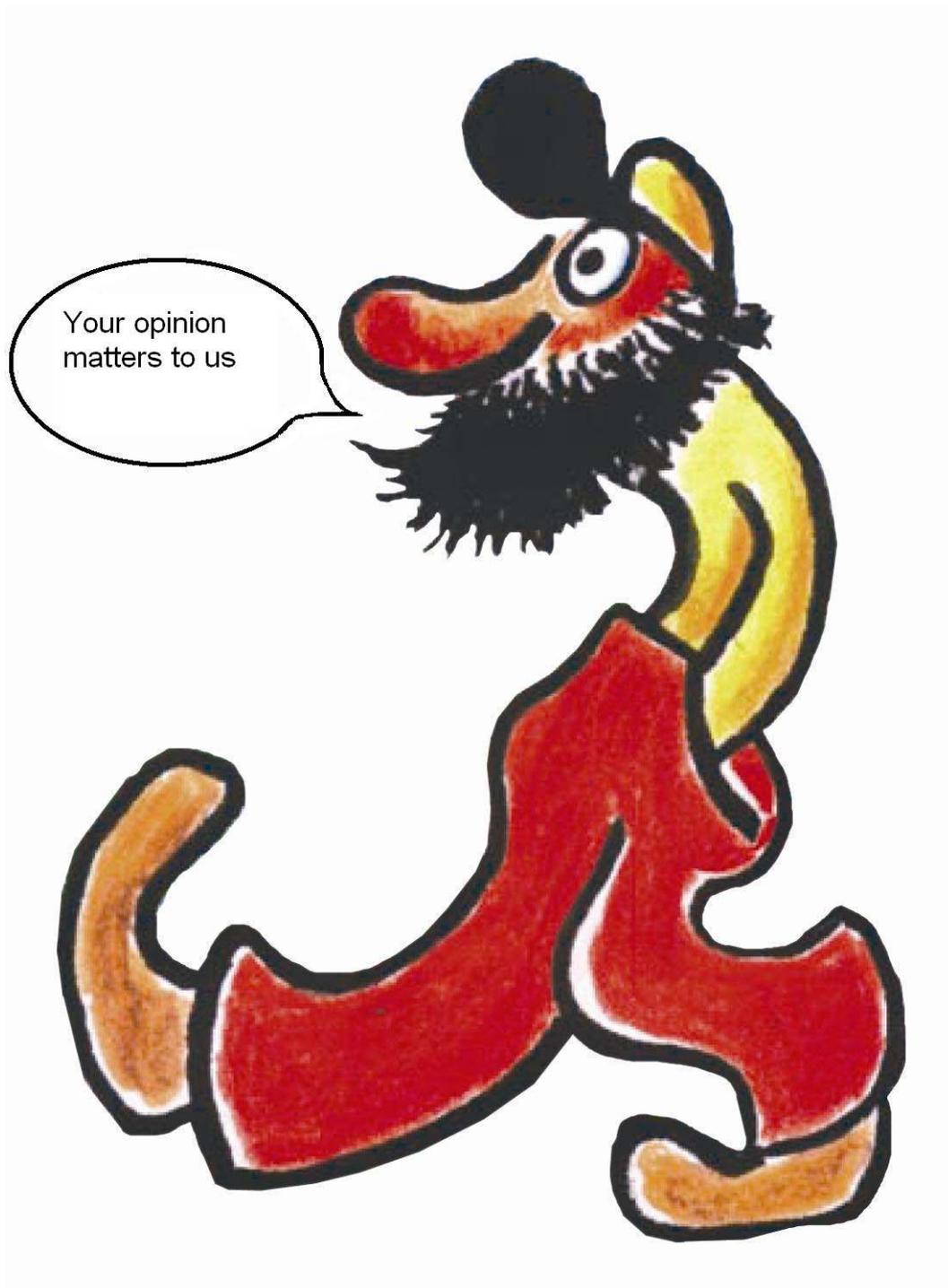
SAND – the Danish national organisation for homeless people

Before you complete this questionnaire

We are a project group under the management of SAND - the national organisation for the homeless - which, with the aid of this questionnaire, is seeking to investigate various aspects of user influence on Section-94 accommodation facilities for the homeless. For this, we need your help!

Participation in the survey is voluntary, but your responses will help us greatly and will be an important means of improving future user influence on accommodation facilities for the homeless.

To achieve meaningful results, it is important that you answer the questions honestly.

Your responses to the questionnaire will be anonymous and will be treated confidentially.

To complete the questionnaire, please put **one cross against each question, unless otherwise indicated**. If you put a cross in the wrong place by mistake, blank out the box completely and put a new cross next to the answer you want to give. If you come across a question you do not want to answer, simply skip over it and answer the rest of the questionnaire.

With thanks in advance for your help!

SAND

The first questions deal with your background

1. What is your gender? □ Female   □ Male

2. In what year were you born?   19___

3. What is your ethnic background? □ Danish   □ Other

Please specify _____

4. Are you a resident, staff or a manager?

□ Resident   □ staff   □ Manager

If you are staff or a manager, please jump to question 9. If you are a resident, please go on to the next question.

5. How long have you lived in this accommodation?

□ Less than 1 month

□ 1-3 months

□ More than 3, but less than 6 months

□ 6-12 months

□ More than 12 months

6. What is your educational background?
(please put one cross only)

□ 8 or fewer years of education	□ Short-cycle further education (2-3 years)
□ 9-11 years of education (lower secondary school or Folkeskole leaving exam)	□ Medium-length further education (3-4 years)
□ 12-13 years of education (6th form leaving certificate)	□ Long-cycle further education (at least 5 years)
□ Skilled craftsman	□ Other

7. For how many years in total have you been homeless?

□ Less than 1 year

□ 1-5 years

□ More than 5, but less than 10 years

□ More than 10 years

The following questions concern daily life at the accommodation facility

8a. Is there a residents' committee at the accommodation facility?

☐ Yes ☐ No ☐ Don't know

- If Yes:

b. Are you a member? ☐ Yes ☐ No

9. Which of the following statements best describes the residents' influence on which recreational activities are on offer at the accommodation facility?
(please put one cross only)

☐	The residents are <u>not</u> informed of which recreational activities it is possible to take part in at the accommodation facility.
☐	The residents are informed of which recreational activities the accommodation facility is able to offer, but are not involved in any decisions about them.
☐	The residents and staff discuss which activities should be available, but, in case of disagreement, it is the staff who decide.
☐	The residents and staff decide jointly which activities should be available.
☐	The residents decide for themselves which activities should be available.
☐	Don't know.

10. What influence do the residents have on decisions about the <u>food</u> which is served at the accommodation facility?
(please put one cross only)

☐	The residents are <u>not</u> informed in advance of what food will be served at the accommodation facility.
☐	The residents are informed about what food will be served at the accommodation facility, but they are not involved in making the decision.
☐	The residents and staff discuss what food should be served, but, in case of disagreement, it is the staff who decide.
☐	The residents and staff decide jointly what food should be served.
☐	The residents decide for themselves which food should be served.

☐   Don't know.

11. What influence do the residents have on the <u>arrangement of common rooms</u> in the accommodation facility?
(please put one cross only)

☐   The residents are <u>not</u> informed about decisions concerning the replacement and rearrangement of furniture.
☐   The residents are informed about decisions concerning the arrangement of common rooms, But are not involved in decisions on what the arrangement should be.
☐   The residents and staff discuss the arrangement of common rooms, but, in case of disagreement, it is the staff who decide.
☐   The residents and staff decide jointly how the common rooms should be arranged.
☐   The residents decide for themselves how the common rooms should be arranged.
☐   Don't know.

The next questions concern the accommodation facility's general rules and regulations.

12. What influence do the residents have over the accommodation facility's <u>house rules</u>?
(please put one cross only)

☐   The residents are <u>not</u> informed about the accommodation facility's rules until they have broken them.
☐   The residents are informed about the accommodation facility's rules, but they are not involved in establishing them.
☐   The residents and staff discuss what rules there should be in the accommodation facility, but, in case of disagreement, it is the staff who establish the rules.
☐   The residents and staff decide jointly what the accommodation facility's house rules should be.
☐   The residents decide for themselves what the accommodation facility's house rules should be.
☐   Don't know.

13. What influence do the residents have on planning the accommodation facility's <u>budget</u>?
(please put one cross only)

☐   The residents are <u>not</u> informed about how the accommodation facility's money is spent.
☐   The residents are informed about how the accommodation facility's money is spent, but they are not involved in the decisions.
☐   The residents and staff discuss how the accommodation facility's money is spent, but, in case of disagreement, it is the staff who decide.
☐   The residents and staff decide jointly how the accommodation facility's money is to be spent.
☐   The residents themselves decide how the accommodation facility's money is to be spent.
☐   Don't know.

14a. Has a plan been drawn up for the personal development the individual resident should undergo during his/her residency at the accommodation facility?

☐ Yes   ☐ No   ☐ Don't know

If Yes:

b. What influence do the residents have on programming of their <u>personal development plan</u>?
(please put one cross only)

☐   The residents are <u>not</u> informed about what personal development the plan is for them to undergo during their residency at the accommodation facility.
☐   The residents are informed about the plan for their development, but they are not involved in programming it.
☐   The residents and staff discuss the plan for the resident's personal development, but, in case of disagreement, it is the staff who programme the personal development plan.
☐   The residents and staff decide jointly on the plan for the resident's personal development during his/her residency at the accommodation facility.
☐   The residents themselves programme the personal development plan for their residency at the accommodation facility.
☐   Don't know.

15. What influence do the residents have on when the accommodation facility's <u>staff are available</u> to the residents (the staff's working hours)?
(please put one cross only)

☐   The resident's are <u>not</u> informed about what times the staff are available to them.
☐   The residents are informed about the times the staff are available to them, but the residents are not involved in setting these times.
☐   The residents and staff discuss which times the staff will be available to the residents, but, in case of disagreement, it is the staff who decide.
☐   The residents and staff decide jointly when the staff shall be available.
☐   The residents themselves decide on the times the staff are to be available.
☐   Don't know.

16. What influence do the residents have on the <u>work tasks</u> they are to perform while they are living at the accommodation facility?
(please put one cross only)

☐   The residents are <u>not</u> presented with different types of work tasks at the accommodation facility.
☐   The residents are presented with different types of work tasks, but do not themselves decide which of these tasks they will perform.
☐   The residents and staff discuss which work tasks the residents might perform, but, in case of disagreement, it is the staff who decide.
☐   The residents and staff decide jointly which work tasks the residents will perform at the accommodation facility.
☐   The residents decide for themselves which work tasks they will perform at the accommodation facility.
☐   Don't know.

The following questions are intended to illustrate <u>your attitude</u> to user influence.

17. How important do you think it is for the residents to have influence in the following areas:
(please put one cross in <u>each line</u>)

	Very important	Important	Not important
Voluntary activities	☐	☐	☐
Work tasks at the accommodation facility	☐	☐	☐
What food is served	☐	☐	☐
The arrangement of common rooms	☐	☐	☐
The programming of a personal development plan for the residency at the accommodation facility	☐	☐	☐
How the accommodation facility´s money is spent	☐	☐	☐
House rules	☐	☐	☐
The staff´s working hours	☐	☐	☐

18. In which <u>3</u> of the following areas do you think it is <u>most important</u> for the residents to have influence?
(please put a cross next to the **3** most important areas)

☐ Voluntary activities	☐ The programming of a personal development plan for the residency at the accommodation facility
☐ Work tasks at the accommodation facility	☐ How the accommodation facility's money is spent
☐ What food is served	☐ House rules
☐ The arrangement of common rooms	☐ The staff's working hours

19. All in all, how <u>satisfied</u> are you with the user influence that exists at the accommodation facility?

Very satisfied	Fairly satisfied	Neither satisfied nor dissatisfied	Somewhat dissatisfied	Very dissatisfied
☐	☐	☐	☐	☐

If you are staff or a manager, you have now finished answering this questionnaire. You may enter any comments at the bottom of the last page.

The last questions concern your self-respect and your satisfaction with your residency at the accommodation facility.

20. Within the last 14 days, how satisfied have you <u>generally</u> been with your daily life?

□ Very satisfied
□ Fairly satisfied
□ Satisfied and dissatisfied in equal measure
□ Somewhat dissatisfied
□ Very dissatisfied

21. How often do you feel you are in a position to achieve the goals you set yourself?

□ Always
□ Most of the time
□ Some of the time
□ A little of the time
□ At no time

22. How often do you feel accepted by the people you associate with at the accommodation facility?

Always	Often	Sometimes	Hardly ever	Never
□	□	□	□	□

23. All in all, how satisfied are you with living at the accommodation facility?

Very satisfied	Fairly satisfied	Neither satisfied nor dissatisfied	Somewhat dissatisfied	Very dissatisfied
☐	☐	☐	☐	☐

Any comments you have_____

_____

_____

_____

_____

MANY THANKS FOR YOUR HELP