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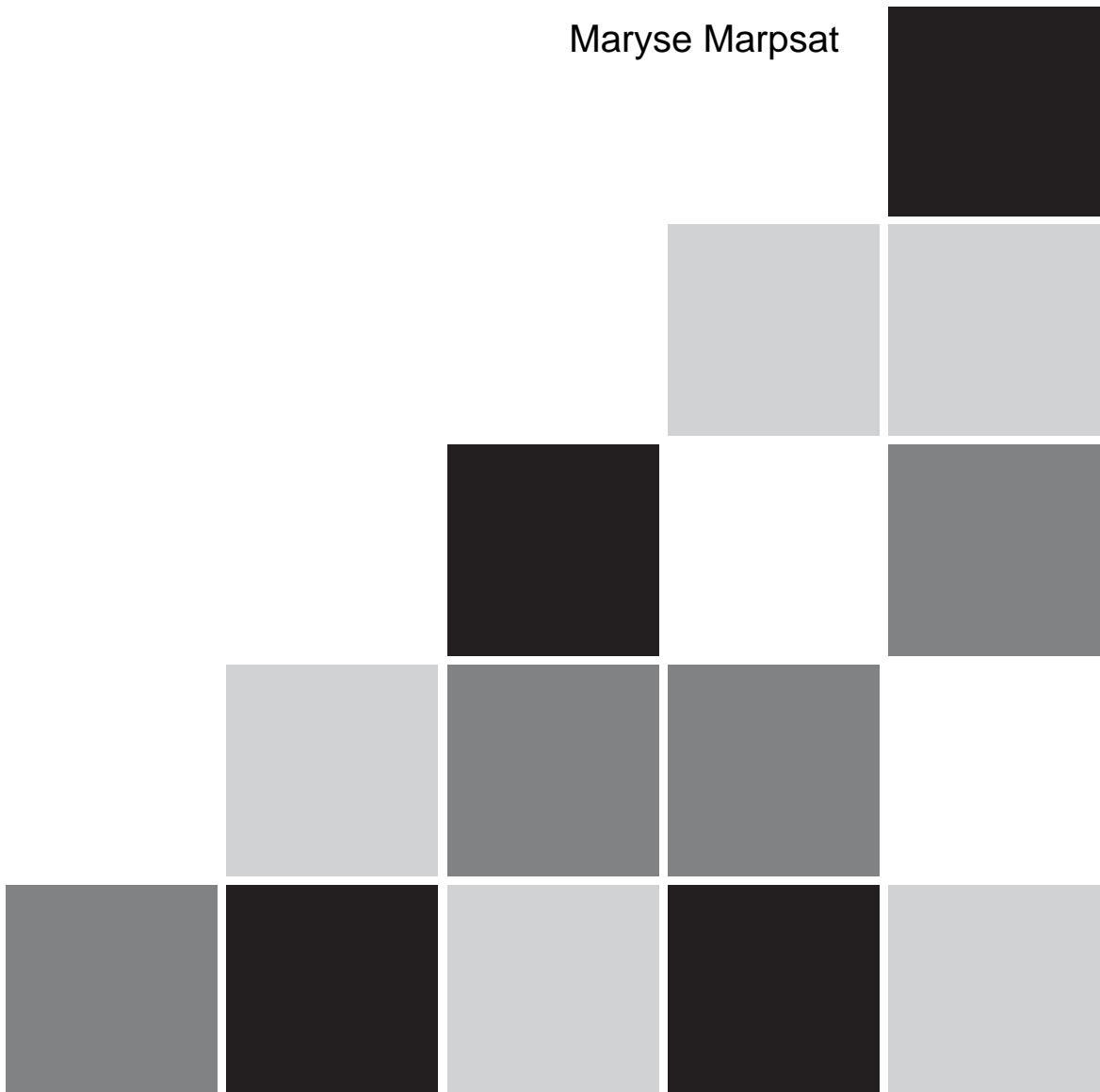
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DOCUMENTS DE TRAVAIL

SERVICES FOR THE HOMELESS IN FRANCE

Description, official statistics, client recording of information
A report for the European Commission

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Services for the homeless in France:

Description, official statistics, client recording of information

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¹ The views expressed in this report are those of the author and not those of INED or any other organization. This report was written as a commissioned paper to be used by the University of Dundee in its report to the European Commission: http://ec.europa.eu/employment_social/social_inclusion/docs/2007/study_homelessness_en.pdf

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Executive Summary

Definition of homelessness in France

Unlike the United Kingdom, France has no statutory definition of homelessness. However, an “official” definition is used for the statistics published by the National Institute of Demographic Studies (INED) and the National Institute of Statistics and Economic Studies (INSEE). Access to social housing is independent of this definition.

The definition of *sans domicile* corresponds to a variety of housing situations that are part of a more general classification in which all housing situations, be they cases of “housing hardship” or not, are classified along four dimensions: housing type, occupancy status, housing quality and amenities, and, finally, security/insecurity over time. *Sans domicile* denotes people whose housing situation is defined in terms of the first two dimensions (housing type and occupancy status), as people living in a place unfit for human habitation or in accommodation run by services for the homeless.

This classification and the *sans-domicile* definition were elaborated in the early 1990s by an ad hoc working group of the National Council for Statistical Information (CNIS), a body that brings together producers and users of French public statistics (government departments, NGOs, trade unions, researchers, etc.). The setting-up of the “homelessness” group (in 1993) was itself the response to a demand that emanated notably from the NGOs.

The full report that is summarized here also makes a few remarks about various items of the ETHOS classification, in particular the use of police recorded incidents to measure domestic violence towards women.

Homeless service providers

Since the 1980s, several initiatives to help the homeless have been launched by charity organizations (for example, the creation of the *Restaurants du Coeur* in 1985, by the French comedian Coluche, received much publicity). In 1993, the *SAMU Social* (Paris social ambulance) was created to provide both an outreach service and a free telephone helpline for the homeless, known by its number as “*le 115*”. Other outreach services followed, supplying those who do not use regular services (and some who do) with food, basic health care and in some cases transport to the shelters. The 115 is now the general number of the free helpline for the homeless, both in Paris (the *Samu Social*) and in the provinces (the FNARS, the National Federation of Social Reintegration Associations, is in charge of the Observatory of the 115 in the provinces, while data from the Paris 115 are analysed by the *Observatoire du Samu Social de Paris*). A single centre in each department informs those in need, particularly about shelter vacancies in the area.

The *centres d'accueil de jour* (day shelters) offer a wide range of everyday services such as laundry facilities, lockers, administrative addresses (for making benefit applications, for example), showers, snacks, as well as cultural activities, and provide access to health-care professionals and social workers. Some of these centres accept only female or young people. The *vestiaires* distribute free clothing and the food distributions provide free or inexpensive hot and cold meals, either at fixed sites or in the street (food vans). Other services provide *health care*.

The activity of the accommodation services has grown steadily over recent years, especially in provision of “emergency” beds. Each year, the Ministry of Social Affairs funds a

programme, initially entitled *pauvreté précarité* (poverty-precarioussness) and later *plan urgence hiver* (winter emergency plan). While the funding is mostly public, the services are delivered mainly by NGOs.

Asylum seekers are supposed to be accommodated in special hostels, the CADA. But in the early 2000s, a shortage of beds in these centres led the NGOs to house families of asylum seekers (together with some other homeless persons) in low-cost hotel accommodation.

Emergency shelters are usually characterized by short duration of stays and only basic types of help. The winter plans are intended to increase the supply of emergency beds during periods of very cold weather.

Long-stay hostels usually take the form of *Centres d'Hébergement et de Réinsertion Sociale* (Centres for Accommodation and Social Reintegration, or CHRS; for more details on the system of accommodation, see box in the full report). In these services (rooms in a collective facility but also self-contained flats or hotel rooms), accommodated people also receive resettlement support. Residents can stay for up to several months, occasionally for years. Staff is better qualified and funding is stable (renewed annually). However, a proportion of CHRS beds are now used for “emergency” situations.

The report gives several examples of directories of services. At the local level, the municipality of Paris produces a guidebook intended for use by the homeless and persons with socio-economic difficulties, and the Regional Observatory of Health (ORS) of the Ile-de-France region (the region that includes Paris and its suburbs) maintains a list to help social workers find accommodation and other services for the homeless. At the national level, the National Federation of Social Reintegration Associations (FNARS) has in the past produced a directory of its member agencies, which it plans to update in the coming months. The FINESS database is a national database of establishments in the health and welfare sectors and is maintained by the Ministry of Welfare/Social Affairs. Part of the FINESS database concerns state-funded accommodation services.

These lists are established for purposes other than data collection (the guidebooks of local authorities are intended for social workers or for the homeless themselves, and do not always list long-stay accommodation services to which access is indirect), or for the purpose of data collection but on only one segment of the services (such as the FINESS database, which is more complete on accommodation services that receive state funding on a permanent basis). The sampling frame of the ES survey (conducted by the DREES, the statistical services of the Ministry of Welfare/Social Affairs), and the database of collective accommodation in the Census (maintained by INSEE), aim at a more complete coverage, but they rely on information supplied by a large number of individual municipalities and NGOs. An INSEE/DREES working group was set up in 2006 to exchange information on those two databases and more particularly, on the “emergency” accommodation services.

Approaches to the collection of official homelessness statistics

There are several main producers of official statistics on homelessness. The National Institute of Statistics and Economic Studies (INSEE) conducted the 2001 survey on users of food distribution and accommodation services (SD2001), but is also in charge of the Census and the Housing Survey. The General Directorate of Social Affairs (DGAS), together with the Directorate of Populations and Migrations (DPM), both parts of the Ministry of Welfare/Social Affairs, publish data about state funded accommodation services, including services for the homeless, for asylum seekers and for refugees. The statistical services of the Ministry of Welfare/Social Affairs (DREES) maintain the FINESS directory and conduct the

ES survey of establishments for persons experiencing socio-economic difficulties (and for disabled persons).

The Ministry of Housing (more precisely the DGUHC) also holds data on longer-term forms of accommodation such as the *résidences sociales*.

The DGAS/DPM data give the number of available beds and are updated every three months. The coverage of these data is limited however, since they omit a number of the shelters (usually “emergency” shelters) that are not funded by central government (but by NGOs or municipalities only, for example) or that only receive subsidies.

A new system for gathering information on CHRS accommodation is currently being implemented, in collaboration with the FNARS. It will collect annual aggregate data, without eliminating the double counts when a person stays in several hostels (i.e. the stays are counted and not the persons). The indicators include the types of accommodation to be found in the CHRS (collective accommodation or self-contained flats, “emergency” hostel or with support, etc.), the number of persons accommodated on 31 December, the financial elements, staff, and various performance indicators such as the housing and employment solutions available to leavers, the average duration of stays, etc. These indicators must be communicated in Excel file format. This system represents the first step towards harmonization of the CHRS activity reports, within the terms of the LOLF².

Data from the DGAS/DPM are exhaustive though on a reduced field.

The ES survey was conducted every other year until 1997. It is now conducted every four years. The persons interviewed are the service providers. Up to 1997, the survey was exhaustive as regards establishments. Data were collected on the homeless users once every four years (one year the users of the establishments for disadvantaged and homeless persons, two years later the users of the institutions for disabled persons). The 2004 survey is exhaustive as regards establishments but the data about users are collected on a nationally representative sample of establishments. However, this sample is not representative at the local (regional, departmental) levels. In the selected institutions, all the users are surveyed.

Up to 1997, the survey did not collect any data on the users of emergency shelters. This changed with the 2004 survey, which gives a description of the people accommodated by emergency services on the night of 8-9 January 2005. This description comprises the following elements: sex, age, family type, general characteristics, housing problems, and type of accommodation most often used in the previous six months. For the other, longer-term, institutions, the data concerning users are in part flow figures (the users that exited the institution in 2004), and in part stock figures (the users present on 15 December 2004). Data are not collected for users of services other than accommodation.

For long-term accommodation, the data collected refer to the users present on 15 December 2004. They include sex, year of birth, family type, socio-occupational category, employment situation, main resources, current and previous forms of accommodation, nationality, legal status (asylum seeker, failed asylum seeker, refugee...), and health insurance cover. For those who left the institution in 2004, the destination is recorded along with various characteristics such as sex, year of birth, dates of entry and exit, occupation and family type, main resources. The limitations of this survey are the small number of variables collected and the fact that it is

² LOLF, or *Loi organique relative aux lois de finances* (1 August 2001; entering into force on 1 January 2006), requires that objectives be presented together with indicators for their evaluation. In the 2006 finance bill, the indicators relating to the “policies for social inclusion” programme (*politiques en faveur de l’inclusion sociale*, programme no. 177) include the number of persons accommodated through the 115, the average cost of a bed in a CHRS, and the number of persons exiting a CHRS into conventional housing.

not representative at the local levels. Its advantage is its regularity (every four years). Here too the emergency shelters are imperfectly covered.

The SD2001 survey by the National Institute of Statistics and Economic Studies (INSEE) is a nationally representative sample survey of the users of food distribution and accommodation services. Rough sleepers are covered by the survey through their use of food distribution services and also because a large proportion of them use emergency shelters for at least a few days in the winter. The coverage of this survey has been studied by INED.

The SD2001 survey has a very detailed questionnaire and permits in-depth analyses that shed light on the life courses of homeless people, and on their living conditions and use of services. Its limitations are that it is representative only at the national level (and for the Paris region), and that it is infrequent (a new survey is being planned for 2011). For the intervening period, the Census (which is now a continuous survey) gives estimates of the homeless in collective accommodation and of rough sleepers.

Approaches to service provider client record systems

Client record systems can differ greatly from one service to another. Those services with “unconditional access” may record only the numbers of persons present each day (some emergency shelters) or not even that (day centres with a large throughput that can only record users of a particular service provided in the centre, such as access to a social worker). Asking users for information, especially identification information to avoid double-counts, could compromise unconditional access and deter people who might be in illegal situations, without valid residence permits for example, thus preventing them from seeking help.

In the long-stay CHRS facilities, for example, recording client information is easier, but there is not always a computer-assisted system. However, some are using software applications for this purpose.

Information systems that allow files to be merged over a geographical area (such as a department or a region) do exist in a few cases but they encounter many difficulties. It seems that the human factor is particularly important. This data gathering is facilitated if the following conditions are satisfied: low turn-over of the staff who are “leaders” in this operation and of those who collect the data; development of links between service providers, and between them and the DDASS (or DRASS); sufficient time spent explaining the use of the software at the beginning of the operation, and making it user-friendly.

The full report gives a few examples of the ways client information is recorded in the most advanced cases. The *SAMU Social de Paris* (its free telephone helpline service, the Paris 115) maintains a data file of its users (without double counting), based upon the 4D application. The ORSAS-Lorraine maintained a system for the CHRS in the Lorraine region, from 1995 to 2005, using an identifier for each person accommodated, but some CHRS stopped participating because they felt it made their workload too heavy. France-Terre d’Asile (not strictly in the homeless field, since it runs hostels for asylum seekers) has developed a similar application, Asylweb. The CHRS in the Poitou-Charentes region also use a system comparable to that of ORSAS-Lorraine, called Ophelia³. Finally, three departments from the Rhône-Alpes region are developing a system that will record accommodation demand and supply using a broad definition of accommodation, including specialist accommodation for asylum seekers (CADA) migrant workers (FTM) and mother-and-child refugees (*Centres maternels*).

³ Use of the Progedis software by other service providers has been noted by the FNARS.

It seems that emergency shelters, whether or not they are CHRS, and particularly those where access is unconditional and that handle large flows of people over a short period of time, would have many difficulties implementing such a system. With more resources and, in particular, with better training of the people in charge of the system, some (and possibly many) CHRS could improve their record keeping, especially as the reports they are required to submit to their funding agencies will become harmonized in the years to come in line with the DGAS initiative and the requirements of the LOLF. It remains to be seen (in the light of the difficulties encountered by ORSAS, for example, a case that INED has studied in detail) whether pooling these data before aggregating the results, at least at the departmental or regional level, and dealing with double-counting, is a realistic objective, unless large amounts of resources are allocated in terms of equipment, training, time and networking. The failure of the ANCHOR system, a North American example of use of a general client record system that gave interesting results at the local level but whose generalization ran into opposition from providers, shows that the necessary conditions are not always met. This example has been studied at greater length in (Frechon, Marpsat, 2004), which also gives some details about other HMIS (homeless management information systems, to use the American term).

The various problems posed by client recording of information can be summarized as follows:

- **collecting aggregate data at the national level:** already done by the DGAS for the CHRS, i.e. accommodation services, mostly long-stay, with permanent public funding, and for the beds provided under the winter emergency plan. But data are not collected for services that are not state funded. In the years to come, collection of data from CHRS should be done according to a set of guidelines, with adoption of a standard report format (the FNARS is working with the DGAS on this project). These data relate to people at a specific point in time, or to stays (since no identifier is used at the national level to ensure a person is only counted once, even if they made several stays in the same year).

- **collecting individual data at the service provider's level:** a strict compliance with the law would require notifying the CNIL (national data protection agency), and possibly asking it to give an authorization or at least issue an opinion, depending on the type of data collected. A "simplified notification" procedure could be developed if the data collected were everywhere of the same kind.

Data collection is very difficult in the "emergency shelters" because of the high number of entries on any given day.

- **collecting data at the individual level, for a group of services, or a geographical area, including nationally:** in addition to compliance with CNIL rules, there are ethical and technical issues.

If the data refer to persons and not only to stays, use of an identifier is necessary. A system of national identity numbers operates in France, but some persons (for example, illegal migrants who have never been affiliated to the social security system) do not have a number. Besides, use of the national identity number is discouraged by the CNIL, so a specific identifier would almost certainly have to be devised. However, use of identifiers is not always well accepted in France, and submitting the homeless to something that is rejected by the rest of the population raises an ethical issue.

If the geographical area concerned is very large, the task of dealing with double counts and errors may present serious technical difficulties.

According to the persons interviewed for this report, in addition to the need for computers, software, staff training and for time to be allotted to the task of recording data, there is also an important human factor. It is necessary to maintain staff motivation by letting them see the

outcome of their work, by organizing networks between the various service providers and between service providers and the data collection agency. These relationships are bound to suffer when, as is often the case, staff turnover is high.

Report

Since official statistics on homelessness are well developed in France and are compiled with the collaboration of NGOs and other organizations providing for the homeless, the description of these statistics will be easier to understand if the nature and type of organizations providing services and the services themselves are described before the official statistics are considered. Hence the section on “Homeless service providers” precedes that on “Approaches to data collection on homelessness”.

Acronyms are explained in the Glossary (Appendix 6). For a detailed description of the agencies and provisions they designate, see the bilingual glossary published by the MIRE (listed in the general references).

Part One. Definition of homelessness in France

I. The CNIS classification of housing situations and the definition of homelessness: a historical perspective

Unlike the United Kingdom, France has no statutory definition of homelessness. The term “sans domicile”—that translates approximately as “homeless”—is not used to determine priorities for access to social housing, although the list of priority need households has many common points with those in the constituent countries of the UK. However, since the development of surveys on homelessness in the early 1990s, there has been what amounts to an “official” definition of homelessness, inasmuch as it is used in official figures and by the National Institute of Statistics and Economic Studies. This definition is based solely on the housing situation (exclusive of other aspects such as mental health, social network etc.). “Housing situation” does not include the social aspects of housing, at least not those that lead to considering as homeless those persons who are victims of domestic violence⁴.

In France, during the 1980s, only a few isolated studies, mostly of a qualitative nature, focused on the homeless. The only statistical data in official statistics were those published by the Ministry of Social Affairs concerning state funded shelters (the ES survey, see below). The early 1990s appear as the years when homelessness emerged as a research subject and as a media topic. For their part, the larger NGOs regularly funded research institutes to produce statistical surveys and studies, or published their own figures. Their studies usually concerned only their clients.

From the 1990s, two broad groups of studies on homeless people can be identified. One is the qualitative, sociological or ethnographical, research financed mainly by the Urban Plan and its successor the *Plan Urbanisme, Construction et Architecture*⁵ (Joseph 1992; Ballet 2003). The other corpus is quantitative research, much of it originating in the work done in the early 1990s by the National Council for Statistical Information (CNIS), a body that brings together producers and users of public statistics (government departments, NGOs, trade unions, researchers, etc.). From 1993 to 1996, an ad hoc group of the CNIS—itsself also composed of statisticians, researchers, members of NGOs and government departments—elaborated

⁴ Their access to social housing, as noted earlier, is a separate issue.

⁵ PUCA - Urban Development, Construction and Architecture Plan attached to the Ministry of Housing but also of regional planning and development and urban issues.

various tools to study homelessness and other situations of housing hardship. Outputs included the INED (French National Institute of Demographic Studies) statistically representative survey of the homeless in Paris, the first of its kind, conducted in 1995 (Marpsat, Firdion, 1999); and a classification of all housing situations, including literal homelessness⁶, based on four dimensions: housing type, occupancy status, housing quality/elements of comfort (including access to water for people not in a conventional dwelling), stability/insecurity (in the durational sense).

The final report of the CNIS homelessness working group (CNIS, 1996) recommended improving the statistical coverage of various marginal housing situations as well as the conducting of a national survey of homeless people. Since this report, the INSEE 2001 national survey of users of accommodation and food distribution services has been conducted, and progress has been made on knowledge of people staying with family or friends and of previous homeless episodes.

The definition of *sans domicile* developed out of this work is that of people who, at a specific point in time, find themselves in one particular housing situation on a continuum of housing situations. Hence it used only the first two dimensions of the CNIS classification, namely, housing type and occupancy status. This definition is the one currently used in the statistics published by INED and INSEE (National Institute of Statistics and Economic Studies) (especially for the figures used in the NAPincl and associated reports such as, for France, the implementation report on NAPincl 2003-2005).

I. 1 A classification of all housing situations

As previously stated, the housing situation is described in terms of four aspects: housing type, occupancy status, housing quality and amenities (including access to a water point for those without housing or shelter), security/insecurity over time (see Appendix 1).

The CNIS group identified a need to take multiple dimensions into account simultaneously, as a situation may be favourable on one dimension (e.g. among types of tenure, being an owner-occupier) but unfavourable on others (e.g. for housing quality, being in a house with no running water).

However, while situations can be classified in terms of the first two dimensions using existing simple classification systems, this can be problematic for the housing quality aspects, which may involve many elements; and for the final dimension (security/insecurity over time), which is difficult to investigate in surveys given that respondents themselves are not always reliably informed about how secure their situation is.

It was also thought important to classify all housing situations, not just those that can be described as *sans-domicile*. As François Clanché observes:

“for the same reasons that the group refused to treat the homeless population as a separate population, so it did not want to establish a list or classification of situations of exclusion that was distinct from that for “ordinary” situations. Although effective observation of these situations clearly requires specific procedures, it was decided to develop a set of classifications that described the full range of housing situations, from the most conventional and most stable, to the least secure and least habitable”⁷.

⁶ See <http://www.cuhp.org/parisworkshop.cfm> and <http://www.cuhp.org/admin/EditDocStore/ACF6C42.pdf>.

⁷ See p. 2 of the Clanché text on www.cuhp.org.

In addition to avoiding stigmatization and the creation of a “statistical ghetto”, this choice presents several advantages, not least that it permits observation and analysis of movements between “housed” and “non-housed” states, and of the housing supply accessible to the low-income population. It is a way of balancing the focus between “situations” and the processes that lead to becoming homeless, in residential terms at least.

I. 2 “Sans domicile”

The situation of *sans domicile* as used in the INED⁸ and INSEE surveys is defined as the fact of sleeping in a place not meant for human habitation or in temporary accommodation provision, i.e. situations defined by reference to the first two dimensions of the CNIS classification (housing type, occupancy status). A working definition of homeless people themselves also meant including a time-related aspect: that chosen was the housing situation on the night before the survey (which is also somewhat restrictive). The methodology guidance notes for the INSEE survey (Brousse *et al.*, forthcoming) give it as:

“A person is therefore deemed to be homeless if sleeping in a place not meant for human habitation or taken in charge by an organization providing accommodation free or for a small co-payment. Such organizations may provide places in communal facilities, rooming hotels, or ordinary flats. The accommodation may be provided for different periods of time, from overnight to several days, weeks or even months.

Places not meant for human habitation are:

- *cellar, closed car park, attic, sheds;*
- *car, railway wagon, boat;*
- *factory, office, warehouse, equipment room;*
- *common parts of a residential building;*
- *derelict buildings, building sites, cave, tent;*
- *underground station, mainline railway station, shopping centre gangways;*
- *street, bridge, open-air car park, park, waste ground, railway.*

(...) A person will be deemed homeless on a given day if they spent the previous night in either of the following two situations: either using temporary accommodation provision, or sleeping in a place not meant for human habitation (street, makeshift shelter).”

I. 3 More on the historical background

This deliberate narrowing-down to the “housing” dimension reflects an analysis of homelessness issues in housing market terms, and a refusal to label the homeless along lines redolent of divisions into “deserving” and “undeserving”. It is also related to the terms in which the problem was couched. The setting-up of the CNIS (temporary) “*sans-abri*” (homelessness) group addressed a demand formulated in the CNIS standing body on demographic and social statistics by Michel Mouillart, a specialist in housing economics, and Françoise Euvrard, representing the Fondation Abbé Pierre’s Commission *Connaître et Evaluer*. The Fondation is an NGO that has published an annual report on *mal-logement* (housing hardship) every year since 1995. Abbé Pierre first engaged with the plight of the

⁸ INED’s working definition of *sans domicile* also included the small proportion of people using the homeless services surveyed and who were living in squats, staying with family or friends, or in paying hotel accommodation.

mal-logés in the 1950s, and he remains a powerful symbol of the defence of those experiencing housing deprivation.

According to Michel Mouillart (interviewed on 7 June 2005), in a context where public policy action on housing was seriously inadequate (sharp decline in help for first-time home ownership and in construction of rented social housing) and housing needs were underestimated, the idea was to press for these needs to be taken into account again. Calling for a survey into homelessness was one way of doing this.

Also, the CNIS has the task of contributing to knowledge in various fields through public statistics. But the very fact of not having permanent housing prevents homeless people from being reached by household surveys, for which the sample frame is generally based in France on a housing list (rather than on population registers as in other European countries, like Belgium).

In these circumstances, it was arguably self-evident to couch the question in terms of housing.

I. 4 Drawing on the US research

The INED researchers tasked with developing a sampling procedure for homeless people took as their starting point the methods used in US research, which were the only ones then existing that focused both on hostel users and street people. The US definitions fulfilled statistical feasibility criteria and were very close to the administrative category defined by the McKinney Act (Stewart B. McKinney Homeless Assistance Act, July 22, 1987). This definition has been criticized on the grounds that by identifying homelessness as a housing problem, the federal government proposed essentially shelter-based solutions. The US Act definition is:

“For the purposes of this chapter, the term “homeless” or “homeless individual” or “homeless person” includes:

- (1) an individual who lacks a fixed, regular, and adequate nighttime residence;*
and
- (2) an individual who has a primary nighttime residence that is*
 - (A) a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for the mentally ill);*
 - (B) an institution that provides a temporary residence for individuals intended to be institutionalized; or*
 - (C) a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings”.*

The French researchers adapted these definitions and the use made of them, repositioning them within the complex of housing situations. This made it possible to design a system of interlinked surveys with which to gain insights into other situations, especially those that could also reasonably be classed as homelessness (such as the situation of *personnes hébergées* (people staying with family or friends) included in the 1996 and 2002 INSEE Housing surveys following the CNIS recommendations). Categories that are formally close can therefore be used differently.

Also, while the definition’s housing dimension focus refers back to the structural causes of these situations (the same CNIS group also produced research on the housing market through a study of vacant housing), the characteristics of those most affected, their daily lives and life

courses are also explored through highly detailed questionnaires, permitting a degree of comparison with the housed population and an analysis of the different dimensions of the phenomenon. Because certain housing situations are designated as defining the situation of homelessness, other characteristics of the individuals and their life histories can be studied for information about the range of life experiences that lead to this situation, and the factors (resources or “capital”) that may be assets or additional liabilities. The use of a category is therefore not limited to its core dimension.

II. A few remarks on other items of the Ethos classification

Like the CNIS classification, the ETHOS classification classifies housing situations “at a given date” or more precisely “on a given night”. Indeed, since persons who are socio-economically disadvantaged and the homeless in particular may change situation quite frequently (being put up by family or friends, then moving to a shelter, then spending a few days in a hotel, and so on), there would be very significant double counts if it were understood as a count of people who have experienced an episode in a given situation, for instance, once in the past year.

Of course this does not mean that an estimate of the number of people experiencing a given situation at least once in a given period should not be published, only that it cannot be used in an additive table.

A few remarks (valid only for the French case) are in order concerning some items of the ETHOS classification in addition to homelessness:

II. 1 Poor quality housing; overcrowding (item 13)

Conducted every four years, the Housing Survey gives an estimate of the number of persons living in sub-standard or overcrowded housing. According to the 2002 Housing Survey, in metropolitan France more than a million people (1,005,000) live in an uncomfortable dwelling (without shower/bath equipment and/or without toilets). Further, more than a million people (1,037,000) are estimated to be living in severely overcrowded dwellings. Severe overcrowding is defined as one room or more below the norm⁹. This index has been used since 1968 and other norms are now being tested. For an INSEE study on different norms of overcrowding and on how changing the norm changes the results see (Minodier, work in progress).

II. 2 Domestic violence (item 10)

Domestic violence is difficult to define and to measure precisely and uniformly across countries, because the violence reported in surveys of the general population and that recorded by the police both depend on the level of awareness in the population and the police and on the campaigns to raise this level. In the case of women, surveys have shown that of all forms of violence, this one is the least reported to the police by the women involved.

An IDUP survey on women and domestic violence

In 2000, the IDUP (Institute of Demography of the University of Paris) conducted a survey on violence against women, ENVEFF (*Enquête Nationale sur les Violences Envers les Femmes*

⁹ The norm is calculated as follows: one room for the household; one room for the reference person of each family in the household; one room for single persons who are not family members and for single persons aged 19 or over; and, for single persons under 19, one room for two children of the same sex or under age 7, otherwise, one room for each child.

en France). The 6,970 women surveyed had to be aged between 20 and 59 years and not be living in collective accommodation such as homeless shelters, old people's homes etc. According to this survey (Jaspard, 2005) 2.5 % of women between ages 20 and 59 who had been in a couple during the previous year have suffered physical aggressions due to domestic violence during the last 12 months.

Contact : Maryse Jaspard jaspard@ined.fr

The National Observatory of Delinquency

The *Observatoire National de la Délinquance* (National Observatory of Delinquency) provides regular figures for incidents occurring between partners that have been recorded by the police. The table *infra* gives those results for the year 2003-2004. In the 2006 report, around 30 pages are dedicated to this kind of violence (part 7D). See also:

http://www.inhes.interieur.gouv.fr/admin/editeur/userimages/rapport_OND_2006_partie7D.pdf

Domestic violence against women

| | 2003 | 2004 |
|---|--------------|--------------|
| | Total | Total |
| Homicides | 136 | 139 |
| Homicide attempts | 102 | 103 |
| Violence resulting in death | 44 | 23 |
| Number of cases of grievous bodily harm (not resulting in death) recorded by procedure | 34,721 | 34,848 |
| Rapes | 434 | 445 |
| Number of forms completed by the FNSF in cases of domestic violence between partners | 11,382 | 12,330 |

Source: 2006 OND report.

FNSF: *Fédération nationale solidarité femmes* (a network of over 50 NGOs working for women victims of violence and their children). The FNSF has operated a free helpline service since 1992. The statistics presented here are based on calls received.

The other figures come from the police and gendarmerie.

The difference between domestic violence and police recorded incidents

Police recorded incidents underestimate the extent of domestic violence, and far from being stable there is every reason for the ratio between the two figures to vary with the level of awareness of the women, the police and the general public. The ENVEFF survey contains a description of the different steps taken by the women after they have been victims of violence: contacting the police or justice services, approaching social services, NGOs, doctors, lawyers, social workers, etc. Among the victims of domestic violence, only 13% have reported it to the police, far fewer than when violence has occurred in another situation. (Fougeyrollas-Schwebel and Jaspard, 2002).

The difficulty of comparing data between countries on the issue of domestic violence

Maryse Jaspard (2005) has also shown that international comparisons across surveys of the same type give much higher rates in those countries, such as Canada or in Northern Europe, where the problem of domestic violence was taken into account much earlier, and where awareness and information programmes were established long before the surveys were conducted. The same would apply for police recorded incidents. These comparisons can be misleading therefore.

An INSEE survey on victimization in 2007

INSEE will conduct its first survey on victimization in January-February 2007. Its title is *Cadre de vie et sécurité*, Living Environment and Security. The survey is to be conducted annually, and has a fixed core section and one that will change with each survey. For the 2007 survey, this variable component will deal with sexual violence and domestic violence, and whether these events have been reported to the police. If they have not been reported to the police, the reason for this will be explored. Hence the survey will give an idea of what proportion of violent episodes are reported to the police.

Contact: Thomas Le Jeannic thomas.le-jeannic@insee.fr

II. 3 People living temporarily with family/friends (item 8.1)

Following the CNIS recommendations (that is, since and including the 1996 Housing survey) questions about this situation have been added to the French national Housing survey. Anne Laferrère (2003) has studied these questions and the evolution in the results between 1996 and 2002. It is possible, however, that these statistics underestimate the phenomenon given that, for example, people who live in social housing are not allowed to house other people. The same applies in the case of people who are housed by their family or friends while illegally resident in France (failed asylum seekers, for example).

People living with family or friends

| | 2001-2002 | 1996 |
|---|-----------|---------|
| Children who left for their own dwelling (occupied for at least 3 months) and moved back for a reason other than end of studies | 457,000 | 415,000 |
| Other relatives except ascendants and descendants; friends | 472,000 | 405,000 |
| Lodger, sub-tenant | 64,000 | 88,000 |
| Housed worker | 6,000 | 14,000 |
| Total | 999,000 | 922,000 |

Source: Insee, Housing Surveys.
Data elaborated by Anne Laferrère.

It is very difficult to define what is meant by “living with family/friends against one’s wish”. Thus different authors have proposed different estimates of the number of people in this situation, based on answers to questions such as “are you looking for a place of your own”

“can you afford a place of your own”, and counting or not children who have not yet left their parental home after a given age, etc. (Djirikian, Laflamme, 2006). Depending on these choices, the estimates vary from around 400,000 persons to 1,400,000 persons in metropolitan France. Once again it is not only overall figures that are needed but detailed studies on the trajectories and present situations of the people involved.

The next Housing survey will be conducted in 2006, but the issue of people living with family/friends will be addressed by replacing the concept of household (where each dwelling corresponds to one household, within which the accommodated persons had to be distinguished) by those of primary and secondary living units (*unités de vie principale et secondaire*).

II. 4 Other remarks

Double-counting When trying to estimate the number of households experiencing housing problems, one must be careful to avoid double-counting them. Hence the necessity of cross tabulating, using the different dimensions of housing situations, since the same household may experience several difficulties at once. For example, a household living in an overcrowded and dilapidated dwelling for which it does not have a legal tenancy must not be counted three times. Another difficulty is the risk of undercounting. For some housing situations, such as living in squats or in hotel rooms, the statistics are of poor quality and the various sources are not consistent.

Count unit There is a count unit issue: are individuals or households to be counted? Families sometimes have to split up in order to be housed separately by different friends or family members, or to be accepted in shelters. The number of persons is the same, but taking the family situation (the household) into account is important for policy-related reasons. On the other hand, people living in the same dwelling do not all automatically enjoy the same occupancy status. For example, some could be “guests”, without security of tenure, even if the dwelling is rented with a legal tenancy.

People accommodated in hotel rooms Hotel rooms have long been a means of finding a place of residence for those on very low incomes. In the last few years, service providers have accommodated people in hotel rooms, either because there were not enough beds in hostels or because these persons could not adjust to collective living (e.g. ex-convicts). Many of these homeless persons are migrant families with children, including asylum seekers (for whom beds in the CADA¹⁰ were not available), failed asylum seekers, refugees or people without documents. This particularity—similar to the use that was once made of Bed and Breakfast premises in the UK—should be taken into account in a classification of housing situations.

Part Two. Homeless service providers

I. Homeless service providers: an overview

This section of the report gives a broad overview of services for the homeless in France, intended to improve understanding of what the official statistics are describing. More detailed information about accommodation services and their history will be found in the box *infra*.

Since the 1980s, several initiatives have been launched by charity organizations to help the homeless (for example, the creation of the *Restaurants du Coeur* in 1985, by the French

¹⁰ CADA: *Centre d’Accueil pour Demandeurs d’Asile*, hostel for asylum seekers.

comedian Coluche, received much publicity). In 1993, the *SAMU social* (Paris social ambulances) was created to provide both an outreach service and a free telephone helpline. Other outreach services followed, supplying those who do not use regular services—and some who do—with food, basic health care and in some cases transport to the shelters. The 115 is now the general number for the telephone helpline, both in Paris (the *SAMU Social*) and in the provinces (the FNARS, the National Federation of Social Reintegration Associations, is in charge of the Observatory of the provincial 115, while the Paris 115 data are analysed by the Observatoire du Samu Social de Paris). A single centre in each department informs those in need, particularly about shelter vacancies in the area.

The *centres d'accueil de jour* (“day shelters”) provide a wide range of everyday services such as laundry facilities, lockers, administrative addresses (for making benefit applications, for example), showers, snacks, as well as cultural activities, and give access to health-care professionals and social workers. Some of these centres are reserved for female or young people. The *vestiaires* distribute free clothing and the food distributions supply free or inexpensive hot and cold meals, either at fixed sites or in the street (food vans). Other services provide *health care*.

The activity of the accommodation services has grown steadily over recent years, especially in provision of “emergency” beds. Each year, the Ministry of Social Affairs funds a programme, originally entitled *pauvreté précarité* (poverty-precariousness) then *plan urgence hiver* (winter emergency plan). Although the funding is public, most of the services are provided by NGOs.

Asylum seekers are supposed to be accommodated in special hostels, the CADA. But in the early 2000s, a shortage of beds in these centres led the NGOs to house the families of asylum seekers (together with some other homeless persons) in low-cost hotel accommodation.

Emergency shelters are usually characterized by short duration of stays and provision of only basic types of help. The winter plans are intended to complete the supply of emergency beds in periods of very cold weather.

Long-stay hostels are usually part of the *Centres d'Hébergement et de Réinsertion Sociale* (Centres for Accommodation and Social Reintegration, or CHRS; for more details on the system of accommodation, see box). In these services (rooms in a collective building but also self-contained flats or hotel rooms), accommodated people also receive resettlement support. They can stay for up to several months (sometimes for years). Staff is better qualified and funding is stable (renewed each year). However, a proportion of CHRS beds are now used for “emergency” situations.

Further details on accommodation services and their history

The terms “hébergement” (giving shelter) and “logement” (housing) correspond to forms of help between which the limit is not always easy to draw¹¹.

Accommodation falls within the competence of the state. The DGAS (General Directorate of Social Affairs), through its regional and local Directorates, funds the bodies that provide these

¹¹ An assessment of the various forms of accommodation intended for persons experiencing socio-economic difficulties was realized by the Haut Comité pour le logement des personnes défavorisées (High Committee on the housing of disadvantaged persons) in its tenth report (2004) devoted to emergency accommodation.

services, which are either voluntary associations or municipal centres for social action run by local authorities (*communes*).

Funding is of two main types. For the CHRS it is funding whose principle is not reviewed from one year to the next, even though its amount is negotiated annually. The other type of funding is in the form of subsidies, which are subject to review. Such funding can be completed by subsidies from departmental and municipal sources.

Evolution of the forms of accommodation and transitional housing

Since the 1980s several laws and programmes have diversified the list of available solutions for accommodation. To the CHRS that provide supported accommodation and respond to certain emergency situations, have been added:

- by the Quilliot law of 1982: accommodation through sub-letting of social housing, where voluntary associations hold the tenancy: a distinction must be made between *baux glissants* (where the households become tenants of the same dwelling after a certain period) and *logements-relais* (where several households are successively accommodated in the same dwelling);

- by the *pauvreté-précarité* (poverty-precariousness) plan, renewed every year since winter 1984-1985: beds in diverse structures (hotels, hostels and shelters in collective or private accommodation, for the night only or also open during the day, with very variable lengths of stay, and financed from a different budget heading than the CHRS, hence their name of *centres non conventionnés à l'aide sociale*);

- since 1990, various types of accommodation qualified as *insertion* housing: PLAI (*prêt locatif aidé d'insertion*) until 1994, FLAT (*PLA très sociaux*) until 1997, PLALM (*PLA à loyers minorés*) then a new PLAI (*I* now standing for *integration* instead of *insertion*) from 1999;

- since 1991, the ALT (*aide au logement temporaire*, allowance for temporary accommodation) has helped voluntary associations providing diverse forms of short-stay accommodation, in flats (studios) or in hotel rooms. This allowance can be employed alone or combined with other subsidies. Care must be taken to count places financed by "ALT only " in order to avoid double-counts.

- in 1993, a new budget heading opened to create beds in emergency accommodation and temporary housing (for example *hôtels sociaux*, structures that offer both communal and private spaces (e.g. a common lounge and private bedrooms);

- in 1994, the drafting of *plans départementaux pour l'hébergement d'urgence* (local plans for emergency accommodation), based on an analysis of needs, was made a legal obligation for the prefects (department level);

- in late 1994, the *résidence sociale*, between ordinary housing and hostels, intended to provide temporary quality flats. The FJT (*foyers de jeunes travailleurs*, young workers' hostels) and the FTM (*foyers de travailleurs migrants*, migrant workers' hostels) are transformed into *résidences sociales* when they are renovated, and new structures are created. But the length of stay (e.g. in FTM) in these "temporary" flats can be very long, longer than in an ordinary dwelling;

- in 1995, the Périssol plan developed the notion of *logement d'extrême urgence* (accommodation for extreme emergency) and *logement d'insertion* (accommodation with support) which differ mostly by the length of stay, but in practice most of the emergency

beds were created in collective hostels and those with support were allocated on a long-term basis.

- in 1997, creation of the *pensions de famille* (boarding houses), becoming *maisons-relais* (move-on houses) in 2002. They are small structures with a semi-collective framework, intended to provide persons who have experienced long-term homelessness with a durable rather than temporary environment;

- in 1997, the setting up of the 115 (a national free telephone helpline dedicated to orientation in the service system), and in 1998 the law against exclusion organizing the *veille sociale* (to monitor the functioning of the service system).

- under the “law of social cohesion” (18 January 2005), supplementary beds will be provided between 2005 and 2007, in CHRS, CADA and *maisons-relais*.

- measures elaborated by the DGAS concern the creation of places reserved for persons who have difficulty adapting to individual housing, the transformation of 3,000 emergency beds into CHRS (long-stay) beds and all year opening of the “level 1” beds (the proportion open irrespective of weather conditions) in the winter programme. This should be implemented locally in collaboration with voluntary associations;

It can be considered that the distinction between housing (*logement*) and shelter (*hébergement*) is based on the occupancy status of the persons; and that between insertion (*insertion*) and emergency (*urgence*) on the more or less severe selection of the clients and on the expected duration of stay (though in a number of emergency centres it is possible to return each day). But the Ministry of Social Affairs uses the term *urgence* (emergency) for all beds which are funded under article 46-81-20 (by subsidies) and that of *insertion* for all beds funded under article 46-81-30 (on a long-term basis), for example the beds in CHRS which, however, include some “emergency” beds (in the sense of no selection for admission and a short length of stay).

Funding comes from the Ministry of Housing or the Ministry of Social Affairs, with the two often being associated.

II. Databases and directories

There are several national or local directories, maintained either by NGOs (the FNARS, SOS Femmes Accueil, etc.), public agencies (the Ile-de-France Regional Observatory of Health, etc.) or local authorities and their social services (such as the Mairie de Paris and the CASVP, *centre d'action sociale de la Ville de Paris*). Most of these directories cover the full range of services. For example, the Paris one is divided between “orientation”, “accommodation”, “food”, “reinsertion”, “health care” and “daily life” (free/cheap showers, toilets, clothes, transport, sport and culture, health care for pets, and burials).

However, use of such lists for the purpose stated in the guidelines of this report is not straightforward. INED discovered the problems involved when using some of these guidebooks to check and complete its list of services for its homeless surveys (a list that was to be used as a sampling frame). These directories are intended to help persons in difficulty and social workers and they are not necessarily adapted to research needs. For example, the section on “accommodation” in the Paris guidebook contains very few addresses, corresponding to emergency orientation services such as the 115 and to an emergency direct access shelter, but the addresses of shelters and hostels and other accommodation services in Paris are not all listed because their access is not direct (readers are referred to the list of social services in the “orientation” section of the guidebook).

There is also the FINESS database, maintained by the statistical services of the Ministry of Health and Social Affairs (the DREES) and updated by the local (regional and departmental levels) Directorates of Family Affairs (DRASS and DDASS). It has primarily administrative and statistical uses (it can be used as a sample frame).

We will first look at a few examples of directories of services for the homeless, either national or local, elaborated for the use of clients, social workers and volunteers. Some are on Internet in which case a typical page is supplied. Some are on paper (or on both Internet and paper) and whenever possible a copy will be supplied with this report.

Then the FINESS database will be presented.

II. 1 National directories: examples

1. The FNARS directory

FNARS (the French National Federation of Social Reintegration Associations) regularly updates a directory of its members (comprising a large proportion of the NGOs responsible for providing services to the homeless). The last version dates from 2000-2001 (out of print) but another is planned.

2. An example of a national directory on-line

This directory (http://www.sosfemmes.com/ressources/contacts_chrs.htm) comprises 1130 addresses updated in 2004-2005 (not exclusively for women). Here is an example of a webpage for the *Loiret* department:

Centres > 45 Loiret



Les centres spécialisés pour femmes victimes de violence sont signalés par un

[Pour revenir à la liste des départements, fermez cette fenêtre](#)

| | Nom | Adresse | Données | Téléphone | Fax |
|--|--|---|---|----------------------------------|----------------|
| | Centre Accueil et Réinsertion familles en Difficulté | 111, boulevard Kennedy 45120 Chalette sur Loing | CHRS pour femmes victimes de violence. Admission sur entretien. Prise en charge également des familles. 25 pl. | 02.38.98.27.24 Email | 02.38.98.02.93 |
| | AFTAM | 82, chemin de Saint Pierre BP 45 45502 Gien cedex | CADA. 80 places. Accueil de demandeurs d'asile. | 02.38.67.63.98 | 02.38.67.72.50 |
| | CHRS L'Escale | 67 bis, rue de la Sirène 45200 Montargis | CHRS tous publics. Admission sur entretien. 22 pl. | 02.38.28.19.93 Email | 02.38.28.19.79 |
| | Comité Local pour le Logement Autonome des Jeunes | 9, boulevard de Verdun 45000 Orléans | Centre d'accueil, d'information et d'orientation pour un public jeune de moins de 26 ans (ou jusqu'à 30 ans pour les bénéficiaires du RMI). | 02.38.78.91.98 Email | 02.38.78.92.39 |
| | Permanence d'accueil | 66, faubourg de Bourgogne 45000 Orléans | Accueil, orientation, hébergement d'urgence de courte durée pour tout type de public isolé ou accompagné d'enfants. | 02.38.24.05.50 | 02.38.53.21.80 |
| | Relais Orléanais | 41 bis, faubourg Madeleine 45000 Orléans | Service d'urgence pour personnes précaires et demandeurs d'asile. Admission sur entretien. | 02.38.42.09.30 02.38.54.91.77 | 02.38.77.20.59 |
| | Résidence Bourgogne | 24, faubourg Bourgogne 45000 Orléans | CHRS tous publics. Admission sur entretien. | 02.38.65.44.44 | 02.38.65.44.49 |
| | Résidence Eugène Descamps | 5, rue Eugène Descamps 45000 Orléans | CHRS tous publics. Admission sur entretien. | 02.38.24.05.55 | 02.38.53.21.80 |



II. 2 Local directories: examples

1. The directory maintained by the ORS (Regional Observatory of Health) of the Ile-de-France region

This directory, entitled *Guide des lieux d'accueil pour personnes en difficulté*, can be found on-line at the following address: <http://www.ors-idf.org/accueil-personnes-difficulte.asp>. There is also a printed version.

This directory was first developed fifteen years ago, with the aim of helping social workers, particularly those who were only occasionally faced with the necessity of finding a bed for a homeless person. Access to the hostels is usually through the 115 or for longer-term accommodation after a case assessment.

The directory also aims to list the shelters that are not included in the FINESS database (see below), especially those that are funded through (non permanent) state subsidies or exclusively by municipalities or voluntary associations. However, some NGOs prefer not to be listed in the directory, because they wish to keep complete control over access to their hostels.

The person in charge of the directory updates it by questioning the eight DDASS of the Ile-de-France region, and the eight Conseils Généraux (councils of the departments), and has constituted a network of NGOs that supply her with information about new structures and closures.

Contact: Myriam Dalbarade

ESPACE SOLIDARITE INSERTION AGORA - EMMAUS

32 RUE DES BOURDONNAIS

75001 PARIS

Métro : M° CHATELET

Téléphone : 01 55 34 74 84 **Type d'hébergement :** H F C

Observations :

ACCUEIL DE JOUR - PAS D'HEBERGEMENT ACCUEIL DE NUIT 6 MARAUDE PETIT DEJEUNER - REPAS DU SOIR

ESPACE SOLIDARITE INSERTION ESPACE SAINT MARTIN-ARMEE DU SALUT

ANCIENNE STATION DE METRO

FACE AU 31 BD SAINT MARTIN

75003 PARIS

Métro : M° REPUBLIQUE

Téléphone : 01 40 27 80 07 **Type d'hébergement :** H F C

Observations :

ACCUEIL DE JOUR MERCREDI CONSULTATIONS DE PODOLOGIE SOINS INFIRMIERS SUR PLACE

HOTEL DU MARAIS CENTRE D'HEBERGEMENT D'URGENCE

5 BOULEVARD DU TEMPLE

75003 PARIS

Métro :

Téléphone : **Type d'hébergement :** H F C

--> Hébergement possible

Observations :

ADMISSION UNIQUEMENT PAR LE 115

2. *The Guide Solidarité Paris 2006*

This guidebook (printed version only) is produced by the *Mairie de Paris*. It is intended mainly for use by homeless or disadvantaged persons themselves, but is also used by social workers. Information is also available on the *Mairie de Paris* website, www.paris.fr. Here is an example of what can be found on Internet:

Guide solidarité Paris 2006

Chercher un hébergement

■ Centres d'hébergement accessibles en direct

Les associations qui suivent proposent des places accessibles « en direct », en hébergement d'urgence. D'autres structures, comme les Centres d'hébergement et de réinsertion sociale (CHRS) et les Centres d'hébergement d'urgence (CHU) vous seront conseillés par les services sociaux auxquels vous devez vous adresser.

■ Pour les hommes

La Halte Paris Lyon
(Voir page 20)

Hébergement Plan Atlas et chambres d'hôtel

(par le 115)

Association de l'Œuvre de la Mie de Pain

18, rue Charles-Fourier, 13e

Métro : Tolbiac ou Place d'Italie

Tél. 01 45 89 43 11

Toutes les prestations, y compris l'hébergement et le repas, sont gratuites. Fermé de mai à octobre.

Public concerné : hommes à partir de 18 ans.

Prestations proposées : hébergement, casier pour la nuit ; douche, repas.

Heures d'ouverture et conditions d'accès : se renseigner au 01 45 89 43 11.

■ Pour les hommes et les femmes

Centre d'hébergement et d'assistance aux personnes sans abri (CHAPSA)

400 rue de la Chapelle, 11e arrondissement, Paris (75011)

403, avenue de la République, Nanterre (92)

Tél. 01 47 69 72 08

Pas d'arrivée spontanée.

Accueil uniquement par les bus de la BAPSA, de la RATP et du Samu Social 92.

Les prestations sont gratuites.

Public concerné : hommes et femmes sans domicile, à partir de 18 ans.

Prestations proposées : hébergement d'urgence à la nuit ;

Lieux de prises en charge :

- au niveau du 1 avenue de la porte de la Villette, 19e, à partir de 14 h 45 et de 18 h 00 ;

- au niveau du terre-plein du Palais des congrès, Porte Maillot, 17e, vers 16 h et 19 h ;

Repas servi le soir jusqu'à 23 h (prestation casse-croûte après 23 h) ;

Consultations médicales (sans rendez-vous) ; soins infirmiers ;

Prise en charge par des travailleurs sociaux, aide dans les démarches administratives (papiers d'identité, ouverture des droits : RMI, CMU...).

Jours et heures d'ouverture : hébergement d'urgence de nuit (admissions uniquement par les cars de la BAPSA, RATP

et du Samu Social) ; 7 jours sur 7 ; soins d'hygiène : de 17 h à 7 h du matin ; service social : du lundi au vendredi, de 8 h 30 à 20 h.

Plan Atlas

Voir page 57.

■ Accueil pour personnes toxicomanes

Sleep in (association SOS drogue international)

61, rue Pajol, 18e

Métro : Max Dormoy ou La Chapelle

Tél. 01 42 09 55 99

Public concerné : réservé à la population toxicomane, consultation et distribution gratuites.

Prestations proposées : accueil, consultations socio-médicale et juridique , soins: du lundi au vendredi de 9 h 30 à 13 h, sans rendez-vous et l'après midi sur rendez-vous ;

distribution de kits de prévention, délivrance de médicaments de substitution ;

hébergement : du lundi au dimanche de 19 h 30 à minuit, participation de 1,50 €pour la nuit).

Jours et heures d'ouverture : toute l'année de 9 h 30 à minuit.

II. 3 The FINESS database

As noted earlier, the FINESS database is maintained by the statistical services of the Ministry of Health and Social Affairs (the DREES) and updated by the local (regional and departmental levels) Directorates of Family Affairs (DRASS and DDASS).

FINESS stands for *Fichier National des Etablissements Sanitaires et Sociaux*. It is a national directory of infrastructures in the health and social fields (including hospitals, hostels, and training facilities for nurses or social workers). Each legal entity or “establishment” listed in FINESS has a 9-digit identifier. FINESS uses a national classification of services in these fields. Accommodation services for the homeless are listed under the “accueil, hébergement, assistance et réadaptation pour les adultes et familles en difficulté” category, mother and child hostels in the “accueil, hébergement, assistance et réadaptation pour la protection de l’enfance” category.

The detailed classification is given in Appendix 4. Among the categories of interest to this report, mother and child facilities (*Etablissements d’accueil mère-enfant*, also named *centres maternels*) are in the category 4501/166, accommodation and social reintegration centres (*Centres d’hébergement et de réinsertion sociale* or CHRS) are in 4601/214, other accommodation services for disadvantaged people (*Autre centre d’accueil*) in 4601/219, hostels for asylum seekers (*Centres d’accueil pour demandeurs d’asile* or CADA) in 4601/443, accommodation for refugees (*Centres provisoires d’hébergement* or CPH) in 4601/442, migrant workers accommodation (*Foyers pour travailleurs migrants* or FTM) in 4602/256, etc. Specialist accommodation, for example dedicated to the treatment of drug or alcohol addictions, are other items of the classification.

FINESS can also be used as a sample frame for surveys (the ES survey described later uses a sample frame based partly on FINESS).

Accommodation services that receive long-term state funding are in FINESS. Those that do not may also be in FINESS but coverage is not as good. For example, among accommodation services for the homeless, emergency shelters that are funded exclusively by NGOs or by *communes* (municipalities, the smallest unit of local government), or that are state funded but not on a regular basis, would not necessarily all be listed, whereas the CHRS, (and the CADA and CPH for asylum seekers and refugees), whose funding comes from central government on a regular basis, would be well covered. Other services for the homeless, such as food and clothing distributions, would not be in FINESS.

This directory gives no information on the people served, for example, on the people accommodated by a hostel. However, the capacity (by sex) and the address are included, together with various legal and financial details. An example is given below.

FINESS can also be accessed on the Internet:

<http://finess.sante.gouv.fr/finess/>

An example drawn from FINESS

Raison Sociale:

ARFOG BAUDRICOURT

Adresse administrative:

3 IMPASSE BAUDRICOURT

75013 PARIS

Tel : 01 45 93 32 60

Fax : 01 45 93 57 24

Caractéristiques de l'établissement

N° FINESS : 75 071 208 5

N° SIRET: 775 681 117 00047

Catégorie:

Centre Hébergement & Réinsertion Sociale (C.H.R.S.) (code 214)

Statut :

Ass.L.1901 Recon.Util.Pub. (code 61)

Tarification :

Préfet de Département établissements médico-sociaux (code 05)

Participation au service public hospitalier :

(code)

Date d'ouverture :

01 décembre 1995

N° FINESS de l'entité juridique de rattachement :

75 080 469 2

Capacité de l'établissement

| Mixte | Hommes | Femmes | Total |
|-------|--------|--------|-------|
| | 0 | 77 | 77 |

Part Three. Approaches to data collection for official statistics on homelessness

A few introductory remarks can be made:

- In France, in addition to central government, there are several levels of local government: the region, which is divided into departments, themselves divided into *communes* (municipalities). Responsibility for accommodating adult homeless persons lies with central government, though accommodation of mothers who have a child under three (or are pregnant) is the responsibility of the department, like most other measures of a social nature. Except for the training of social workers, the region has limited responsibilities in the field of social action. Municipalities or groups of municipalities may also subsidize hostels. In metropolitan France there are more than 36,000 municipalities, 96 departments, and 22 regions. Hence the difficulty of listing the accommodation services that may be funded by municipalities (or by NGOs only), in addition to those funded by the state.

- From the point of view of statistical methods, countries are traditionally divided into two categories: on the one hand, those where data gathering is mainly through sample surveys; on the other hand, those where data come mainly from registers. This distinction is becoming less valid as more countries now use both methods, but the way they combine the two methods can still vary considerably. Each method has its advantages and drawbacks.

The public system of statistics in France relies heavily on statistical surveys, though the use of data from registers has been increasing of late. Combinations of the two methods are possible. The Income Survey, for example, is the result of merging files from the Income Tax services with the Labour Force Survey.

- The issues of anonymity and statistical secrecy are highly sensitive in France. Several episodes have shown that the merging of files, involving among other things personal data, is not always viewed favourably by the media and the general population. In the 1970s, the “Safari affair” and the “Gamin project” (where data from various administrative files were to be merged by means of the national identity number) led to the creation of the *Commission Nationale Informatique et Libertés* (CNIL, National Commission on Data Protection and Privacy) in 1978. This was nearly twenty years before the 1995 European directive (95/46/EC) on the protection of individuals with regard to the processing of personal data and on the free movement of such data. The French data protection act of 1978 was amended in 2004 to take into account the 1995 European directive. The CNIL is the French version of the independent agency, which, according to this directive, guarantees that personal data will not be misused.

A difference between CNIL and the analogous bodies in other countries is that the notion of personal data is more broadly defined in France. This gives the CNIL wide-ranging powers. Under the law, any file concerning personal information (particularly names) and developed by any type of organization must at least be notified to the CNIL. Depending on the kind of data collected, notification may be enough or further action may be required, up to applying for a ruling or, indeed, for an authorization from the CNIS (e.g. when the data contains information about ethnicity, political or religious opinions, health, assessments of an individual’s personal circumstances, etc.). However, if all accommodation services constructed similar data files, a “simplified norm” could probably be devised to streamline the notification process.

To collect at the department level, for example, personal data emanating from the various services situated in a department, the movement of this data must be authorized by the CNIL. To identify information about the same individual, an identifier is necessary. France operates a system of national identity numbers. The CNIL usually discourages use of this number as an identifier, preferring instead *ad hoc* identifiers. Hence the situation differs from that in some other European countries, such as Denmark, where use of the national identity number, though regulated, is easier and better accepted.

For those illegal migrants who have not had contact with the social security system (migrants in France can, under certain conditions, access the social security system through the AME, *State Medical Aid*), there is in any case no national identity number.

- accommodation services and other services for the homeless are funded from different sources. While the INSEE data are based on the actual situation of the person surveyed, data gathered by statutory agencies, or by shelters on their behalf, are organized according to the origin of the funding.

For example, in the ORSAS case described at greater length below, where a permanent observation system for people in shelters was set up for the Moselle department, only schemes that received national funding were included, not those that received departmental funding. Hence, for instance, a young mother with a child under three years old housed in a *centre maternel*, a refuge for mothers and infants, which receive funding from the *Aide sociale à l'enfance* (local government-run social assistance for children), that is, from the department, would not be covered by the information system. On the other hand, a mother with two children, one under three and the other over three, would be housed in a CHRS for single parents that receive national funding, and so would be covered by the information system.

Even the ES survey, despite a significant effort made in recent years to improve the coverage of accommodation services not receiving national funding (or only through subsidies), has a less good coverage of those services than of the CHRS, which receive national funding of a stable nature.

I. ES Survey by the Ministry of Social Affairs

The ES survey, where ES stands for *Etablissements Sociaux* (social establishments), or *Etablissements et Services* (establishments and services), dates from 1982. The establishments surveyed include facilities for disabled youth and adults, those for vulnerable children and their mothers (dependent on *Aide sociale à l'enfance*) and those for adults *en difficulté sociale*, that is experiencing socio-economic problems.

It was conducted every two years until 1997. The last ES survey took place in late 2004-early 2005; its results are due to be published in summer 2006. ES surveys are conducted by the statistical services of the Ministry of Health and Social Affairs (now the Ministry of Social Affairs, Work and Solidarity), known as the DREES (formerly the SESI).

The sampling frame uses the FINESS database but is more complete thanks to an effort to include the shelters and hostels that are not in FINESS (by consulting the municipal services who are asked to check and complete the database for their *commune*). For the 2004 survey, an effort was also made to include other types of accommodation which are not found in the FINESS database: the beds funded through the ALT grant (often hotel rooms or shared flats), the *maisons-relais* and the establishments funded by the large cities. The 115 and some outreach services are also included.

Until 1997, while the establishments for disabled persons and those for homeless/disadvantaged persons were surveyed every two years about their activities and staff, data about the users were only collected every four years (once on users of facilities for disabled people, once on users of facilities for homeless/disadvantaged people).

Like the surveys up to 1997, the 2004 survey is exhaustive as regards establishments; unlike them, however, it is not exhaustive as regards users. Data about users are collected on a nationally representative sample of establishments (about one in three). But this sample is not representative at the local (regional, departmental) levels. In the selected institutions, all users are studied.

Up to 1997, the surveys did not collect any data on users of emergency shelters. The 2004 survey does: it gives a description of the people accommodated by emergency services on the night of 8-9 January 2005. This description comprises the following elements: sex, age, family type, general characteristics, housing problems, and type of accommodation most frequent in the last 6 months. For the other, longer-term, institutions, the data concerning users are in part flow figures (the users that exited the institution in 2004), and in part stock figures (the users present on 15 December 2004). Data are not collected for users of services other than accommodation.

For long-term accommodation, the data collected refer to the users present on 15 December 2004. They include sex, year of birth, family type, socio-occupational category, employment situation, main resources, present and previous forms of accommodation, nationality, legal status (asylum seeker, failed asylum seeker, refugee...), nature of health insurance. For those who exited the institution in 2004 the destination is detailed along with various characteristics such as sex, year of birth, dates of entry and exit, occupation and family type, main resources.

II. The National Survey of users of shelters and hot meal distributions (SD2001) by the National Institute of Statistics and Economic Studies

I will describe here the statistical methodology of the French national survey of users of shelters and hot meal distributions, conducted by the National Institute of Statistics and Economic Studies (INSEE) in 2001 with a methodology drawing on that used by INED in the research conducted under the auspices of the CNIS.

I. 1 The SD2001 survey

In 2001, the French National Institute of Statistics and Economic Studies (INSEE) conducted a national survey of users of shelters and hot meal distributions. For a detailed description of the methodology, see Brousse et al, 2006 (forthcoming) or Brousse et al, 2002c; for a description of the sampling and the weighting, in English, see Ardilly and Le Blanc, 2001.

Among service users, the homeless population was defined as persons who had spent the night preceding the interview in accommodation provided by NGOs or other service providers, or in a place not intended for habitation such as a public space. Accommodation here includes the *centres maternels*, or mother and child refuges; this was not the case in the INED survey, which explains the higher proportion of homeless women in the INSEE survey. The geographical field is that of urban centres with 20,000 inhabitants and over. The persons interviewed were French speakers; however, the estimates of numbers of users and of homeless people are for all users whatever their language and are for metropolitan France as a whole.

Sampling was in three stages: first the population centres, then the service site-days, then the services (a night, a meal) in each service-site (by selecting the individuals using them, since the set of weights provides results pertaining to individuals, not to services).

This survey was conducted in early 2001 in 80 metropolitan areas with a population of 20,000 or more. The data collection took place between 15 January and 12 February, excluding Saturdays, Sundays and Monday 22 January. 4,109 persons were surveyed by a total of over 300 interviewers. The final sample contained 4,014 questionnaires. Each interview lasted on average around one hour.

The metropolitan areas were selected on the basis of a size criterion defined as a combination of the area population and the number of beds available for persons in great difficulty, as identified in the records of NGOs and in FINESS. 80 metropolitan areas were selected, comprising about 80 % of the population of urban centres with over 20,000 inhabitants.

A list of the sites of the shelters and hot meal distributions was prepared one year before the survey and updated just before the survey started. This list was drawn up in the 80 urban centres selected but also in 80 smaller centres with between 5,000 and 20,000 inhabitants. 2,700 service sites were thus listed and responded to a telephone survey. The telephone survey showed one third to be out-of-field, because they provided neither beds nor hot meals. A sample frame of 1,464 service sites was thus obtained in the 80 selected population centres with 20,000 inhabitants or more. A site could provide more than one service, such as beds plus food distributions, hence the services in the sample frame totalled 2,398. The sample comprised 1,225 “service x days”, corresponding to 1,225 different services (some large sites being visited more than once). 1,036 visits were made by the interviewers in the 846 service sites sampled.

The sampling of services (that is, the sampling of the individuals receiving them, in a selected service site, on a given day) was done on the basis of a list when one existed (for example, a list of beds) or according to the position of the individual in the queue waiting to reach the table where meals were being distributed, etc.

To weight the data, it was necessary to know how the respondent had used the different services (beds, hot meals) in the week before the survey. These questions were thus part of the questionnaire. The “weight sharing” method (see diagram below or Ardilly and Le Blanc, 2001) was used to establish several sets of weights. One set corresponds to an “average day” in the reference period (that is, the data collection period, from 15 January to 12 February 2001) and another to an “average week”.

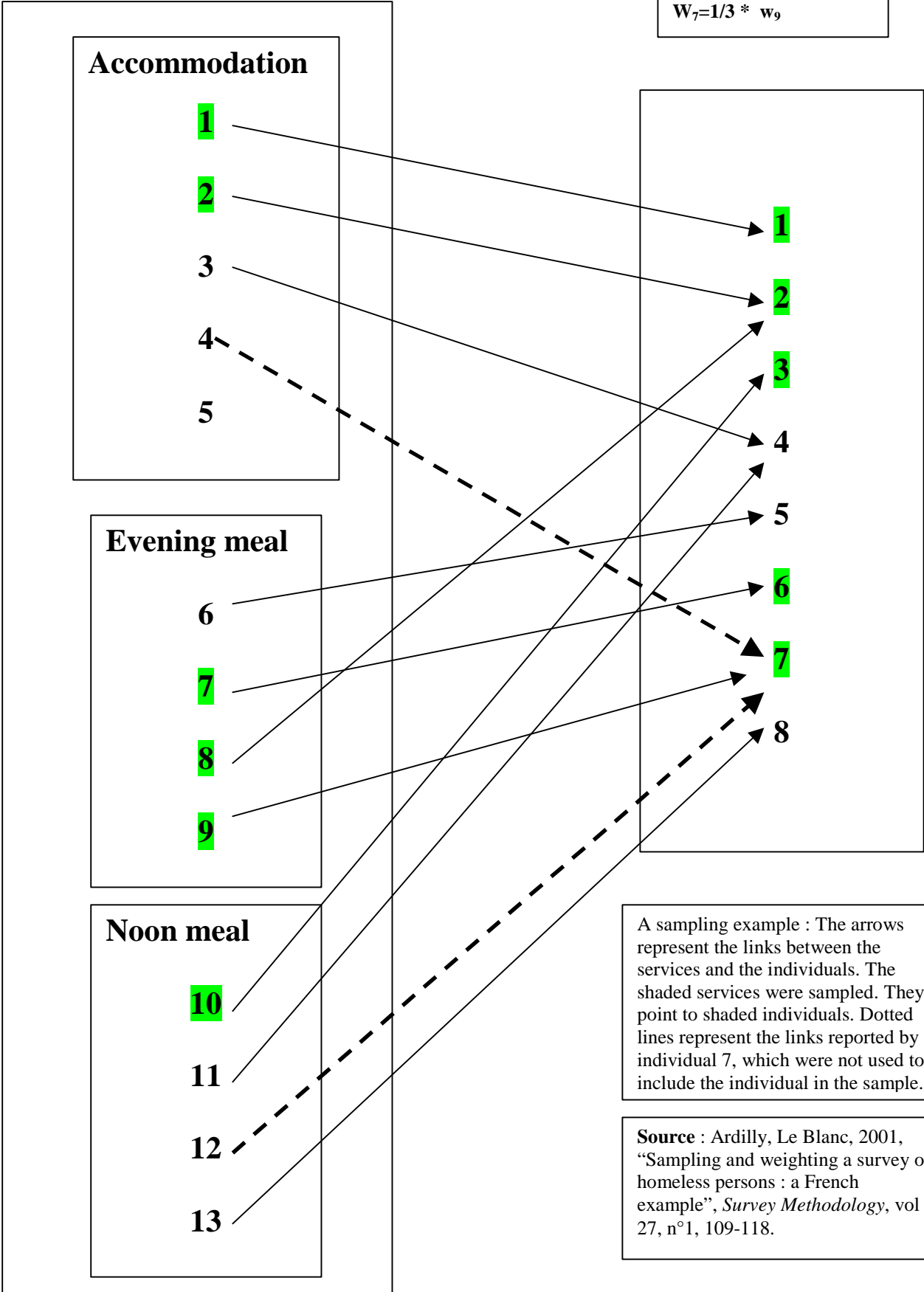
The first INED survey (1995) over-sampled meal distributions and emergency shelters so that the sample would contain a larger number of people sleeping in the street or in emergency shelters. This was not done in the INSEE survey for which the total sample was much larger.

This kind of methodology is applicable in any other city or country where such services are operated. An extension could be to consider certain public spaces (railway stations, for example) as “service sites” and sample them accordingly (with the added difficulty of determining how many homeless people are in the place considered, since it is not always easy to distinguish the homeless from other people).

The INSEE survey: the weight sharing method

Services
 w_1, \dots, w_{13}

Individuals
 (weight sharing method)
 $W_1 = w_1$
 $W_2 = 1/2 * (w_2 + w_8)$
 $W_3 = w_{10}$
 $W_6 = w_7$
 $W_7 = 1/3 * w_9$



A sampling example : The arrows represent the links between the services and the individuals. The shaded services were sampled. They point to shaded individuals. Dotted lines represent the links reported by individual 7, which were not used to include the individual in the sample.

Source : Ardilly, Le Blanc, 2001, "Sampling and weighting a survey of homeless persons : a French example", *Survey Methodology*, vol 27, n°1, 109-118.

The questionnaire contains over 900 variables covering a range of issues: demographic characteristics, qualifications and training, employment, current living conditions, past living conditions including main place of residence and main employment situation in each of the last 12 months, sources of income, use of services, housing search, health, social relationships, family history.

Many results have already been published (see references) and a special issue of *Economie et Statistique* (the journal published by INSEE) containing several long papers on the homeless issue, using SD2001 data, is due for publication around September 2006. The SD survey should be replicated around 2011.

I. 2 The INED survey on the limits of the INSEE SD2001 survey (non-French speaking homeless persons, people contacted by outreach services)

In collaboration with INSEE, INED conducted a small survey of homeless people in 2002, in Paris and also in Nice and in Nantes, to interview people contacted by outreach services and who were not likely to make frequent use of shelters and meal distributions. It concluded that with the exception of those who had moved onto the streets only a few days before, few people never used these services at all. INED also conducted a more qualitative study of non-French speaking users of accommodation and food distribution services (counted in the SD2001 survey but not interviewed), to check that their use of services did not differ noticeably from that of the French speakers.

III. Census and other surveys by the National Institute of Statistics and Economic Studies

III. 1 Hotels, makeshift shelters, furnished rooms, etc.

At present, the most detailed data on *housing type* are to be found in the Census (the last one was conducted in 1999, and has now been replaced by a permanent survey). However, it is important to have a clear understanding of the categories employed. For example, people are classified as living in hotels if the hotel is their permanent dwelling; people who spend only part of the month in a hotel (and the rest of it, for example, in a shelter) are not counted here; collective accommodation is not examined in detail, and is broken down into broad categories in which long-term residential facilities for the homeless, for example, are not distinguished. The Census also gives *occupancy status* but not in a very detailed manner. For example, people living in a flat provided by an NGO cannot be distinguished from other tenants. People living with family and friends “not through choice” cannot be identified. Also, the Census supplies only a limited number of variables concerning the household and the dwelling (there are no data on income, for example), hence it cannot be used for very detailed studies.

Among the surveys conducted by INSEE, the Housing Survey and the 1999 Family Survey (now known as the “Study of Family History survey”, *enquête sur l’histoire familiale*), have been used to study marginal housing. The Family survey is conducted on a sub-sample of the Census and at the same time (it is an addition to the questionnaire). Until very recently, the other surveys used the sample frame derived from the Census, and the further in time from the Census operations, the more likely precarious forms of housing are to have disappeared. It remains to be seen what effect the new continuous census (introduced in 2004) will have.

The INSEE Housing Survey with its sample of about 40,000-45,000 persons yields large amounts of data on the dwellings and characteristics of households. The difficulty with the Housing Survey is that, despite its size, marginal situations are few in number and are thus difficult to study in detail.

Cécile Brousse has also used the Family Survey (1999, on a sub-sample of 160,000 persons in the sample of 380,000), which is on a larger sample, to study marginal housing situations, though in this survey they are broken down into a relatively small number of categories.

Estimates from the 1999 Census put the number of people living in a mobile dwelling (such as a caravan or a boat) at 129,032 (13,110 in the Paris urban area); people having their permanent residence in a hotel room at 51,406 (23,924 in the Paris urban area); and people living in a temporary dwelling (such as a building still under construction) or a makeshift shelter (such as a shack) at 41,408 (5,192 in the Paris urban area) (Brousse et al., 2002d; also see www.recensement.insee.fr, table PRINC1). Other, more detailed results using a cross-tabulation of housing type and occupancy status with certain data about sanitary facilities will be published later this year in *Economie et Statistique*.

Besides these results from INSEE some researchers have conducted studies on various forms of marginal housing. For example, Claire Lévy-Vroelant has made a detailed study of the “meublés” and the “garnis”, that is, furnished rooms without/with other services such as breakfast or room cleaning, and of the way they are counted in the French Census (Lévy-Vroelant, 2003a et b).

III. 2 Rough sleeping in the new Census

The Census is not the most appropriate tool for giving an estimate of homeless people (specialized surveys are better tools for avoiding double counting and controlling under-estimation). However, enumerating homeless people, especially rough sleepers, as completely as possible, involves a question of citizenship.

In the new Census, this enumeration took place over two days in January 2006 (the next is in January 2011). The enumeration of rough sleepers is the responsibility of each municipality, which can lead to a degree of heterogeneity. INSEE issues guidelines to the municipalities and trains the enumerators. The guidelines included a recommendation to seek collaboration with the NGOs providing for the homeless. When this collaboration occurred it was judged to be of good quality. At the national level, FNARS advised INSEE about communication issues and through its journal encouraged its members to collaborate.

An assessment of this enumeration of rough sleepers is in progress and should lead to improved coverage in 2011.

III. 3 Hostels and shelters for the homeless in the Census

In the new Census, collective housing is grouped in 7 categories. Long-stay shelters and hostels are listed in category 1, together with other long-stay institutions such as old people’s homes. Emergency shelters, if collective, are listed separately in category 6. Persons using accommodation for homeless people that takes the form of hotel rooms or flats are enumerated with other people who have their permanent residence in hotels (if this is the case) or with people living in conventional housing, without any mention of their being housed by, say, a CHRS.

A proportion of those collective residences are enumerated every year; after 5 years all have been enumerated.

A working group is currently looking into the differences between the hostels and shelters surveyed by the Census, those surveyed by the ES survey, and those in the DGAS statistics.

IV. Statistical recording by the DGAS (and DPM)

The available data, along with the terms employed to describe the various types of accommodation, depend as much on the source and mode of funding (which budget heading, and since the LOLF law, which action of a programme) as on the facilities that these services offer to users, in terms of the accommodation's physical aspect (dormitory, single or shared room, independent or shared apartment, hotel), occupancy status (integrating the temporal aspects of insecurity), conditions of access (with or without selection at entry) and of renewal (automatic or not), and living conditions and support (possibility of staying or not during the day; with social support or not).

The DGAS keeps statistical records of the number of beds that it funds either wholly or partially. The same is true of the DPM (*Direction de la Population et des Migrations*, Directorate for Population and Migrations) that keeps statistics of hostels for asylum seekers and refugees. Two types of beds are not covered by these statistics:

- a number of beds that are directly funded (without help from central government) by municipalities or by certain voluntary associations;
- accommodation provided under *Aide sociale à l'enfance* (local government-run social assistance for children) such as mother and child refuges or a proportion of the hotel rooms for disadvantaged families, which is the responsibility of the departments. The corresponding beds do not appear in the statistics of the DGAS (although the mother and child hostels are in the FINESS database and are surveyed by the ES survey).

In addition, some emergency shelters, even though they receive state subsidies, are not included in the data since they do not have to be authorized by the prefect and can thus be omitted from the DDASS list.

At present (May 2006) the number of beds with state funding is on a list of indicators elaborated by the DGAS and the DPM, which is updated every three months (see Appendix 5, first table). Besides the two types of beds listed earlier as not captured by these indicators (those funded wholly by municipalities or by voluntary associations; those funded by departments), there is another restriction: only permanent places are considered. This excludes a number of shelters and hostels, among them large establishments such as the *Mie de Pain* in Paris, which are open for only part of the year, and all the beds of the winter emergency plan (beds only available in winter, some of them only during periods of extreme cold). These winter beds are counted separately (see Appendix 5, second table).

At the end of each quarter, data concerning the number of persons and the number of families accommodated (including asylum seekers, refugees and failed asylum seekers) have to be sent to the DGAS that compiles the overall figures (see Appendix 5, third table).

A system for gathering information supplied by the CHRS is being introduced, in collaboration with the FNARS. It will collect annual aggregate data, without eliminating the double counts when a person stays in several hostels (i.e. stays are counted, not persons). The indicators include the types of accommodation found in the CHRS (collective accommodation or self-contained flats, "emergency" hostel or with support...), the population accommodated on 31 December, the financial elements, the staff, and various performance indicators such as exit outcomes in terms of housing and employment, the average duration of stays, etc. They must be communicated in Excel file format. This system represents the first step towards the harmonization of the CHRS activity reports, under the terms of the LOLF.

Part Four. Approaches to service provider client record systems

Client record systems differ greatly from one service to another. Those services with “unconditional access” may record only the numbers of persons present each day (some emergency shelters) or not even that much (day centres with a large flow that only record users of a particular service delivered in the centre, such as access to a social worker). Asking users for information, especially identification information in order to avoid double-counting, could compromise unconditional access and deter people who may be in illegal situations, for example without valid residence permits, thus preventing them from receiving help.

In the long-stay CHRS services, recording client information is easier, but not all possess a computer-assisted system. However, some are using software applications for this purpose.

Information systems that permit the merging of files over a geographical area (such as a department or a region) do exist in a few cases but they encounter many difficulties. The human factor would seem to be the most important, such as achieving a low turn-over of the persons who are “leaders” in this operation and of those who collect the data, developing links between service providers and between them and the DDASS (or DRASS), taking time to explain the use of the software.

There follow a few examples of the ways client information is recorded in the most advanced cases. The *SAMU Social de Paris* (a free telephone helpline service) maintains a data file of its users (without double counting), based on the 4D software. Between 1995 and 2005, the ORSAS-Lorraine maintained a system for the CHRS of the Lorraine region, based on use of an identifier for each person accommodated, but some CHRS stopped participating because they felt it added too much to their workload. France-Terre d’Asile (not strictly in the homeless field, since it runs hostels for asylum seekers) has developed a similar application, Asylweb. The CHRS in the Poitou-Charentes region also use a system comparable to that of ORSAS-Lorraine, called Ophelia¹². Finally, three departments from the Rhône-Alpes region are developing a system that will record accommodation demand and supply using a broad definition of accommodation, including specialist accommodation for asylum seekers (CADA) migrant workers (FTM) and mother-and-child refugees (*Centres maternels*).

It seems that emergency shelters, whether or not they are CHRS, and particularly those where access is unconditional and that handle large flows of people over short periods of time, would have considerable difficulty implementing such a system. With more resources and in particular training of the people in charge of the system, a proportion (possibly large) of CHRS could improve their record keeping, especially since the reports they are required to submit to their funding agencies will be harmonized over the coming years, in line with the DGAS initiative and the requirements of the LOLF. It remains to be seen (in the light of the difficulties encountered by ORSAS, for example, a case that INED has studied at length) whether pooling these data before aggregating the results, at least at the departmental or regional level, and dealing with double-counting, is a realistic objective, unless large amounts of resources are allocated in terms of equipment, training, time and networking. The failure of the ANCHOR system, a North American example of use of a general client record system that gave interesting results at the local level but whose generalization ran into opposition from providers, shows that the necessary conditions are not always met. This example has been studied at greater length in (Frechon, Marpsat, 2004), which also gives some details about other HMIS (Homeless Management Information Systems, to use the American term).

¹² Use of the Progedis software by other service providers has been noted by the FNARS.

I. SAMU Social de Paris and the 115 in Paris

Besides programmes such as mobile teams to reach the street homeless, either to take them to shelters or to help them on the spot, *SAMU Social de Paris* has run (since 1997) the Paris version of the 115, a free telephone helpline centre, available 24/7, and that is a tool for the assessment of situations, for orientation, and for helping the homeless find emergency accommodation for a few days. An information system permits recording of calls coming from, or made on behalf of, homeless people and families. Data collection is continuous and double counts are dealt with by means of an identifier. A number of characteristics (demography, employment, training, sources of income etc.) are recorded. The data are used for various purposes, as detailed below, and also form part of the input for the *Observatoire du SAMU Social de Paris* studies (that also uses *ad hoc* data, such as qualitative research). The information system is based on an application, Aloha, developed with the 4D software. For details of the *SAMU Social de Paris* and the Paris 115, or for studies in French, see www.samusocial-75.fr.

Questionnaire about the SAMU Social's client record system

1. Approach to Data Collection

- Purpose of data collection (are the data collected for administrative purposes, for research projects, action reports, etc?)

The data are collected for administrative purposes (each day the 115 sends the results of the previous day's activity to the Ministry and the DDASS), for studies (by the *Veille Sociale*, the Social Vigil, which needs figures on changes requiring a rapid adaptation, such as an increase in the number of families etc., and by the *Observatoire du SAMU Social de Paris*, whose publications include studies on the stocks, flows and evolution of the population of 115 users, based on the Paris 115 figures), and for activity reports internal to the Paris 115 (there are daily, weekly and annual reports).

Another important use is in contributing to the orientation of the homeless, particularly those for whom data have been collected over a period of time.

- Geographical coverage

The municipality of Paris, i.e. Paris without its suburbs. However, families who call while in Paris may be accommodated in hotels situated in the suburbs.

- Time coverage and frequency of data collection (which time span is covered: point in time: specific day or night, period prevalence: specific week or month or year; stock data or flow data; is it a continuous recording system, a periodic survey etc?)

It is a continuous recording system. The system in its present form has been in place from 2001 to 2006 (with some improvements of late due to a software update). Earlier records (1997-2001) are on a CDrom.

2. Data Items / Elements

- Type of data collected (individual data for each person/household or aggregate data?)

Data are collected for individuals. Families (that is, households with children or a woman more than 3 months pregnant) are referred to a specialist team and there is a "key" (a sort of household identifier) that links the members together. The variables for the family head that are common to the rest of the family can be automatically duplicated if the person entering the data so decides.

Couples without children are not considered as a "family" (with a "key") but there is a "comments" variable where this information is recorded. The same applies in the case of two siblings, though the fact is mentioned in the "notes" that appear when a name is entered and that give information about data recorded previously about the person (as well

as whether the siblings wish to be accommodated in the same shelter or should be kept apart). Close friends (for example women who stay together for safety reasons) can also be noted together.

For childless couples, there is also a variable giving their marital status.

- Units of data collection (household, persons) recorded.

As stated before.

- Variables used (complete list, which socio-demographic details—age, gender, place of birth, nationality, household structure etc.—are covered, information about employment, economic situation, education, health, social ties, duration of homelessness, reason for homelessness, specific problems, use of services etc.?)

For each individual: name, nationality, date of birth, family type, residence permit (or not), support (or not), time homeless, reason for homelessness, type and amount of resources, history of accommodation by services, how they came to contact the 115 (social worker etc.).

3. Data Processing and Quality Issues

- Data processing methods (what is done to control accuracy and plausibility of data, software used, weighting methods, kind of data analysis, etc.)

There are automatic controls with an alert (but if missing values are thus signalled, they can remain missing if the person does not wish to give the information). There is also a daily control by a technician of the validity of the data entering.

No weightings are needed since data are exhaustive.

- Validity of data (are the data reliable and objective, response rates, management of missing values, double counting, etc.?)

Data are self-reported. Only consistency can be controlled. As stated before, missing values are signalled but can be left missing. Double-counting is handled by use of first and last names and date of birth. However, names can be misunderstood over the telephone, especially when there are language problems (a large proportion of the homeless, particularly homeless families, are immigrants). Aliases can also change. So double counts can still occasionally be discovered in which case one of the recordings is “blocked”.

- Analysis and presentation of results (are data publicly accessible, recommendations etc).

The reports are accessible on the Internet. The data files are only accessible by the SAMU (with different levels of access). However, the police or judicial authorities can request information with letters rogatory.

4. Technical / IT Issues

- Software employed and ownership agreements

The software is elaborated with 4D. The 115 uses Windows in its network version and a client/server architecture.

- Hardware requirements

Small structure server

- Data specifications employed

???

- Data query methods and ease of extract by users

It is a user-friendly application

- Data extract formats supported

Several formats are possible, such as Excel, dbf, or text.

- Are web-based on-line systems being considered?

No but the data can be consulted from the other sites where the SAMU has offices.

5. Management Issues

- Actors involved (organizations and professions responsible for doing the original interview, collecting the data, processing the data, analysing the data, publishing the data, financing the data collection system etc.)

The *permanenciers* (the people who take the calls) have various types of training (usually in social sciences, but they can also be “field” people) and work on fixed term contracts. The social workers of the mobile night teams enter the data themselves after their work. Supervisors and coordinators may also enter data. Three specialists (computer operators, statisticians) work full time on the system. For analysis, 3-4 persons (equivalent full time) are employed in the Observatory (where they also conduct other studies) and 1-2 at the Social Vigil. Funding comes entirely from the state (via the DDASS).

- Organizational issues (when and how are data compiled, obligations for data providers etc.)

Data are entered by the *permanenciers* while answering the call or by the social workers of the mobile teams after their night rounds.

- Legal basis for data collection

No legal basis

- Data protection issues

CNIL procedures are followed (since 1996).

6. Monitoring and Evaluation issues

- Use of data (relevant debates, use in official documents, press coverage etc.);

There is a communication service at the SAMU Social. The data are used by the media, in public debate, and in reports like that by Xavier Emmanuelli (who founded the SAMU in 1993) on workers accommodated in emergency hostels. They are also used in the SAMU reports such as the assessment of the winter plan.

- Evaluation of overall quality and advantages / disadvantages of data collection system: Do the data allow estimates of the extent of homelessness, analysis of quantitative trends, analysis of profiles of homeless clients, do they cover changes over time, what are the limitations, needs and scope for optimizing the data collection system etc.?

The data allow estimates of the number of the homeless who call the 115 or are helped by the EMA (*Equipes mobiles d'aide*, mobile assistance teams). In this field, they are used for the analysis of quantitative trends, client profiles, etc. However, homeless people looking for an emergency shelter can use other resources, for example, the Atlas plan, which runs buses to take the homeless to various shelters. In this case they are not recorded by the 115. Nor are homeless people in long-stay shelters recorded (the 115 is an emergency service).

According to the DDASS, for single homeless people the 115 would account for around 30 % of emergency beds in Paris (on a given night). The 2004 report of the 115 gives a number of 800 beds every night for single users (families are housed in hotels and the number of people concerned is more variable).

Longitudinal data cannot give much information on what happens between two calls, and what becomes of people who no longer call the 115 is generally not known.

The quality of data on the persons contacted by the mobile teams should improve when all the social workers of the teams are equipped with Palm devices to enter their data while in the street (rather than after their rounds).

Finally, after the delicate period of adapting the application to the needs of the 115, the software is easy to use and requires little training of the persons in charge of collecting the data.

- Costs and resources involved (direct and indirect)

The budget of the SAMU includes the cost of the licence, maintenance and development. In terms of staff the number of people involved in processing and analysing the data was seen above. The *permanenciers* (who take the calls) number around 60 (25 or so at any one time, in three teams) in winter, and around 45 (12 or so at any one time) in summer.

Adapting 4D to the needs of the 115 (thus constructing the Aloha application) was initially very time-consuming, since it took around six months.

- Transferability of data collection system to other EU countries (is the system transferable, what are national/regional particularities, what are the basic conditions for a transfer etc.?)

4D can be adapted to many situations and should be easily transferable.

Software information: <http://www.4d.com/>

Contact: Thomas Marie tmarie@samusocial-75.fr

II. 115 in the provinces

Outside Paris, the Observatory of the 115 is maintained by the FNARS, which is currently working to improve the recording system of this service. Henceforth, only calls are counted (as opposed to persons), and some information is recorded about the persons calling, their age and family situation, what kind of help they require, whether accommodation has been provided if needed. The data are published department by department (there is one 115 call centre per department). A degree of heterogeneity exists between the departments. A first step will be to study this diversity in local approaches.

Contact: Carole Lardoux (FNARS) carole.lardoux@fnars.org

III. The observation system established by ORSAS-Lorraine¹³

The Regional Observatory of Health and Social Affairs of Lorraine (*Observatoire régional de la Santé et des Affaires Sociales de Lorraine*, or ORSAS-Lorraine) developed a permanent observation system for people in CHRS hostels¹⁴, which operated between 1995 and 2005. Studying the difficulties experienced by this observation system is of interest for addressing similar difficulties in other regions.

III. 1 The context for the implementation of the system

In 1991, as part of work to redesign the Moselle department's strategic plan, the directors of the member agencies of the *Fédération Nationale des Associations de Réinsertion Sociale* (National Federation of Social Reintegration Associations, FNARS), the Prefecture, and the *Direction Départementale des Affaires Sanitaires et Sociales* (Departmental Directorate of Health and Social Affairs, DDASS) of Moselle, asked ORSAS-Lorraine to establish a means of evaluating the CHRS in the department. An evaluation would improve understanding both of the population served and of the dynamics of each agency's entry and exit flows. For the

¹³ ORSAS: Observatoire régional de la Santé et des Affaires Sociales de Lorraine (Regional Observatory of Health and Social Affairs of Lorraine).

¹⁴ The description given here, a summary of a previous work by INED (for the English version see www.cuhp.org, papers from the Copenhagen workshop), is taken from various written documents (ORSAS-Lorraine, 1996, 1997), as well as from interviews with eight people who have worked at different levels to implement the system. These interviewees include the director of ORSAS-Lorraine who implemented the system, a welfare inspector who worked for the DDASS (that is, an administrative officer in charge of the social services for the local authority), three housing managers (from either a CHRS or an emergency shelter), three social workers who filled out the forms, and finally the person in charge of data entry.

agency directors, putting such a system into place at the same time as the new departmental strategic plan was being developed would make it possible to justify new funding requests.

In addition, representatives of the Prefecture and the DDASS, the principal funders of the CHRS and emergency shelters, wanted a better picture of the population served in order to determine whether additional beds were really necessary. A working group was therefore set up, composed of Mr. Schléret, director of ORSAS-Lorraine; the sub-prefect; a DDASS welfare inspector; and agency managers. It took three years for the permanent system of observation of the activities of the centres and the characteristics of the population served to become fully operational.

This observation system had to combine two distinct goals in order to meet the needs of each member of the piloting committee: to understand the activity of the hostels and shelters in terms of stocks and flows, but also to learn about the characteristics of the people housed over a given period.

III. 2 The observation method

To meet these dual needs, Yvon Schléret (Director of ORSAS-Lorraine) set up an observation system composed of two forms.

A system based on an “entry” form and an “exit” form¹⁵

- for each new entry of an individual into a shelter in Moselle, a member of the shelter staff (usually a social worker) filled out an “entry” sheet whose primary contents made it possible to classify the situation of the person being housed (age, sex, nationality, date of entry, commune of origin, employment status, source of income, reasons for admission, means of contact with the centre, type of housing provided, type of financial support). Each individual was assigned an identification number, made up of a household number¹⁶ and an individual number¹⁷, so that users of the system could see if he or she belonged to a household whose other members were also being accommodated. Each week, the agencies sent the forms for the week’s new entries to the DDASS. The DDASS stripped identifying information from the forms and then sent them on to ORSAS - which kept only the person’s initials rather than the full name - for data entry and statistical analysis.

“So why the DDASS? Usually in the agencies, since they’re funded by the DDASS, they have to systematically report people’s entries. There is a CERFA¹⁸ form designed for this purpose. They decided to cut out the CERFA form and to replace it with this questionnaire. So the DDASS, and the DDASS has the right, since it pays, to know the names of the people... We don’t have the right to know the names. Administratively. So the DDASS has the right to know the names, so it passes through them, they make it anonymous, they send it back to us, we enter the data. And from there we do the analysis.” (Yvon Schléret)

¹⁵ The “entry” and “exit” forms will be given in printed form, as the file is too bulky.

¹⁶ The household number is created by the hostel or shelter. It is a four-digit number representing the order of the household’s entry in the year. For example, the 256th household to come in to the hostel or shelter since 1 January is assigned the number 0256. If a household came into the same facility twice in the same year, it would have two household numbers.

¹⁷ If a mother is housed alone with two children, individual number 01 would be given to the mother, 02 to the first child, and 03 to the second child. For a given date, each individual is assigned the same household number.

¹⁸ CERFA: Centre d’Enregistrement et de Révision des Formulaire Administratifs (in charge of digitizing all official forms).

- in addition, each week, the agencies tracked the “exits.” For each person who left, they informed the DDASS of the date the period of care ended, where the person moved to, and, in the most recent data, the employment status at the end of the period of care. This information was sent to ORSAS to update the file. The identification number used to identify an individual entering as a member of a household was also recorded on the exit form, to identify the same person.

The types of agencies covered by the system

All the CHRS, CAVA (*centres d'adaptation à la vie active*, centres for adaptation to active life), and emergency shelters in the Moselle department were covered under this permanent observation system. In addition, certain agencies had expanded their capacity through hotel rooms (funded by the temporary housing allocation or from other national budget headings); the system took this expansion into account.

However, this mechanism only applied to agencies that received national funding; departmental funding was not included (see example *supra*). In addition, agencies funded by central government but that dealt with health issues, for example by providing beds for drug addicts or AIDS patients, were not covered.

In total, before 2003, 39 agencies completed the observation system forms at each entry and exit.

III. 3 Results from analysis based on this method

This system allowed three different levels of analysis, depending on whether attention focused on the characteristics of stays, of people housed in a given year (after elimination of double counting if a person had several stays in a year), or of the trajectories of stays of people housed over several years (dynamic aspect).

Studying the characteristics of stays

The ideas of “entry” and “exit” were defined by the modes of accommodation and care. In other words, a single individual who was continuously present in the same CHRS but whose type of care had changed over the period of stay would be counted as having several entries. This precision in the construction of the observation system was necessary to satisfy financial and budgetary requirements. Thus the reports returned by ORSAS always contained an analysis of flows, using indicators such as weekly flows (number of entrances and exits during the week and number of people housed over the end of the week, that is, Sunday night to Monday), average length of stay, geographic origin of people housed (last known domicile before entry into the centre), and finally where clients went on exit.

Studying the characteristics of people housed

The DDASS stripped identifying information from the forms, but it was still possible to construct an identification number for the person housed using the individual’s initials, date of birth, and sex. This identification number was needed in order to make sure that the person was only counted once, even if he or she had several stays in the course of the year. For example, during the first year of operation of the permanent system of observation of people housed, ORSAS counted 4,660 stays but only 3,164 persons. In fact, 833 individuals (26%) had made multiple stays in centres in the department. Eliminating these double-counts made it possible to analyse the characteristics of the population who used shelters at least once over the course of a given year. ORSAS therefore set up a second database, this time tracking people rather than stays. Socio-demographic and social characteristics were reported at the time of the first stay in the study year. Several features used to study the characteristics of

people housed can also be used for dynamic analysis (ORSAS 1996; 1997): users can see whether a person made one or several stays in CHRS or emergency shelters in the Moselle department in the course of the year.

Dynamic study

The identification number made it possible to eliminate double-counts and undertake an analysis of the characteristics of people accommodated in a given time period, but also to observe the total number of stays a person made in the Moselle department since the establishment of the system. For example, a young woman born 15 July 1970, whose maiden name was Dupond and whose first name was Béatrice, would have an identification number such as DB150770F (DB = initials; 150770 = date of birth; F = sex). When the “stays” database was sorted by identification number, it was possible to see all the stays (whether in CHRS, emergency shelters, or hotels) made by DB150770F between 1995 and the present.

The lack of financial resources and the orientation of the demand (the system was funded by the DDASS primarily in order to obtain budget-related results) seem to have prevented ORSAS from devoting time to a dynamic analysis of homelessness in the Moselle department.

III. 4 Difficulties arising after the system was established

Difficulties encountered by emergency shelters

The system was based on a questionnaire composed of an “entry” form and an “exit” form. Thus the greater the flow of people housed, the greater the workload for the hostel or shelter. Thus of the 39 schemes involved in the permanent observation system of the homeless, two emergency shelters with a capacity of 33 and 43 beds did not fill out (or stopped filling out) their forms. These shelters were among the largest in the entire department in terms of the flows of people housed. Because of the very large flows in the shelter with 43 beds, the director of this centre had always refused to fill out the forms. The shelter with 33 beds had to suspend the ORSAS form system when it was faced with the arrival of large numbers of asylum seekers. Providing accommodation for this new type of clientele required extensive administrative work.

The shortage of staff in the emergency shelters was a source of weakness for the permanent system of observation of the homeless, since in times of high demand, social workers legitimately gave higher priority to providing accommodation than to completing the questionnaire. This weakness was most apparent precisely in the schemes with the highest intake (in terms of flow), and could therefore lead to non-negligible errors in the data obtained via this system.

A supplementary but not complementary workload

Every year, each scheme was asked for an activity report including certain statistical measures similar to those required and produced by ORSAS: the stock of people housed, entry and exit flows, age, sex, etc. In order to write this report, each scheme had to keep up-to-date records on the people housed. But of the three directors interviewed—representing at least one CHRS, and two of them an emergency shelter—none had set up a system that made it possible to avoid double coding of data used both for the permanent observation system for the homeless and for the final report. The ORSAS system therefore represented a set of additional tasks on top of those that each scheme already had to accomplish.

The forms were filled out by staff with different levels of training

Although the majority of the questions on the ORSAS forms were straightforward and did not require subjective judgement, some of them, such as “the direct cause of admission” and “the reasons no steps were taken to find housing,” could be more difficult to answer. To minimize variation in answers, ORSAS held several training sessions when the permanent system of observation of the homeless was introduced. However, since the people in charge of filling out these forms may have changed over the years the system training was in effect passed down internally, with the risk of errors that this created. The greater the number of staff members in charge of the forms, the greater the risk of variation in the choice of responses. Nevertheless, in the various centres visited, we observed that most of the time, only one social worker or secretary had been designated as responsible for filling out the forms.

But the main difficulty, as Mr. Schléret emphasized, was the level of the staff in charge of the forms. Once again the disadvantage was greatest for the emergency shelters, which, because of their more precarious status, were more likely to employ non-qualified staff.

Problems of ethics

ORSAS and the DDASS took measures to ensure that the permanent system of observation of the homeless respected ethics as much as possible. Thus, each form passed through the DDASS to be stripped of identifying information. Only the client’s initials (first name and last name at birth), date of birth, sex, and nationality were retained as identifying information. As the last population census counted 1,023,447 residents¹⁹ in the Moselle department, the data contained in the ORSAS forms seemed not to pose problems of anonymity. Nevertheless, for reasons of convenience the people being housed were not always informed about the system. However, the results produced by the system were not used in any publications, only in internal reports transmitted to the DDASS or to various participating agencies.

A very low budget in relation to the workload

To evaluate the budget necessary for the establishment of such a system, we started with an estimate of the time required for each stage. For the CHRS-type hostels, a social worker spent on average one half day per week filling out the forms. For an emergency shelter with a large flow, it represented nearly a half-time job. For the DDASS, checking the forms and stripping identifying information corresponded to quarter time. Finally, ORSAS hired a person in a youth subsidized job solely for data entry of the forms. This still does not include time for analysing and writing up the data. Only ORSAS was paid for this work (35,000 euros in 2005). This budget forced ORSAS to limit analysis to flows or people housed for a given year, and made it impossible to use more precise dynamic methods of analysis.

Conflict between “policy” demands and research

This type of research runs up against the demands made by funding bodies, in this case the DDASS. On one side, funding bodies want answers to budget-related questions: how many homeless people are there? Are there enough beds? What is the occupancy rate of each agency? On the other side, ORSAS knew the capabilities of the information system, and possessed data permitting longitudinal analysis of the population sheltered in the CHRS and emergency shelters, but limited resources did not allow the time for this analysis.

¹⁹ INSEE, Evolutions démographiques 1982-1900-1999. Données définitives, 57: Moselle, September 2000, p. 54.

III. 5 Solutions proposed or enacted to address some of the difficulties

The case of emergency shelters

Two shelters stopped filling out the forms for the ORSAS system due to a large inflow of clients. However, the shelter managers continued to maintain up-to-date records for each person housed by the shelter. For each new entry, an admission form for the recipient and his or her children was automatically filled out. This form contained all, if not more, the information required by the permanent system of observation of the homeless. Therefore a solution was adopted: someone from ORSAS came to the shelter and copied the data necessary for the study.

Computerizing the system at the agency level

At the time of our first interviews the permanent system for observation of the homeless was paper-based until the forms arrived at ORSAS for data entry. The forms transited twice by the postal service: between the schemes and DDASS, then between DDASS and ORSAS. There was a real risk of losing the questionnaires, and the wait time was inefficient. Moving the shelters over to a computer-based system enabled, in large part, these two difficulties to be resolved. This change meant that the data no longer passed through DDASS, which did not seem attached to this intermediary function.

Dissemination of outcomes from the results

At the end of our first interview, Mr. Schléret described the frustration felt by certain schemes after five years of operating the observation system.

“There was the starting phase, the first three years, where the system was very well received. Finally we have numbers, finally we can see clearly what we’re doing. Then afterwards there was a phase of lassitude, there were also some little problems with internal rivalries, and now the study is certainly less well perceived, less valued than was the case in the beginning. And now, there are people who say it’s useless...”

During a fairly long period, dissemination of results was rare, first because of missing data from the two emergency shelters, and second because the DDASS position in charge of the system had been vacated. Subsequently the system seemed to get onto a better footing. Regular dissemination of results appears to be a major factor in avoiding this type of frustration. However, it seems that new reports were kept by scheme directors and not transmitted to the staff that filled out the forms. Seeing an outcome from their work in the form of results might motivate the staff to continue in this kind of work.

III. 6 Conclusion

The permanent system of observation of the homeless was established in 1995 primarily to provide answers to budget-related questions, both from DDASS and from the agencies: what is the flow of entries and exits, and how many people does that represent over the year? What are the occupation rates of different schemes? Are some months more difficult than others? Over the next few years, the method used by ORSAS gave the possibility of carrying out a dynamic analysis of the homeless population. By using the identification number, it should have been possible to follow the residential trajectory of housing for a homeless person. However, due to lack of funding the ORSAS analysis has been limited to answering direct questions from the DDASS. Additionally, the “exit” data were of lower quality than the “entry” ones, since exits were not always documented when they involved moves to another establishment or from one part of a hostel to another (emergency to long-stay, for example), or to a different budget heading.

This system covered all the CHRS and emergency shelters in the Moselle department, but the emergency shelters found it impossible to keep up with the rhythm of the forms to be completed when the intake flow was high. The solution adopted was for someone to come from ORSAS to collect the data directly from the shelters' files.

The latest developments

In 2003, the system of observation of the activities of accommodation centres and the characteristics of the people who use them, operating since 1995 in the Moselle department, was extended to the other departments in the Lorraine region. This took the total number of hostels and shelters involved in the system to 62, compared with the original 28. Paper-based transmission of the data ceased, and computer-based data collection was set up at each site, with transmission by disk or as an attached file (except for emergency shelters where someone from ORSAS had to go to retrieve the data). However, this made the work more, not less, complicated, as staff had received insufficient training.

The extension of the study was requested by the *Direction régionale des affaires sanitaires et sociales* (Regional directorate of health and social affairs, DRASS) with the support of the departmental directorates involved. The DRASS also provided the funding. The DRASS and the DDASS wanted to see the gradual introduction of a standardized information system that would allow the accommodation centres to account for their activity to their funding organizations.

Technical difficulties have slowed the establishment of this observation system. The law of 2 January 2002, which required social and medico-social institutions to conduct periodic internal and external evaluations and to have an "information system compatible with the information systems" of national government, local government, and social protection organizations, did not allocate additional funding.

In the accommodation centres, implementation and internal management of the information system was entrusted to social workers or intake staff who were not trained for this purpose. On the other hand, conception and management of the system were the responsibility of an external organisation (ORSAS), which took the supervisory role. There, too, the organization had insufficient resources for the task. The DRASS provided funding for the equivalent of one full-time position in charge of all components of the study: conception of the methodology and of the data entry software, training the accommodation centre teams to collect and enter data, monthly overseeing of the return of the information, on-site interventions to make up for the absence of data collection staff, validation of the consistency of the data transmitted, data cleaning, analysis, releasing the results, and writing reports.

This system was abandoned in 2005, a year when several requests for information (including responding to the ES survey and providing the DGAS with the indicators it wanted) made the workload too heavy for many centres. However, some CHRS still continue the work, though it is no longer generalized to the Lorraine region as a whole.

III. 7 Questionnaire about the ORSAS client record system

1. Approach to Data Collection

▪ *Purpose of data collection*

The data were collected for several purposes: the DDASS of the Moselle department was interested primarily in basic indicators for action reports, the DRASS of the Lorraine region was more interested in studies about the evolution of the population etc.

▪ *Geographical coverage*

From 1995 to 2001, the Moselle department was covered, and after 2001 the Lorraine region as a whole

- *Time coverage and frequency of data collection*

It is a continuous recording system, but the characteristics of the user are those at entry in the system

2. Data Items / Elements

- *Type of data collected*

Individual data for each person with a possibility of knowing which persons are in the same household (but not the relationship between them, e.g. a brother and sister are not coded differently from a couple)

- *Units of data collection (household, persons) recorded.*

See supra

- *Variables used*

Age, sex, nationality, last place of residence, people in the same household at entry, occupation, type of resources, reason for entering the service (homelessness, exit from psychiatric hospital or prison, family breakdown with/without violence), knowledge of the service, where people went on exit

3. Data Processing and Quality Issues

- *Data processing methods (what is done to control accuracy and plausibility of data, software used, weighting methods, kind of data analysis, ...)*

No processing methods. Control of consistency by a telephone call to the services at the end of each month

- *Validity of data (are the data reliable and objective, response rates, management of missing values, double counting, etc.?)*

Some services send their data very late. The answers from the users and their response rates seem good. Double-counting is managed throughout the area covered by use of an identifier.

- *Analysis and presentation of results (are data publicly accessible, recommendations etc).*

The establishments can access only their own data. The complete file is only accessible to ORSAS (in its anonymized version). Aggregate data are published in various annual reports.

4. Technical / IT Issues

- *Software employed and ownership agreements*

Data are computerized with the help of the APPROACH programme (from Lotus). Some services prefer to use ACCESS. Both types of services send .dbf files

- *Hardware requirements*

Any computer can be used (which is why APPROACH was chosen)

- *Are web-based on-line systems being considered?*

No. Most data are sent by disk or as an attached file

5. Management Issues

- *Actors involved (organizations and professions responsible for doing the original interview, collecting the data, processing the data, analysing the data, publishing the data, financing the data collection system etc.)*

In long-stay hostels, social workers are usually responsible for conducting the original interview and collecting the data. In emergency shelters, there is no rule.

Analysis and publication are the responsibility of ORSAS where a trained demographer is in charge of the complete file.

The DRASS has funded the system since 2001

- *Organizational issues (when and how are data brought together, obligations for data providers etc.)*

Most of the files were sent by floppy disks or as attached files

- *Legal basis for data collection*

None

- *Data protection issues*

The identifier replaces the name etc. thus ensuring anonymity

6. Monitoring and Evaluation issues

- *Use of data (relevant debates, use in official documents, press coverage etc.);*

Data have been used in various discussions by service providers and DDASS/DRASS, and in official reports

- *Evaluation of overall quality and advantages / disadvantages of data collection system: Do the data allow estimates of the extent of homelessness, analysis of quantitative trends, analysis of profiles of homeless clients, do they cover changes over time, what are the limitations, need and scope for optimizing the data collection system etc.?*

They should allow all these things, but since the “exit” data are of poor quality, the flows inside the system are better studied than the stocks. It is also possible to study the evolution of the characteristics of people entering the system (younger, more women among the young, etc.). To optimize the system it would be necessary to give better and continuous training to the staff in charge of data gathering.

- *Costs and resources involved (direct and indirect)*

Only the ORSAS was paid (35,000 euros in 2005). Besides Mr Schléret who supervised the operation, 3-4 persons worked on the project, but in full-time equivalence this was only one person. One of the three was in charge of relations with the service providers; another one worked on the data files, to check that files sent to ORSAS were virus free, the dates were consistent (no period of time missing since the last data were sent by the provider), etc. The third person was in charge of the analysis and wrote the report.

- *Transferability of data collection system to other EU countries (is the system transferable, what are national/regional particularities, what are the basic conditions for a transfer etc.?)*

The particularities are those linked to the national funding system for accommodation services, which is important in defining the categories of services.

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IV. The recording system of France Terre d’Asile

France Terre d’Asile is a voluntary association providing accommodation for asylum seekers and refugees. It uses an application, Asylweb, which seems similar to that used by ORSAS. Unfortunately, the answers to the questionnaire were slow arriving and are reproduced in Appendix 7. The main question is whether the software could be adapted to the case of homeless people.

V. The record system of the CHRS in the Poitou-Charentes region

This system concerns CHRS, accommodation for women victims of domestic violence, and beds funded by the ALT. This operation started ten years ago and was promoted at the regional level. The software used is Ophelia. However, although the entire Poitou-Charentes region is equipped, it is not certain that departments other than Charente use the software extensively.

Mr Daniel Schmitt, from the DDASS of the Charente department, is in charge of building a common data file out of the files sent to him by each CHRS in the department, and he enters the ALT data himself. He insists on the human factor: he has worked on the same issue for about twelve years, and some of his collaborators have also been in place for a long time. This facilitates the development of good relations with the establishments and sustains the interest of the social workers for completing the forms.

Questionnaire about the Poitou-Charentes CHRS client record system

1. Approach to Data Collection

- *Purpose of data collection (are the data collected for administrative purposes, for research projects, action reports etc?)*

The data are collected both for management reasons (for the DDASS and the establishments) and for the preparation of action reports

- *Geographical coverage*

The area covered is the Charente department, though the entire Poitou-Charentes region is equipped and should be able to use the same application. The accommodation covered is: all CHRS, accommodation for women victims of domestic violence, and ALT funded beds.

As of now, there are no emergency CHRS in Charente so the problems already seen for ORSAS-Lorraine do not occur. However, a 20-bed emergency CHRS is planned and the recording of information could be more difficult for this facility.

- *Time coverage and frequency of data collection*

It is a continuous recording system. However, since the CHRS are few in number and are specialized, the occurrence of someone going from one CHRS to another one is rare; the person would go to the same CHRS. Hence it is unusual to find the same person in the files of different CHRS, though they may move from a CHRS to an ALT-funded bed.

2. Data Items / Elements

- *Type of data collected*

Data are collected for individuals but the relationship between members of a couple or between parents and children is indicated

- *Units of data collection (household, persons) recorded.*

As stated before

- *Variables used (complete list, which socio-demographical details – age, gender, place of birth, nationality, household structure etc - are covered, information about employment, economic situation, education, health, social ties, duration of homelessness, reason for homelessness, specific problems, use of services etc.?)*

Only some of the variables are centralized by the DDASS; the CHRS can add other variables they deem necessary for case management.

The common variables are: name of CHRS, person's first and last name, date and place of birth, nationality, reasons for entering CHRS, whether the entry was prepared or an emergency case, expectations, type of resources, type of accommodation before the entry, length of stay at exit.

3. Data Processing and Quality Issues

- *Data processing methods (what is done to control accuracy and plausibility of data, software used, weighting methods, kind of data analysis, ...)*

The application itself includes an alert for missing data. Recording is exhaustive, so weightings are unnecessary. The software is Ophelia (an application based on DELPHI). A new version will soon be available, making management of double-counts easier.

- *Validity of data (are the data reliable and objective, response rates, management of missing values, double counting, etc.?)*

Double-counting is managed through the use of first and last names.

- *Analysis and presentation of results (are data publicly accessible, recommendations etc).*

The data themselves are not made public though the aggregated results are used in reports and management documents.

4. Technical / IT Issues

- *Software employed and ownership agreements*

Ophelia

- *Hardware requirements*

?

- *Data specifications employed*

?

- *Data query methods and ease of extract by users*

Simple aggregations are part of the application. For more complex data, the firm in charge of the software helps with the method.

- *Data extract formats supported*

?

- *Are web-based on-line systems being considered?*

No.

5. Management Issues

- *Actors involved (organizations and professions responsible for doing the original interview, collecting the data, processing the data, analysing the data, publishing the data, financing the data collection system etc.)*

The social workers collect the data as part of the work associated with a new entry. Mr Schmitt is an administrative secretary at the DDASS and is in charge of the global data file. The DRASS funded the first stages of the system (the capital expenditures) and the operating expenditures are now part of the budget of the establishments.

- *Organizational issues (when and how are data brought together, obligations for data providers etc.)*

Each CHRS sends its data by email (as an attached file) once a week. Mr Schmitt enters the data for the ALT beds.

- *Legal basis for data collection*

No legal basis.

- *Data protection issues*

CNIL procedures followed.

6. Monitoring and Evaluation issues

- *Use of data (relevant debates, use in official documents, press coverage etc.);*

No use by the press.

Used in the CHRS action reports and used by the DDASS in relevant debates at the regional level.

- *Evaluation of overall quality and advantages / disadvantages of data collection system: Do the data allow estimates of the extent of homelessness, analysis of quantitative trends, analysis of profiles of homeless clients, do they cover changes over time, what are the limitations, need and scope for optimizing the data collection system etc.?*

Since there are requests from the Ministry (of Social Affairs), asking for a series of indicators, it would be useful to have a new version adapted to these demands. However, the series of indicators includes few data about users and more about financial aspects, staff etc.

- *Costs and resources involved (direct and indirect)*

Difficult to calculate since it is part of everyday work but most of the costs were incurred at the beginning, when the system was first implemented.

- *Transferability of data collection system to other EU countries (is the system transferable, what are national/regional particularities, what are the basic conditions for a transfer etc. ?)*

Mr Schmitt believes the system is fully transferable.

However, the case of emergency hostels with large flows of persons entering and exiting the facility could create difficulties in other regions.

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VI. The record system of accommodation demand and supply in three departments of the Rhône-Alpes region

This system is in the construction phase. To date only the supply section has been implemented in three departments of the Rhône-Alpes region: Isère, Loire and Savoie. There will also be a section on demand, and one on people accommodated, operational in 2007 (data available in 2008).

In order to lighten the burden of the providers charged with filling the database, the various institutions (DRASS, Conseils généraux etc.) have been requested not to ask for information that is already on the database. Also, the emergency shelters are required to complete a lighter version of the user's questionnaire, and they can even retain paper recording (with printed forms similar to the computerized one), the data being entered later.

Questionnaire about the Isère/Loire/Savoie record system

1. Approach to Data Collection

- *Purpose of data collection (are the data collected for administrative purposes, for research projects, action reports etc?)*

The data are collected for several reasons: to stimulate exchanges between service providers of all origins; to engage with decision-makers in the social field; but they can also be used for action reports and various other uses.

- *Geographical coverage*

The geographical coverage is the three departments of Isère, Loire and Savoie. The accommodation covered is much more varied than in the other record systems examined in this report, since it includes CADA (for asylum seekers), FTM (for migrant workers), *maisons-relais* (move-on houses), *centres maternels* (mother and child refuges), etc.

- *Time coverage and frequency of data collection*

It is a continuous recording system.

2. Data Items / Elements

- *Type of data collected*

Data about supply are collected for groups of similar accommodation, similar meaning "same theoretical length of accommodation, same kind of support, same type of access, same municipality (commune)".

Data about demand and actual accommodation will be collected for households but the household composition will be indicated and it will be possible for individuals to be tracked even if there is a modification to the household (birth, divorce...).

- *Units of data collection (household, persons) recorded.*

As stated before.

- *Variables used (complete list, which socio-demographical details – age, gender, place of birth, nationality, household structure etc. — are covered, information about employment, economic situation, education, health, social ties, duration of homelessness, reason for homelessness, specific problems, use of services etc.?)*

Most of the usual variables will be recorded about accommodated people; a simpler version will be used for demand and also for people accommodated in emergency shelters.

3. Data Processing and Quality Issues

- *Data processing methods (what is done to control accuracy and plausibility of data, software used, weighting methods, kind of data analysis,...)*

Usual technical controls, but this part is still under discussion.

- *Validity of data (are the data reliable and objective, response rates, management of missing values, double counting, etc.?)*

Double-counting will be managed through the use of first and last names, and date of birth. Other validity issues have to be tested.

- *Analysis and presentation of results (are data publicly accessible, recommendations etc).*

The data are not publicly accessible. The service providers will access their own data. Who will have access to the whole database and under what conditions (names will have to be erased, for example) is still under discussion.

4. Technical / IT Issues

- *Software employed and ownership agreements*

ACCESS (until the software to be used with Extranet is ready)

- *Hardware requirements*

?

- *Data specifications employed*

?

- *Data query methods and ease of extract by users*

?

- *Data extract formats supported*

Should be possible in ACCESS or Excel

- *Are web-based on-line systems being considered?*

The system will be an Extranet one.

5. Management Issues

- *Actors involved (organizations and professions responsible for doing the original interview, collecting the data, processing the data, analysing the data, publishing the data, financing the data collection system etc.)*

Data will be collected by the service providers as part of the work connected with a new admission. The DRASS will finance the early stages of the system (the capital expenditures) and the operating expenditures. The database will also be maintained by the DRASS; each department has an agency (usually pre-existing) that will be responsible for the data collection by the service providers.

- *Organizational issues (when and how are data brought together, obligations for data providers etc.)*

Each service provider will enter the data through Extranet. There is no obligation, but there is an agency in each department to help with the data collection.

- *Legal basis for data collection*

No legal basis.

- *Data protection issues*

CNIL procedures followed.

6. Monitoring and Evaluation issues

- *Use of data (relevant debates, use in official documents, press coverage etc.);*

The data are expected to be used in official reports (by each service provider), in discussions with decision-makers, and to inform decisions of the DRASS and *Conseils Généraux* (the local authorities at the department level).

- *Evaluation of overall quality and advantages / disadvantages of data collection system: Do the data allow estimates of the extent of homelessness, analysis of quantitative trends, analysis of profiles of homeless clients, does it cover changes over time, what are the limitations, need and scope for optimizing the data collection system etc.?*

When the complete system is operational, it should be possible to estimate the number of persons accommodated, their profiles, stock and flow issues etc.

- *Costs and resources involved (direct and indirect)*

Capital expenditures (mostly the Extranet): 40,000 euros. Operating expenditures: estimated at 15-20,000 euros a year for one department, when the system is past the first phases. If all eight departments in the Rhône-Alpes region were to be included, the working time spent on this operation would be at least two equivalent full-time.

- *Transferability of data collection system to other EU countries (is the system transferable, what are national/regional particularities, what are the basic conditions for a transfer etc.?)*

Should be transferable.

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VII. Various surveys initiated by NGOs or in NGO/public agency collaborations

VII. 1 The FNARS survey in 2001

The “Détresses et ruptures sociales” (social distress and disruption) survey was conducted in 2001 among users of the FNARS services, by the OSC (*Observatoire Sociologique du Changement*, a social science research laboratory). It is representative of FNARS users at the national level. It is described in more detail in Brousse, 2004, p. 250-251 and in Paugam and Clemençon, 2002.

VII. 2 “On a given night” survey

This survey has been conducted yearly (with a few exceptions) since 1998. It describes the population accommodated “on a given night” by the CHRS and emergency shelters of the Ile-de-France region. It is described in more detail in Brousse, 2004 and in DRASS Ile-de-France 2001; FNARS IDF, DRASSIF, MIPES, 2003a and 2003b.

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Appendix 1

The CNIS classification of housing situations

The four dimensions of housing situations

These classifications are described in detail in Clanché, « Le classement des situations de logement. Les sans-domicile dans des nomenclatures générales », in Marpsat, Firdion (ed), *La Rue et le foyer. Une recherche sur les sans-domicile et les mal-logés dans les années 90*, Paris: PUF/INED, 2000, English translation available at www.cuhp.org.

1. Classification of housing types

1. Individual dwelling

1. agricultural (dwelling part of farm buildings)
2. non-agricultural

2. In a block of flats

1. block with fewer than 5 dwellings
2. block with 5-9 dwellings
3. block with 10 or more dwellings

3. In a building whose function is not housing

(for example, caretaker's flat in factory or sports ground, housing attached to schools, stations, hospitals)

4. Hotel accommodation

1. tourist sector hotel
2. rooming hotel

5. Independent room with its own entrance

(e.g. former maid's room, garage or room at bottom of garden: room part of an ordinary dwelling but self-contained)

6. Hostel or shelter

1. hostel dwelling (independent living collectively run) or social residence
2. collective hostel (collective living) on permanent basis. (e.g. hostel for the disabled or infirm.
3. temporary shelter open all the year
4. seasonal shelter

7. Other institutional accommodation

1. hospital or nursing institution
2. prison
3. garrison
4. religious institution
5. boarding schools, halls of residence

8. Mobile dwellings that are actually mobile (gypsies, sailors ...)

Caravans, houseboats, motor-home, camping car

9. Personal dwellings that are temporary or intended to be

1. caravan or houseboat (fixed position), site hut
2. individual (single household) mobile-home, unable to move unaided
3. collective (several households) mobile-home.

10. Individual makeshift shelter where personal effects can be stored (the shelter is home exclusively to the person or to their household)

1. cellar, garage, attic, shed (or any more or less lockable place, permanent structure)
2. car, trailer, boat (but not houseboat cabin or caravan)
3. factory, office, warehouse, farmbuilding or disused non-residential building
4. derelict building, building site, cave, tent (not closed place)

11. Collective makeshift shelter where personal effects can be stored (shelter shared with other households)

1. cellar, garage, attic, shed
2. car, trailer, boat
3. factory, office, warehouse, farmbuilding or disused non-residential building
4. derelict building, building site, cave, tent

12. Makeshift shelter with no possibility of storing personal effects

1. cellar, garage, attic, shed
2. car, trailer, boat
3. collective parts of a building (corridor, staircase, landing)
4. factory, office, warehouse, farmbuilding, disused non-residential building
5. factory, office, warehouse, farmbuilding, non-residential building in daytime use
6. derelict building, building site, cave, tent

13. Use of public places

1. Metro (subway, underground), corridors of shopping centre, public building
2. street, bridge, park, railway

2 Classification of occupancy status

1. Owner-occupier

1. making loan repayments

- receiving state aid
- not receiving state aid

2. not making loan repayments

2. Tenant of unfurnished accommodation

1. HLM social housing agency
2. social housing not HLM
3. private landlord

3. Tenant of furnished accommodation

1. tourist sector hotel
2. rooming hotel
3. furnished flat

4. Housed without charge (with a dwelling for the individual or their household)

1. provided by employer
2. agricultural accommodation
3. provided by family or friends
4. provided by an institution, voluntary organization or other establishment

5. Housed by a private individual (the household that occupies the dwelling)

1. person housing them is a family member
2. person housing them is a friend

6. Sub-letting furnished or unfurnished accommodation from a private individual

(sub-tenant has a legal tenancy agreement)

7. Resident, sub-tenant or housed in accommodation run by the state or by a charitable, voluntary, religious or other organization

1. accommodation subject to CHRS (Centre for Housing and Social Readaptation) legislation

- in return for payment or work
- without charge

2. hostel (including emergency shelter), hostel housing (young or immigrant workers, disabled, elderly) or social residence, regardless of legal status (except CHRS)

- in return for payment or work
- without charge

3. voluntary organization whose principal activity is not housing

- in return for payment or work
- without charge

4. other structure whose principal activity is not housing (voluntary organizations excluded)

- in return for payment or work
- without charge

8. Other non-legal occupant

1. with agreement of owner (undeclared, evicted but staying on in dwelling)
2. without agreement of owner

9. Without a place

1. with an address where to receive mail
2. without an address

3. Criteria for evaluating housing quality

- Do you have running water in your housing (home) or, if not, access to a water supply?
- Is there an indoor toilet?
- Is there a shower or bath inside your housing?
- How many rooms does your housing have (not counting the kitchen if less than 12m², bathroom, corridors)?
- How many people live there?
- In the last twelve months, have you had any problems in your home with dampness (infiltration, leaks, flooding)?

4. Classification of stability/insecurity

1. Owner-occupier, tenant, sub-tenant, or housed without charge, and at no clear risk of having to move out in less than a year
2. Owner-occupier, tenant, sub-tenant, or housed without charge, but at risk of having to move out in less than a year

3. Has a dwelling or shelter for a period apparently longer than one year but with no security
4. Has a dwelling or shelter for between 6 months and one year
5. Has a dwelling or shelter for between 1 and 6 months
6. Has no housing security beyond 1 week
7. Has no security but usually sleeps in the same place
8. Has no security and no regular sleeping place

Appendix 2: Main statistical sources of data according to the CUHP²⁰ classification (France)

| | Interviews of service providers, use of service files (record-based data) or administrative data | Interviews of homeless people | Interviews of the general population |
|--|--|--|--|
| Point-in-time data (or very short period), including with retrospective questions | <p>NATIONAL :</p> <ul style="list-style-type: none"> - the ES (Etablissements sociaux) survey “on a given night” of the users of emergency and CHRS shelters. Conducted by the Department of social affairs every second year until 1997, then conducted in 2004 and every fourth year from then on. - DGAS/DPM data on capacities and number of beds occupied at the end of each term. | <p>LOCAL :</p> <ul style="list-style-type: none"> - INED 1995 survey in Paris (users of shelters and food distributions, aged 18 or over) - INED 1998 survey in Paris and nearest suburbs (users of shelters, food distributions and day centres, aged 16 to 24) - INED 2002 survey in Paris, Nantes and Nice (homeless people contacted by outreach services) - DRASSIF survey (1998, 1999, 2000) in emergency shelters - DRASSIF, FNARS, MIPES survey (2003, 2004) in CHRS and emergency shelters <p>NATIONAL :</p> <ul style="list-style-type: none"> - INSEE 2001 survey in cities of 20,000 inhabitants or more (users of shelters, food distributions and day centres aged 18 or over) - FNARS 2001 survey on its clients | <p>NATIONAL :</p> <ul style="list-style-type: none"> - On previous homeless episodes: a question in a CREDOC survey; some questions in the INSEE Health survey; and in the next Housing Survey (2006) - On the housing of family or friends: questions in the 1996 and 2002 Housing Surveys |
| Longitudinal data (collected about the same persons over a long period) | <p>LOCAL :</p> <ul style="list-style-type: none"> - the database of the Paris SAMU Social (a telephone service which attributes shelter beds) - the databases of accommodation services put together at a regional or departmental level (e.g. the ORSAS database) | | |

²⁰ *Constructing Understandings of Homeless Populations*, a research network financed by the European Commission and coordinated by INED.

Appendix 3: List of persons interviewed

DREES

Nicole ROTH, deputy director “Observatoire de la solidarité”
Solweig VANOWERMEIR, representative of the ES survey
Nathalie DUTHEIL, deputy to head official “Etablissements sociaux”

DGAS

François FASSY, head official “Lutte contre les exclusions”
Pascal NOBLET

DDASS Charente

Daniel SCHMITT

INSEE

Division Logement

Alain JACQUOT
Christelle MINODIER

Recensement

Caroline ESCAPA
Bernadette de la ROCHÈRE

Division Conditions de vie

Thomas LE JEANNIC

Division Environnement juridique de la statistique

Michel ISNARD

Université Paris I

Maryse JASPARD

ORSAS-Lorraine

Yvon SCHLÉRET

ORS Ile-de-France

Myriam DALBARADE

OSI (Observatoire social de l’Isère, Social Observatory for the Isère Department)

Francie MEGEVAND

France Terre d’Asile

Véronique LAY

SAMU Social de Paris

Thomas MARIE

FNARS

Carole LARDOUX

Sabine ROBION

Marie LOISON, researcher

DGUHC

Isabelle HENNION, head of sub-directorate IEH1

DRASSIF

Hélène CHAMBOREDON

DRASS Rhône-Alpes

Philippe LAPERROUSE

Appendix 4: The FINESS categories

CATEGORIES D'ETABLISSEMENT

liste fonctionnelle

| | categorie | libellé | libellé court |
|-------------|-----------|---|-----------------------|
| 1000 | | Établissements Relevant de la Loi Hospitalière | |
| 1100 | | Établissements Hospitaliers | |
| | 1101 | Centre Hospitalier Régional | |
| | 101 | Centre Hospitalier Régional | C.H.R. |
| | 1102 | Centres Hospitaliers | |
| | 355 | Centre Hospitalier | Centre Hospitalier |
| | 1103 | Ctres Hospitaliers Spécialisés Lutte Maladies Mentales | |
| | 292 | Ctre Hospitalier Spécialisé lutte Maladies Mentales | C. H. S. Mal. Mental |
| | 1104 | Centres de Lutte contre le Cancer | |
| | 131 | Centre de Lutte Contre Cancer | Ctre Lutte C. Cancer |
| | 1106 | Hôpitaux Locaux | |
| | 106 | Hôpital Local | Hôpital Local |
| | 1107 | Établissements de Soins de Suite et de Réadaptation | |
| | 108 | Établissement de Convalescence et de Repos | Etab.Conv.al.et Repos |
| | 119 | Maison de Régime | Maison de Régime |
| | 135 | Établissement Réadaptation Fonctionnelle | Etab. Réadap. Fonct. |
| | 144 | Établissement de Lutte Contre la Tuberculose | Etab.Lutte Tubercul. |
| | 1109 | Établissements de Soins de Longue Durée | |
| | 362 | Établissement de Soins Longue Durée | Etab.Soins Long.Dur. |
| | 1110 | Établissements de Soins de Courte Durée | |
| | 122 | Établissement soins Obstétriques Chirurgico-Gynécologiques | Etab.Obs.Chir.Gynéco |
| | 128 | Établissement de Soins Chirurgicaux | Etab. Soins Chirur. |
| | 129 | Établissement de Soins Médicaux | Etab. Soins Médicaux |
| | 365 | Établissement de Soins Pluridisciplinaire | Etab.Soins Pluridis. |
| | 1111 | Autres Établissements de Lutte contre les Maladies Mentales | |
| | 156 | Centre Médico-Psychologique (CMP) | C.M.P. |
| | 161 | Maison de Santé pour Maladies Mentales | Mais. Santé Mal.Ment |
| | 366 | Atelier Thérapeutique | Atelier Thérapeut. |
| | 412 | Appartement Thérapeutique | Appart.Thérapeutique |
| | 415 | Service Médico-Psychologique Régional (S.M.P.R.) | S.M.P.R. |
| | 425 | Centre d'Accueil Thérapeutique à temps partiel (C.A.T.T.P.) | C.A.T.T.P. |
| | 430 | Centre Postcure Malades Mentaux | Ctre P-Cure Mal.Men. |
| | 444 | Centre Crise Accueil Permanent | Ctre Crise Acc.Perm. |
| | 1112 | Établissements d'Enfants à Caractère Sanitaire | |
| | 163 | Maison d'Enfants à Caractère Sanitaire Temporaire | M.E.C.S Temporaire |
| | 173 | Pouponnière à Caractère Sanitaire | Pouponnière Car.San. |
| | 179 | Maison d'Enfants à Caractère Sanitaire Permanente | M.E.C.S Permanente |

| categorie | libellé | libellé court |
|------------------|--|----------------------|
| 1113 | Établissements de Lutte contre l'Alcoolisme | |
| 431 | Centre Postcure pour Alcooliques | Ctre PostCure Alcool |
| 1200 | Autres Établissements Relevant de la Loi Hospitalière | |
| 1201 | Traitement et Soins à Domicile | |
| 127 | Hospitalisation à Domicile | Hosp. à Domicile |
| 422 | Traitements Spécialisés à Domicile | Trait.Spéc. Domicile |
| 1203 | Dialyse Ambulatoire | |
| 141 | centre de dialyse | centres de dialyse |
| 146 | structure d'alternative à la dialyse en centre | alternative dialyse |
| 1205 | Autres Établissements Relevant de la Loi Hospitalière | |
| 126 | Établissement Thermal | Etab. Thermal |
| 426 | Syndicat Inter hospitalier | S.I.H. |
| 698 | Autre Établissement Loi Hospitalière | Autre Etab. Loi Hosp |
| 699 | Entité Ayant Autorisation | Entité Ayant Autor. |

2000 Autres Établissements de Soins et Prévention

2200 Autres Établissements de Soins et Prévention

| | | |
|------|---|----------------------|
| 2201 | Dispensaires ou Centres de Soins | |
| 125 | Centre de Santé Dentaire | Ctre Santé Dentaire |
| 130 | Centre de Soins Médicaux | Ctre Soins Médicaux |
| 142 | Dispensaire Antituberculeux | Disp. Anti-Tubercul. |
| 143 | Centre de Vaccination BCG | Ctre.Vaccination BCG |
| 266 | Dispensaire Antivénérien | Disp. Antivénérien |
| 267 | Dispensaire Antihansénien | Disp. Antihansénien |
| 268 | Centre Médico-Scolaire | Ctre Médico-Scolaire |
| 269 | Centre de Médecine Universitaire | Ctre Méd.Universit. |
| 270 | Centre de Médecine Sportive | Ctre Méd.Sportive |
| 289 | Centre de Soins Infirmiers | Centre de Soins Inf. |
| 294 | Centre Consultations Cancer | Centre Consul.Cancer |
| 347 | Centre d'Examens de Santé | Centre Examens Santé |
| 438 | Centre de Médecine collective | Ctre Méd.Collective |
| 439 | Centre Santé Polyvalent | Centre Santé Polyv. |
| 2202 | Établissements de PMI et de Planification Familiale | |
| 223 | Protection Maternelle et Infantile (P.M.I.) | P.M.I. |
| 224 | Établissement de Consultation Pré-postnatale | Etab.Cons.P.Post-Nat |
| 228 | Centre Planification ou Éducation Familiale | Ctre Planif.Educ.Fam |
| 230 | Établissement Consultation Protection Infantile | Etab.Consul.Pro.Inf. |
| 231 | Établissement Information Consultation Conseil Familial | Etab.Inf.Consult.Fam |
| 2204 | Établissements ne relevant pas de la Loi Hospitalière | |
| 433 | Établissement Sanitaire des Prisons | Etab Sanit. Prisons |
| 2205 | Etab de soins relevant du service de santé des armées | |
| 114 | Hôpital des armées | Hôpital armées |
| 115 | Établissement de soins du service de santé des armées | Etab soins armées |

3000 Autres Établissements à Caractère Sanitaire

3100 Laboratoires d'Analyses

| | | |
|------|-------------------------|----------------------|
| 3101 | Laboratoires d'Analyses | |
| 610 | Laboratoire d'Analyses | Laboratoire Analyses |

3200 Commerce de Biens à Usage Médicaux

| | | |
|------|--|----------------------|
| 3201 | Commerce de Biens à Usage Médicaux | |
| 620 | Pharmacie d'Officine | Pharmacie d'Officine |
| 627 | Pro pharmacie | Propharmacie |
| 628 | Pharmacie Minière | Pharmacie Minière |
| 629 | Pharmacie Mutualiste | Pharmacie Mutualiste |
| 690 | Établissement de Fabrication Annexe à une Officine | Fab. Annexe Officine |

3400 Autres Établissements à Caractère Sanitaire

| | | |
|------|--|----------------------|
| 3401 | Transfusion Sanguine | |
| 132 | Établissement de Transfusion Sanguine | Etab. Trans.Sanguine |
| 3402 | Conservation et Stockage d'autres Produits Humains | |
| 233 | Lactarium | Lactarium |
| 3404 | Service d'Ambulances | |
| 327 | Service d'Ambulances | Service d'Ambulances |

4000 Etab Serv Soc d'Accueil Hébergement Assistance Réadaptation

4100 Etab et Serv pour l'Enfance et la Jeunesse Handicapée

| | | |
|------|---|----------------------|
| 4101 | Etab Educ Spéciale pour Déficients Mentaux et Handicapés | |
| 183 | Institut Médico-Educatif | I.M.E. |
| 188 | Établissement pour Enfants ou Adolescents Polyhandicapés | Etab.Enf.ado.Polyhan |
| 402 | Jardin d'Enfants Spécialisé | Jardin Enfants Spéc. |
| 4102 | Etab Educ Spéciale pour Enfants Trouble Conduite et Comport | |
| 186 | Institut thérapeutique, éducatif et pédagogique | I.T.E.P. |
| 4103 | Etab Educ Spéciale pour Handicapés Moteurs | |
| 192 | Établissement pour Déficient Moteur | I.E.M. |
| 4104 | Etab Educ Spéciale pour Déficients Sensoriels | |
| 194 | Institut pour Déficients Visuels | Institut Déf.Visuels |
| 195 | Établissement pour Déficients Auditifs | Inst. Déf.Auditifs |
| 196 | Institut d'Education Sensorielle Sour/Aveugle | Inst.Ed.Sen.Sour.Ave |
| 4105 | Etab.et Serv d'Hébergement pour enfants handicapés | |
| 238 | Centre d'Accueil Familial Spécialisé | Ctre Acc. Fam. Spéc. |
| 390 | établissement d'accueil temporaire d'enfants handicapés | ET accueil temp EH |
| 396 | Foyer Hébergement Enfants et Adolescents Handicapés | Foyer Heb.Enf.Ado.H |
| 4106 | Services à Domicile ou Ambulatoires pour enfants handicapés | |
| 182 | Service d'Éducation Spéciale et de Soins à Domicile | Serv.Educ.S.Soin.Dom |

| catégorie | libellé | libellé court |
|-----------|--|----------------------|
| 189 | Centre médico-psycho-pédagogique (C.M.P.P.) | C.M.P.P. |
| 190 | Centre Action Médico-Sociale précoce (C.A.M.S.P.) | C.A.M.S.P. |
| 221 | Bureau d'Aide Psychologique Universitaire (B.A.P.U.) | B.A.P.U. |
| 4107 | Etab Expérimentaux en Faveur de l'Enfance Handicapée | |
| 377 | Établissement Expérimental pour Enfance handicapée | Etab Expér.Enf.Hand. |

4300 Établissements et Services pour Adultes Handicapés

| | | |
|------|--|----------------------|
| 4301 | Etab et Services d'Hébergement pour Adultes Handicapés | |
| 252 | Foyer Hébergement pour adultes handicapés | Foyer Héberg. AH |
| 253 | foyer d'accueil polyvalent pour adultes handicapés | foyer polyvalent AH |
| 255 | Maison d'Accueil Spécialisée (M.A.S.) | M.A.S. |
| 382 | Foyer de vie pour adultes handicapés | Foyer de vie AH |
| 395 | établissement d'accueil temporaire pour adultes handicapés | ET accueil temp AH |
| 437 | Foyer d'accueil médicalisé pour adultes handicapés (F.A.M) | F.A.M. |
| 4302 | Etab et Serv de Travail Protégé pour Adultes Handicapés | |
| 246 | Ctre d'Aide par le Travail (C.A.T.) | C.A.T. |
| 247 | Atelier Protégé | Atelier Protégé |
| 4303 | Etab et Services de Réinsertion Prof pour Adultes Handicapés | |
| 198 | Centre de Pré orientation pour Handicapés | Ctre Préorient.Hand. |
| 249 | Centre Rééducation Professionnelle | Centre Rééducat.Prof |
| 4304 | Etab Expérimentaux en Faveur des Adultes Handicapés | |
| 379 | Établissement Expérimental pour Adultes Handicapés | Etab Expér.Adu.Hand. |
| 4305 | Services de Maintien à Domicile pour Handicapés | |
| 446 | Service d'Accompagnement à la Vie Sociale (S.A.V.S.) | S.A.V.S. |

4400 Établissements et Services pour Personnes Âgées

| | | |
|------|---|----------------------|
| 4401 | Établissements d'accueil pour Personnes Âgées | |
| 199 | Hospice | Hospice |
| 200 | Maison de Retraite | Maison de Retraite |
| 202 | Logement Foyer | Logement Foyer |
| 394 | établissement d'accueil temporaire pour Personnes Âgées | ET accueil temp.P.A. |
| 4402 | Services Sanitaires de Maintien à Domicile | |
| 207 | Centre de Jour pour personnes âgées | Centre de Jour P.A. |
| 4403 | Services Sociaux en Faveur des Personnes Âgées | |
| 205 | Foyer Club Restaurant | Foyer Club Restaur. |
| 208 | Service d'Aide Ménagère à Domicile | Serv.Aide Ménag.Dom. |
| 212 | Alarme Médico-Sociale | Alar. Médico-Sociale |
| 368 | Service de Repas à Domicile | Serv.Repas Domicile |
| 450 | Service d' Aide aux personnes âgées | Serv.Aide pers âgées |
| 4404 | Etab Expérimentaux en Faveur des Personnes Âgées | |
| 381 | Établissement Expérimental pour Personnes Âgées | Etb Expér.Pers.Âgées |

4500 Etab et Serv Sociaux Concourant à la Protection de l'Enfance

| | | |
|------|-------------------------------------|----------------------|
| 4501 | Etab de l'Aide Sociale à l'Enfance | |
| 166 | Établissement d'Accueil Mère-Enfant | Etab.Acc.Mère-Enfant |

| categorie | libellé | libellé court |
|------------------|---|----------------------|
| 172 | Pouponnière à Caractère Social | Pouponnière Car.Soc. |
| 175 | Foyer de l'Enfance | Foyer de l'Enfance |
| 176 | Village d'Enfants | Village d'Enfants |
| 177 | Maison d'Enfants à Caractère Social | Mais.Enf.Car.Social |
| 236 | Centre Placement Familial Socio-éducatif (C.P.F.S.E.) | C.P.F.S.E. |
| 411 | Intermédiaire de Placement Social | Interméd.Pla.Social |
| 4502 | Etab et Services du Ministère de la Justice pour Mineurs | |
| 241 | Foyer d'Action Éducative (F.A.E.) | F.A.E. |
| 427 | Service Éducatif auprès des Tribunaux (S.E.A.T.) | S.E.A.T. |
| 441 | Centre d'Action Éducative (C.A.E.) | C.A.E. |
| 4504 | Services Concourant à la Protection de l'Enfance | |
| 286 | Club Équipe de Prévention | Club Equipe de Prév. |
| 295 | Service Action Éducative en Milieu Ouvert (A.E.M.O.) | Service A.E.M.O. |
| 418 | Service d'Enquêtes Sociales (S.E.S.) | Service Enq.Sociales |
| 453 | Service de Réparation Pénale | Serv. Répar. Pénale |
| 4505 | Etab Expérimentaux en Faveur de l'Enfance Protégée | |
| 378 | Établissement Expérimental Enfance Protégée | Etab Expér.Enf.Prot. |
| 440 | Service Investigation Orientation Éducative (S.I.O.E.) | S.I.O.E. |
| 4600 | Autres Etab et services sociaux et médico sociaux | |
| 4601 | Établissements pour Adultes et Familles en Difficulté | |
| 214 | Centre Hébergement & Réinsertion sociale (C.H.R.S.) | C. H. R. S. |
| 219 | Autre Centre d'Accueil | autre Ctre Accueil |
| 442 | Centre Provisoire Hébergement | C.P.H. |
| 443 | Centre Accueil Demandeurs Asile | C.A.D.A. |
| 4602 | Autres Etab Sociaux d'Hébergement et d'Accueil | |
| 218 | Aire Station Nomades | Aire Station.Nomades |
| 256 | Foyer Hébergement Travailleurs Migrants | Foyer Héberg.Trav.Mi |
| 257 | Foyer Jeunes Travailleurs | Foyer Jeunes Trav. |
| 271 | Hébergement Familles des Malades | Héberg.Fam.des Malad |
| 324 | Logement-Foyer non Spécialisé | Log. Foyer non Spéc. |
| 4603 | Établissements Expérimentaux en Faveur des Adultes | |
| 380 | Établissement Expérimental Autres Adultes | Etb Expér.aut.Adulte |
| 4604 | Autres établissements médico-sociaux | |
| 160 | Centre Conventionné de Soins Spécialisés pour Toxicomanes | C.S.S.T. |
| 162 | Centre de cure ambulatoire en alcoologie | C. C. A. A. |
| 165 | appartement de coordination thérapeutique | A.C.T. |
| 4605 | établissements et services multi clientèles | |
| 209 | service polyvalent aide et de soins à domicile | S.P.A.S.A.D |
| 354 | Service de Soins infirmiers à Domicile | S.S.I.A.D. |
| 460 | service prestataire d'aide à domicile | S.A.D. |
| 462 | lieux de vie | lieux de vie |
| 4606 | centres de ressources | |
| 461 | centres de ressources S.A.I. | centres ressources |
| 463 | centres locaux information coordination PA | C.L.I.C. |

5000 Établissements et Services Sociaux d'Aide à la Famille

5100 Établissements Garde d'Enfants d'Age pré-Scolaire

| | | |
|-------------|---|----------------------|
| 5101 | Établissements Garde d'Enfants d'Age pré-Scolaire | |
| 164 | établissements expérimental accueil de la petite enfance | etb exper petite enf |
| 167 | Crèche Collective | Crèche Collective |
| 168 | service accueil familial pour la petite enfance | accueil familial |
| 169 | établissement multi accueil collectif et familial | Crèche Fam. et Coll. |
| 170 | Halte Garderie | Halte Garderie |
| 171 | Garderie et Jardin d'Enfants | Garderie Jardin Enf. |
| 174 | établissement d'accueil collectif régulier et occasionnel | acc collectif reg/oc |
| 398 | Crèche Parentale | Crèche Parentale |
| 399 | Halte Garderie Parentale | Halte Garderie Par. |
| 404 | établt d'accueil collectif parental regulier/occasionnel | accueil parental |
| 5102 | Établissements d'Hébergement pour Enfants d'Age Scolaire | |
| 367 | Maison d' Enfants non Conventionnée ni Habilitée | Mais.Enfant n C.n H |
| 5103 | Établissements Sociaux pour Loisirs et Vacances | |
| 181 | Maison Familiale de Vacances | Mais. Fam. Vacances |
| 285 | Ctre Loisirs sans Hébergement | Ctre Loisirs ss Héb. |
| 5104 | Établissements ou Services Divers d'Aide à la Famille | |
| 220 | Centre Social | Centre Social |
| 345 | Service Tutelle Prestation Sociale | Serv.Tut.Prest.Soc. |
| 346 | Service de Travailleuses Familiales | Serv.Trav.Familiales |
| 359 | Centre Circonscription Sanitaire et Sociale | Ctre Circons.San.Soc |
| 400 | Centre de Services pour Associations | Ctre Services Assoc. |
| 403 | Service Social Spécialisé ou Polyvalent de catégorie | Serv.Soc.Spéc.Pol.Ca |
| 405 | Service Social Polyvalent de Secteur | Serv.Soc.Polyv.Sect. |
| 451 | Service d' Aide aux Familles en Difficulté | Serv. Aide Fam. Dif |

6000 Etab de Formation des Personnels Sanitaires et Sociaux

6100 Établissements de Formation des Personnels Sanitaires

| | | |
|-------------|--|----------------|
| 6101 | Établissements de Formation des Personnels Médicaux | |
| 300 | écoles formant aux professions de santé | école de santé |

6200 Établissements de Formation des Personnels Sociaux

| | | |
|-------------|---|---------------|
| 6201 | Établissements de Formation des Personnels Sociaux | |
| 330 | écoles formant aux professions sociales | école sociale |

6300 Établissements de Formation Polyvalente

| | | |
|-------------|--|-----------------|
| 6301 | Établissements de Formation Polyvalente | |
| 374 | École Nationale Santé Publique (E.N.S.P.) | E. N. S. P. |
| 436 | École formant aux professions sanitaires et sociales | Ecole pluriprof |

Appendix 5: Data from the DGAS/DPM

Capacities available 2005 (places)

| Regions | CHU | Hotels | CHRS and CEFR (excl. CAVA) | Move-on houses | CADA | CPH | AUDA | CHU for asylum seekers | Hotel places for asylum seekers | Total capacity |
|--------------------------------|---------------|--------------|-------------------------------|-------------------|---------------|--------------|--------------|---------------------------|---------------------------------------|-------------------|
| ALSACE | 707 | | 763 | 48 | 843 | 95 | 25 | 1 337 | 122 | 3 940 |
| AQUITAINE | 151 | 43 | 1 040 | 112 | 627 | 60 | | 30 | 278 | 2 341 |
| AUVERGNE | 78 | 27 | 328 | 40 | 337 | | 30 | | 105 | 945 |
| BASSE-NORMANDIE | 192 | 120 | 420 | 20 | 449 | | | | 201 | 1 402 |
| BOURGOGNE | 100 | | 927 | 107 | 876 | 53 | | 273 | 33 | 2 369 |
| BRETAGNE | 14 | 17 | 1 028 | 133 | 763 | 59 | | 488 | 138 | 2 640 |
| CENTRE | 350 | 314 | 907 | 32 | 1 138 | 90 | 100 | 766 | 371 | 4 068 |
| CHAMPAGNE-ARDENNE | 118 | | 824 | 74 | 515 | | 135 | | 177 | 1 843 |
| CORSE | 11 | | 95 | | | | | | | 106 |
| FRANCHE-COMTE | 175 | 44 | 482 | 51 | 525 | 66 | | 660 | | 2 003 |
| HAUTE-NORMANDIE | | 66 | 1 565 | 50 | 861 | | 180 | 547 | 280 | 3 549 |
| ILE-DE FRANCE | 4 790 | 6 953 | 7 085 | 478 | 2 737 | 76 | 40 | | 3 701 | 25 860 |
| LANGUEDOC-ROUSSILLON | 347 | 24 | 786 | 74 | 511 | 30 | | 238 | 80 | 2 090 |
| LIMOUSIN | | 6 | 191 | 44 | 199 | | | | 37 | 477 |
| LORRAINE | 176 | 123 | 1 705 | 95 | 780 | | 35 | 1 011 | 209 | 4 134 |
| MIDI-PYRENEES | 173 | 27 | 1 004 | 40 | 741 | 161 | | 198 | 348 | 2 692 |
| NORD-PAS-DE-CALAIS | 2 393 | 138 | 2 290 | 114 | 347 | 42 | 45 | | 547 | 5 916 |
| PAYS-DE-LA-LOIRE | 120 | 20 | 1 372 | 108 | 1 050 | 40 | | 221 | 239 | 3 170 |
| PICARDIE | 267 | 15 | 855 | 170 | 761 | 60 | 135 | 161 | 196 | 2 620 |
| POITOU-CHARENTES | 187 | 40 | 813 | 81 | 348 | | | 56 | 138 | 1 663 |
| PROVENCE-ALPES-COTE- D'AZUR | 932 | 29 | 2 823 | 122 | 1 142 | 56 | 40 | 353 | 509 | 6 006 |
| RHONE-ALPES | 875 | 578 | 3 087 | 255 | 1 920 | 135 | 435 | | 3 031 | 10 316 |
| Temporary housing | | | | | | | | | | 1 200 |
| GUADELOUPE | | 36 | 40 | | | | | | | 76 |
| GUYANE | 30 | 6 | 30 | | | | | | | 66 |
| MARTINIQUE | | | 39 | 14 | | | | | | 53 |
| REUNION | 26 | | 104 | | | | | | | 130 |
| TOTAL | 12 212 | 8 626 | 30 603 | 2 262 | 17 470 | 1 023 | 1 200 | 6 339 | 10 740 | 91 675 |

| Schemes | Places open end 2005 | Places still to be created in 2005 | Creation of new places 2006 | Creation of new places 2007 | Total programme end (2005+2006+2007) |
|---|----------------------|------------------------------------|-----------------------------|-----------------------------|--------------------------------------|
| I- DGAS schemes | | | | | |
| Emergency shelter (CHU) | 12 212 | | | | 12 212 |
| Hotel places | 8 626 | | | | 8 626 |
| Hostel (CHRS) | 30 603 | 400 | 500 | 500 | 32 003 |
| Sub-total 1 | 51 441 | 400 | 500 | 500 | 52 841 |
| II- DPM schemes | | | | | |
| Hostel for asylum seekers (CADA) | 17 470 | | 2 000 | 1 000 | 20 470 |
| Temporary hostel for refugees (CPH) | 1 023 | | | | 1 023 |
| Emergency shelter for asylum seekers (AUDA) | 1 200 | | | | 1 200 |
| Emergency shelter reserved for asylum seekers | 6 339 | | | | 6 339 |
| Hotel places for asylum seekers | 10 740 | | | | 10 740 |
| Sub-total 2 | 36 772 | 0 | 2 000 | 1 000 | 39 772 |
| Move-on houses ("maisons-relais") | 2 262 | 832 | 1 500 | 1 500 | 6 094 |
| Temporary housing | 1 200 | | | | 1 200 |
| Total capacity | 91 675 | 1 232 | 4 000 | 3 000 | 99 907 |

Places in winter plan 2005/2006

| Places open end 2005 | Level 1 winter plan | Total places open from 1-11-2005 to 31-03-2006 | Level 2 reserve winter plan | Level 3 reserve winter plan |
|----------------------|---------------------|--|-----------------------------|-----------------------------|
| 12 212 | 3 052 | 15 264 | 2 049 | 2 017 |
| 8 626 | 688 | 9 314 | 678 | 252 |
| 30 603 | 473 | 31 076 | 408 | 201 |
| 51 441 | 4 213 | 55 654 | 3 135 | 2 470 |
| 17 470 | 50 | 17 520 | 15 | 14 |
| 1 023 | 35 | 1 058 | 4 | 0 |
| 1 200 | 20 | 1 220 | 6 | 0 |
| 6 339 | 305 | 6 644 | 15 | 8 |
| 10 740 | 459 | 11 199 | 385 | 103 |
| 36 772 | 869 | 37 641 | 425 | 125 |
| 2 262 | 0 | 2 262 | 0 | 0 |
| 1 200 | 252 | 1 452 | 249 | 696 |
| 91 675 | 5 334 | 97 009 | 3 809 | 3 291 |

Source: DGAS/DPM

| DPM-DGAS indicators of accommodation interventions | Capacities at 31 December 2004 (excl. Winter plan) | Capacities at 31 December 2005 (excluding Winter plan) | Expenditure over period 01/01/05 to 31/12/05 | ALT (total amounts allocated by agreements) | Number of persons accommodated at end of quarter* by category | | | | Number of families accommodated at end of quarter* (a family=minimum 1 parent + 1 child) | Number of applicants waiting for housing or accommodation at end of quarter * | | |
|---|--|--|--|--|---|----------------|--------------|-------------------|--|---|--|-------------------------|
| | | | | | Total | of which | | | | Persons making a request for housing | Persons waiting for accommodation and not enrolled in the scheme | |
| | | | | | | Asylum seekers | Refugees | Failed applicants | | | Total | of which asylum seekers |
| "Foreign reception and integration" program | | | | | | | | | | | | |
| <i>Accommodation for asylum seekers</i> | | | | | | | | | | | | |
| CADA | 15 265 | 16 923 | 122 155 213 | 370 | 15 265 | 9 377 | 3 189 | 2 254 | 3 445 | 2 412 | 1 834 | 1 467 |
| Emergency facilities | 10 480 | 10 676 | 54 913 554 | 3 257 742 | 9 794 | 5 403 | 1 694 | 1 993 | 2 169 | 1 606 | 919 | 908 |
| Hotel places | 5 685 | 5 278 | 29 553 291 | 823 914 | 3 538 | 2 149 | 690 | 363 | 1 173 | 957 | 524 | 574 |
| Other emergency expenditure | | | 6 852 413 | | | | | | | | | |
| <i>Accommodation for refugees</i> | | | | | | | | | | | | |
| CPH | 1 323 | 1 330 | 12 077 770 | 19 210 | 1 080 | 75 | 1 098 | 1 | 185 | 388 | 474 | 0 |
| DPM TOTAL | 32 753 | 34 207 | 225 552 241 | 4 101 236 | 29 677 | 17 004 | 6 671 | 4 611 | 6 972 | 5 363 | 3 751 | 2 949 |
| "Policies for social inclusion" programme | | | | | | | | | | | | |
| <i>Accommodation</i> | | | | | | | | | | | | |
| Emergency accommodation | 13 637 | 14 413 | 90 901 583 | 9 029 334 | 10 287 | 1 198 | 829 | 497 | 954 | 1 214 | 717 | 440 |
| CHRS (emergency + resettlement) | 29 467 | 30 005 | 422 858 091 | 97 349 | 23 111 | 702 | 931 | 378 | 3 890 | 4 717 | 4 495 | 280 |
| Hotel places | 7 681 | 8 130 | 40 995 136 | 1 213 007 | 8 998 | 48 | 231 | 6 252 | 349 | 530 | 21 | 5 |
| Other expenditure sub-interventions 1, 2 et 3 of intervention 2 | | | 33 518 530 | | | | | | | | | |
| DGAS TOTAL | 50 785 | 52 548 | 588 273 339 | 10 339 690 | 42 396 | 1 948 | 1 991 | 7 127 | 5 193 | 6 461 | 5 233 | 725 |
| TOTAL ACCOMMODATION (DPM + DGAS) | 83 538 | 86 755 | 813 825 580 | 14 440 926 | 72 073 | 18 952 | 8 662 | 11 738 | 12 165 | 11 824 | 8 984 | 3 674 |
| <i>Housing</i> | | | | | | | | | | | | |
| Move-on houses | 1 376 | 2 030 | 6 296 390 | 77 273 | 996 | 0 | 16 | 0 | 108 | 113 | 140 | 0 |
| Social boarding houses | 41 118 | 42 237 | 7 502 347 | 736 978 | 20 761 | 60 | 186 | 25 | 4 386 | 1 232 | 718 | 4 |
| Housing on ALT only | 24 724 | 24 681 | 17 240 609 | 37 139 022 | 13 595 | 485 | 518 | 304 | 1 565 | 2 597 | 1 097 | 8 |
| TOTAL HOUSING | 67 218 | 68 948 | 31 039 346 | 37 953 273 | 35 352 | 545 | 720 | 329 | 6 059 | 3 942 | 1 955 | 12 |

* The table will be quarterly: updates planned for 30 September/ 31 December/ 31 March etc.

Appendix 6

Glossary

ALT: Aide au Logement Temporaire (allowance for temporary accommodation)

AME: Aide Médicale de l'Etat (medical care for those without access to the regular social security health coverage, that is, under certain conditions of length of stay, migrants without residence permits or failed asylum seekers)

ASE: Aide Sociale à l'Enfance (local government-run social assistance for children)

AUDA: Accueil d'Urgence pour Demandeurs d'Asile (emergency shelters for asylum seekers)

CADA: Centre d'Accueil pour Demandeurs d'Asile (hostel for asylum seekers)

CASVP: Centre d'Action Sociale de la Ville de Paris (the CCAS of the Paris municipality)

CAVA: Centres d'Adaptation à la Vie Active (centres for adaptation to active life)

CCAS: Centres Communaux d'Action Sociale (municipal centres for social action, local level social services)

CEFR: Comité d'Entraide aux Français Rapatriés (helps repatriated French people)

CERFA Centre d'Enregistrement et de Révision des Formulaires Administratifs (in charge of digitizing all administrative forms)

CHRS: Centres d'Hébergement et de Réinsertion Sociale (Centres for Accommodation and Social Reintegration)

CHU: Centre d'hébergement d'urgence (emergency shelter)

CNIL: Commission Nationale Informatique et Libertés (National Commission on Data Protection and Privacy)

CNIS: Conseil National de l'Information Statistique (National Council for Statistical Information)

CPH: Centre Provisoire d'Hébergement (temporary hostel intended for refugees)

CROSMS: Comité Régional de l'Organisation Sociale et Médico-Sociale (regional committee for social and medico-social organization); authorizes the creation, transformation and significant expansion of social and medico-social establishments ("significant" meaning in excess of 15 beds/persons and 30% of the initial capacity)

CUHP: Constructing Understandings of Homeless Populations (a research network financed by the European Commission, coordinated by INED)

DDASS: Direction Départementale des Affaires Sanitaires et Sociales (Departmental Directorate of Health and Social Affairs)

DGAS: Direction Générale des Affaires Sociales (General Directorate of Social Affairs)

DGUHC : Direction Générale de l'Urbanisme, de l'Habitat et de la Construction (General Directorate of Urban Planning, Housing and Building)

DPM: Direction de la Population et des Migrations (Directorate for Population and Migrations)

DRASS: Direction Régionale des Affaires Sanitaires et Sociales (Regional Directorate of Health and Social Affairs,)

DRASSIF: the DRASS for the Ile-de-France region (the region that includes the municipalities of Paris and its suburbs plus other municipalities)

DREES: (previously SESI): Direction de la Recherche, des Études, de l'Évaluation et des Statistiques (Directorate for Research, Studies, Evaluation, and Statistics, the statistical services of the Ministry of Health and Social Affairs)

ENVEFF: Enquête nationale sur la violence envers les femmes en France (national survey on violence against women in France)

ES survey: Enquête Etablissements Sociaux, or Etablissements et Services (Social Establishments survey, or Establishments and Services survey)

FINESS: Fichier d'Identification National des Établissements Sanitaires et Sociaux (a national database of establishments in the health and welfare sectors)

FJT: Foyer de Jeunes Travailleurs (young workers' hostel)

FNARS: Fédération Nationale des Associations de Réinsertion Sociale (National Federation of Social Reintegration Associations)

FTA: France Terre d'Asile (an NGO providing for asylum seekers)

FTM: Foyer de Travailleurs Migrants (migrant workers' hostel)

Haut Comité pour le logement des personnes défavorisées (High Committee for the housing of disadvantaged persons)

IDF: Ile-de-France (the Paris region, a geographical area which includes the municipalities of Paris and its suburbs plus other municipalities)

IDUP: Institut de Démographie de l'Université de Paris (Institute of Demography of the University of Paris)

INED: Institut National d'études démographiques (National Institute of Demographic Studies)

INSEE: Institut National de la Statistique et des Etudes Economiques (National Institute of Statistics and Economic Studies)

LOLF: Loi Organique relative aux Lois de Finances (organic law relative to public finance bills)

MIPES: Mission d'Information sur la Pauvreté et l'Exclusion Sociale en Ile-de-France (information mission on poverty and social exclusion in the Ile-de-France region)

OND: Observatoire National de la Délinquance (National Observatory of Delinquency)

ORS: Observatoire Régional de la Santé (Regional Observatory of Health)

ORSAS: Observatoire régional de la Santé et des Affaires Sociales de Lorraine (Regional Observatory of Health and Social Affairs of the Lorraine region)

OSC: Observatoire Sociologique du Changement (sociological observatory of change, a social science research laboratory)

SAMU Social: SAMU stands for Service d'Aide Médicale d'Urgence (emergency ambulances); SAMU Social is an outreach service providing "social ambulances"

SD2001: SD stands for Sans-Domicile (homeless). SD2001 is the national survey on the homeless conducted by INSEE in 2001

SESI: now the DREES

Appendix 7

Asylweb client record system (for asylum seekers)

1. *Approach to Data Collection*

- Purpose of data collection: the data is collected for administrative purposes, for research projects and studies, and for reports on functioning
- Geographical coverage: national
- Time coverage and frequency of data collection: point in time and over a period
 - Point-in-time: three-monthly, six-monthly, annual
 - Continuous registration system: daily input

2. *Data Items / Elements*

- Type of data collected (individual data for each person/household or aggregate data?)
 - By person with possibility of reconstructing households
 - At present there is an identifier by name and first name only, but a computerized system to be set up in autumn 2006 by ANAEM will track asylum seekers from entry to exit.
- Units of data collection (household, persons) recorded.
(see *supra*)
- Variables used (no list given)

3. *Data Processing and Quality Issues*

- Data processing methods (what is done to control accuracy and plausibility of data, software used, weighting methods, kind of data analysis,...): missing data alert, visualization of incorrect forms
- Validity of data: data entry errors
- Analysis and presentation of results (are data publicly accessible, recommendations etc), analysis by local or national administrator (not same source)

4. *Technical / IT Issues*

- Software employed and ownership agreements: Internet Explorer version 5 or later
- Hardware requirements: Computer with internet access
- Data query methods and ease of extract by users: extraction on request

5. *Management Issues*

- Social workers implied in doing the original interview and collecting the data
- Organizational issues (when and how are data brought together, obligations for data providers etc.)
- Data protection issues: data protection law (CNIL etc.)

6. *Monitoring and Evaluation issues*

- Use of data: public debate, official documents, press
- Evaluation of overall quality and advantages / disadvantages of data collection system:
Advantages: gives estimates of number of asylum seekers, quantitative and qualitative change over time, profiles of asylum seekers;

Limitations: necessary to clarify catalogue of indicators and explain entry fields, + manual use

- Costs and resources involved (direct and indirect)

Cost of base: around 100 000 €

Annual maintenance cost: around 20 000 €

Annual leasing: 1 000 €

- Transferability of data collection system to other EU countries (is the system transferable, what are national/regional particularities, what are the basic conditions for a transfer etc.?)

The main problem concerns transferability to the issue of homelessness. The chief difference compared with the homeless is that asylum seekers are allowed to stay in the country temporarily while their asylum application is being processed but may no longer be allowed to stay once their application has been rejected.

Once the person has entered the national reception system he or she cannot benefit from it again if they have left it, so there is no recording of returns.

Documents de Travail

Ces fascicules vous seront adressés sur simple demande à l'auteur :
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