

21. Innovative back in the 90s.

Sometimes, what one feels as totally distant, might offer unexpected points of view instead. When the fostered “bright-new” looks amazingly retro, one might search for real innovation at a deeper level. In the inner world. New reflections might sound useful. If not innovative in some degrees. An unexpected point of view. Almost forgotten.

To find something innovative, sometimes it is worth looking backward in history.

I witnessed some praxis back in the 90s, when the Municipality of Turin invested in social policies for people experiencing homelessness.

It was a sort of golden era, where social workers were entitled for the need-analysis straight on the field, giving suggestions to the policy level on what services were required, and the local authorities took notes and invested creating those services.

Back in the 90s, a progressive-based structure shifted from the continuum of care to a right-based approach tailored to local context.

Starting from individual needs, tailored solutions were defined together with the person-in-need so that each step was supportive toward the independent housing.

The basic concept was that every human-being is different, with different needs, will, experiences, skill, and so on.

Subsequently, each single individual has the undeniable right to find the best possible service to match and respond to its own individual need, will, skills, abilities, experience.

As I was the responsible for projects development, I had the luck of writing most of the projects and manage the start-up of these services, which designed a multi-functional offer targeted to people living in

social exclusion.

At its most, the local offer comprehended:

- a night street-worker unit for direct and emergency interventions of harm reduction, and to monitor the phenomenon;
- a daily street-worker unit for social accompaniment;
- four low-threshold nights shelters;
- two open services at the Central Station: a temporary shelter for those elderly people living around, and a socio-sanitary health ambulatory to respond to the sanitary necessities of those most deprived or undocumented, in collaboration with local health authorities and Red Cross;
- social accompaniment in move-on dormitories with daily opportunities for reinsertion into labour market from low threshold shelters onward, to offer a prospective vision and factual opportunities out of the exclusion circles;
- residential accommodations to support individual programmes from their beginnings onwards;
- shared-apartments and offer co-housing opportunities, giving accommodations from one to six people, without any gender discrimination, as a last factual support before the reinsertion;
- a coaching and tutoring support for those who were autonomous, to prevent repetitions of any cracking experience.

The vision was to offer a wealthy environment for the person in need, in order to free energy in being supportive for the inner world and allowing a progressive taking of responsibility by the person itself.

Each actor had to be responsible of its own. Valid for institutions. Valid for individuals-in-need. Valid for third sector.

The person-in-need was supported and accompanied on a path towards being competent on his/her own competence, in reaching its own wellness, in being confident within its own limits, in being self-supportive on its own desires and will.

This is how we meant and declined the right-based approach⁷¹.

Housing-first, participation, synergy, resilience, proactive approach, all these terms were not very popular and hip back at those days.

We were just doing it: there were no necessity for shining terms where the net results spoke for themselves.

Maybe we were a bit basic in front of today's hip-speakers showing off their innovative receipts.

We might have been naif, but we did not feel we needed any new-speak terms: it appeared simply as the most honest way to signify the care-work within a framework of community-lead experience.

It was a simple way focused to net result.

To us, it was an act of social policy, solidarity, respect and dignity.

Every effort was focused to foster independency within the higher possible qualitative standards.

The service was structured to offer full of dignity and unconditional respect to the individuals-in-need.

It offered independent accommodations in private apartments within a decent context, assuming mutual and reciprocal responsibilities between all actors by calling things by their given names.

I experienced as the coordinator in the team operating in the residential accommodations and in the shared-apartments service with massive social accompaniment.

It was my dream team, and the way we worked together will last forever with my best memories.

The impact was not just emotional, but impressive in term of net results and impacts.

⁷¹ It implied that individuals-in-need received the type and intensity of care that was appropriate within the current issues. As the condition subsequently improved or deteriorated, the person could be either stepped up or down. Mostly, the responsibility were assumed by all actors, such as institutions, NGOs, local community, in parallel to the person-in-need.

The data⁷² showed between 65 and 70% of success in independent housing through reinsertion praxis during the period 1998-2004.

Another example was the start-up and management of the social and sanitary ambulatory with accommodation facilities in Turin Central Station. Within the first two years, the general situation of those living in the station was answered, while the sanitary emergency were solved directly, offering a constant screening to both documented and undocumented individuals. It was a cheap and effective act of prevention for the whole city.

Maybe it was a bit innovative within the local and national scenario.

Today most of those services have been closed and re-opened from time to time, with a massive reduction in the offer of social accompaniment. Some has been dismantled de facto. Others changed their names to more fashionable definition, to sound innovative.

But even in the 90s, it was innovative only by given means, as these praxis had been tested before in various field of social action, in different European countries.

The crucial point is how the term “innovation” is intended. Back at that time, there were no interest in being innovative, as there were no interest in consensus, but only in doing something valid, and evidence-based. As Thomas Frank underlined, « ... what determines creativity (and innovation) ... is the very faction it is supposedly

⁷² Between April 1998 and December 2003, the service was used by eighty-seven individuals-in-need with the following results and impacts:

Results & impacts	individuals	%	
autonomous housing on private market	21	24	Success 69%
autonomous living in public housing	25	29	
own resources (familiar, friends ...)	6	7	
residential accommodations	4	5	
pensions and residence	4	5	Failures 31%
other social services & accommodations	8	9	
refuse the offer	1	1	
failures	18	21	
	87	100	

rebelling against: established expertise ...⁷³».

I just participated and witnessed the praxis of promoting human rights through acts of social inclusion.

People got reinserted and ended up being assisted.

They were not scrap anymore. Not even a cost.

Became part of something.

Individuals within a community.

It was a praxis based on giving responsibility back to who deserves it. To individuals for what belonged to individuals. To the community for what belonged to the collectivity. This is how the grammar of our speech on social inclusion sounded.

This approach and those experiences were nothing absolutely innovative. It was an adaptation of the principle of de-institutionalisation, which led to the closing of mental hospitals in the 1978⁷⁴. It was innovative in late 70s.

The transfer and the applicability of those concepts to people

⁷³ Ref.: Thomas Frank, *TED talks are lying to you*, 2013. Frank shows how innovation is « ...not science... but literature of superstition, in which everything worked out, the good guy always triumphed and the good invention always came along in the nick of time ... far from being an act of individual inspiration, what we call creativity is simply an expression of professional consensus... Using Vincent van Gogh as an example: his creativity came into being when a sufficient number of art experts felt that his paintings had something important to contribute to the domain of art. Innovation exists only when the correctly credentialed hive-mind agrees that it does. Without such a response, van Gogh would have remained what he was, a disturbed man who painted strange canvases

⁷⁴ In 1978, after long social and political debates, the “Basaglia” Law n. 180/78 stated the definitive closure of total institutions for mental health in Italy. The institutions were substituted by housing opportunities where former “patient” became “citizens” in their communities, and lived just as all others. Support were established when needed. The law took the name of Franco Basaglia (1924-1980), a psychiatric and neurologist whose contribution was fundamental. The base of “active citizenship”, “social co-housing” and “housing-first”, some 40 years in advance.

experiencing homeless and social exclusion in late 90s was a pilot experience. It was years ago, while the grammar on how to favour and foster paths of real, effective and factual inclusion is still valid, transferable and adaptable to other contexts.

It was not innovative by given name, but just for the institutional environment, as those praxis implied to question the global degree of responsibility for individual-in-need, institutions, third sector.

Looking back at those days, it sounds innovative only to those who lost their memories, aware of it or not.

For all the others, history can teach.