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DIAGNOSIS OF THE DISABLED HOMELESS PEOPLE IN CZESTOCHOWA

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Solving social problems is a process well known to all countries in the world. The tasks connected with welfare aid keep growing, because the number of citizens unable to cope with functioning in different fields of life increases. Changes in human awareness do not follow the development of technical innovations and a growing number of citizens suffer from alienation. Homelessness is one of such social problems. Professional management of an individual case requires an appropriate, diligent diagnosis. The discussion based on diagnosing people suffering from a disability strives to show the issue of homelessness and a homeless person as an individual of dignity having the right of being treated decently. The aim of the subject of the study is to encourage undertaking attempt to develop practical models of the aid to restore the homeless to functioning in their communities.

Key words: homelessness, a homeless person, disability, diagnosis.

Homelessness is a social problem affecting many countries, more economically developed or less developed. Homelessness results in social, economic and safety consequences for individual homeless people and for their country. An American sociologist, Ray Oldenburg (1989) published a book *The Great Good Place*, in which he maintains that our social life focuses on three important centres: home (the place where we live), work (the place where we work) and the, so called “third place”, in which we live our widely understood social life. Although in his book, the author dedicated most place to the third category – coffee houses, restaurants, shopping centres, etc., he recognised having one’s own house, or apartment to be the most important place to live for each human being. In our own or rented houses/apartments, each one of us creates his or her own, individual place. Home, its equipment and surroundings is not only a symbol of our social status, not only the evidence of our social affiliation, but it is a kind of platform for our everyday living activities. A human being deprived of this privacy – his or her own place, is unable to satisfy his/her fundamental needs, which has a destructive effect on their psychological and physical condition and does not allow to satisfy their higher needs, self-accomplishment, individual development.

Most people in the world have their own place to live in, their home. However, there are also people among us who for different reasons do not have their own shelter. People who lack a place of permanent residence lose a possibility of full participation in social life: they lose their jobs, families, friends, they descend into addictions (or their addictions deepen). In the end, they change their place in social structure, in a short time they acquire the status of a homeless person. A homeless person is an individual suffering from a number of problems. In Poland, in the legal sense, a homeless person is defined in the Act of March 12, 2004, on welfare aid. Article 6, point 8 of the Act reads: “ *a homeless person – a person who does not dwell in an accommodation defined by the articles on protection of the rights of occupants and housing resources of a community and not registered as a permanent resident as defined by the articles on the population census, as well as a person not dwelling in an accommodation and registered as a permanent occupant in an accommodation in which it is impossible to dwell.*”

A few of the homeless choose to live the life of tramps by their own choice, and vagrancy has become their way of life, but a definite majority of them were condemned to homelessness due to circumstances on which they had no influence. People, who have for different reasons found themselves “out in the street” fall into an abyss of poverty and deprivation, they move or are pushed to the sidelines of social life and experiences social exclusion [10; 2]. Without support from other people (family, neighbours, local communities), without assistance of specialist institutions providing social aid they are unable to help themselves.

In Poland, the institutions responsible for providing aid to people who do not have their accommodation are the Municipal and District Social Aid Centres and non-government organisations. While providing statutory aid to the people in need, they implement numerous projects within which, on the basis of subsidies, they provide support to the needy. Such an initiative, implemented by the Municipal Council in Częstochowa and the “Widzialni” Foundation, was the innovative project “IP self-government – NGO’s good practices in the field of handing over public tasks” co-financed by the European Union from the resources of the European Social Fund [6].

Significance of the Project: In order to facilitate solution of the problem, it is necessary to diagnose the overall situation of people afflicted with the problem. An appropriate, diligently made diagnosis allows identifying the real needs, options and expectations of the homeless when preparing plan of aid in coming out of homelessness and restoring individual people to independent functioning in all dimensions of human existence [1]. Then, the essential question is whether the scope of services provided to the homeless is adequate to their needs, and whether the financial means taken from the taxpayers’ budget are spent in an effective way.

The purpose of the study was diagnosing the phenomenon of homelessness in the area of the city of Częstochowa

Subject of the study: The diagnosis was focused on identification and description of the situation of the disabled homeless, receiving aid from the Municipal Centre of Social Aid in Częstochowa and non-government organisations. The sample study group included 34 disabled homeless people that I selected from the general study group of 100 homeless people. The material of the study that I analysed comes from the data collected in the course of implementation of the innovative project “IP self-government – NGO’s good practices in the field of handing over public tasks”, implemented by the Municipal Council in Częstochowa and the “Widzialni” Foundation and co-financed by the European Union from the resources of the European Social Fund.

Study problems:

- How do the Częstochowa homeless assess their own situation in life?
 - Why have they become homeless?
 - What kind of problems do the homeless in Częstochowa have to cope with?

Methodology – to collect data from the homeless, as the direct participants of the studied situation, we used the method of diagnostic survey, the technique of a questionnaire, and the study tool was a questionnaire form. From among 100 homeless respondents engaged in the project, I selected for further processing the answers provided by 34 homeless people who marked in the form that they suffer from a disability that can be described as to its degree by the scale: light, moderate, serious. Empirical studies with the homeless were carried out in the following institutions in Częstochowa:

- Hostel for Homeless Men, ul. Krakowska 80/15, Częstochowa;
- Night Shelter for Homeless Men, ul. Krakowska 80/15, Częstochowa;
- Hostel for Homeless Families, ul. Krakowska 80/2, Częstochowa;
- Night Shelter for Homeless Women, ul. Staszica 5 Częstochowa;
- Hostel for Homeless Women and for Women with children, ul. Staszica 5 Częstochowa;
- Hostel for the Homeless, ul. Krakowska 34, Częstochowa;
- Heated Shelter for the Homeless, ul. Krakowska 80/15, Częstochowa;
- Hostel for Homeless Men in the House for the Homeless No. 1, ul. Prosta 99, Lubojenka;
- Hostel for the Disabled Homeless People in the Family Aid and Critical Intervention Centre , ul. Srebrna 25, Marianka Rędzińska;
- Hostel for the Homeless in the Family Aid and Critical Intervention Centre, ul. Srebrna 25, Marianka Rędzińska;
- Stationary Social Reintegration Centre in “St. Barnaba’s Home”, ul. Strażacka 30, Poczesna.

Presentation of the results of exploration was put together on the basis of the formulated study problems.

Analysis of results

The questions concerning the socio-demographic variables of the respondents referred to the following features: gender, age, education.

Table 1. Gender of the surveyed disabled homeless people staying in Czestochowa (N=34)

Gender	Disability			TOTAL (N=34)
	light	moderate	severe	
Woman	1	4	-	5
Man	12	13	4	29
Total	13	17	4	34

Source: my own study based on the studies of the Municipal Council and the "Widzialni" Foundation, Czestochowa 2012.

The respondents included 5 women and 29 men.

Table 1. Age the surveyed disabled homeless people staying in Czestochowa (N=34)

No.	Age	Disability			TOTAL (N=34)
		light	moderate	severe	
1	18-24	-	-	-	-
2	25-34	-	-	-	-
3	35-44	1	2	-	3
4	45-54	3	3	1	7
5	55-64	8	8	3	19
6	65+	1	4	-	5
TOTAL		13	17	4	34

Source: my own study based on the studies of the Municipal Council and the "Widzialni" Foundation, Czestochowa 2012.

The most numerous group were the homeless people in the age range 55 – 64 (19 respondents)

Table 3. Education of the surveyed disabled homeless people staying in Czestochowa (N=34)

No.	Education	Disability			TOTAL (N=34)
		light	moderate	severe	
1	incomplete primary	-	-	-	-
2	primary	4	5	1	10
3	secondary	-	-	-	-
4	secondary vocational	6	6	3	15
5	comprehensive	3	5	-	8
6	higher	-	1	-	1
TOTAL		13	17	4	34

Source: my own study based on the studies of the Municipal Council and the "Widzialni" Foundation, Czestochowa 2012.

The vast majority of the respondents had secondary vocational education (15) and primary education (10), but it should be noted that every fourth respondent had comprehensive and higher education.

Life situation of the homeless

The following factors were taken into consideration to diagnose the situation of the homeless in everyday life:

- Functioning of the disabled homeless – their reasons for homelessness, the time spent as a homeless person, family situation, financial situation as well as the general physical and mental state of the homeless in their present situation,
- Occupational situation of the homeless,
- Motivation to change their present life situation – coming out of homelessness.

Functioning of the disabled homeless people

The reason for homelessness

The reasons for homelessness are to be sought in socio-economic or legal mechanisms,

i.e. external in relation to the homeless people, or in personality traits of individual people.

Table 4. Reasons for homelessness (N=34)

Detailed list	Disability			TOTAL
	light	moderate	severe	
I got divorced, my family my family disintegrated	2	5	4	11
I lost my job	5	4	1	10
I could not handle my addiction (alcohol, drugs)	3	3	1	7
I became victim of my spouse's violence	2	-	-	2
I had problems with my health	1	3	-	4
My family / flatmates threw me out of a flat	2	2	-	4
The worker's hostel run by my employer was closed	-	1	-	1
Due to the decision of our administration I was expelled from my flat	-	2	-	2
I was evicted	5	5	-	10
Due to breaking the law, I served my time in prison	1	3	1	5

Detailed list	Disability			TOTAL
	light	moderate	severe	
I was not able to cope with my situation in life	-	2	-	2
I wanted to be free and have no obligations	-	-	-	-
I don't know	-	-	-	-
No answer	-	-	-	-
<i>Wyniki nie sumują się do 100%, respondenci mieli do wyboru maksymalnie 3 odpowiedzi</i>				

Source: my own study based on the studies of the Municipal Council and the "Widzialni" Foundation, Częstochowa 2012.

The collected data confirm the fact, because the reasons for their current situation given by the respondents reflect the full spectrum of their problems:

Socio-economic reasons

- loss of one's job – is mentioned by every third respondent, whereas it is more often mentioned by the homeless with officially diagnosed light (5) and moderate (4) and severe (1) disability.

Closure of a workers' hostel at the place of employment – is rarely mentioned by the respondents (1), only in the case of moderate disability.

The collected data show that for every third respondent, the reason of their present situation is the socio-economic situation.

Reasons connected with pathology

- disintegration of one's family – divorce is indicated by every third respondent. The answer of the respondents are do not differ depending on the degree of disability – moderate degree (5) and severe (4), the fewest in the light degree (2).

- alcohol and/or drug addiction – this reason is indicated by 7 respondents, 3 in the light degree, 3 in moderate degree, whereas 1 in the severe degree.

- family violence – this reason is indicated as insignificant, selected by 2 people with high disability.

- being thrown out of the house/flat by family / flatmates – this reason is indicated by 4 respondents, 2 with light and 2 with moderate disability.

- delinquency – indicated by every sixth respondent (5), more often by people with moderate disability.

The respondents' answers clearly indicate that it is pathologies that are the reasons for homelessness.

Legal reasons

- eviction – is the reason for homelessness indicated by every third disabled respondent. It is most often mentioned by respondents with light and moderate disabilities.
- being crossed off the list of tenants by the housing office – every fifteenth respondent indicated this argument, whereas it definitely pertains to two homeless people with moderate disability.

The legal situation resulting from the possibility of eviction of a tenant or crossing him/her off the list of tenants is the reason for homelessness for every third respondent.

The reasons, which depend on the homeless person's own decision –

- inability to cope with one's situation in life – this reason was indicated only by 2 people (moderate degree)

Among other reasons, the homeless indicated also:

- health problems – 4 respondents, including 1 person with light disability and 3 with moderate disability.

Lack of the respondents' answer which would suggest that their current lifestyle is their deliberate choice is a significant information. It means that none of these people wanted to find themselves in their current situation or consciously strove to break all their social ties.

The fact that the respondents indicated a few answers suggests that their difficult situation is not the result of one definite reason, but generally the indicated reasons intertwine and condition one another:

- reasons connected with pathologies – 29 respondents,
- legal reasons – 12 respondents,
- socio-economic reasons – 11 respondents.

Time spent in homelessness

Another issue I wanted to learn was the time spent as a homeless person. It was important to find out how long the respondents had remained homeless, if there are any differences in this respect among the homeless with different degrees of disability.

Table 5. Time spent in homelessness (N=34)

No.	Disability	Detailed list							TOTAL
		less than a year	1 – 2 years	2 – 3 years	3 – 4 years	4 – 5 years	5+ years	No answer	
1	light	2	3	2	2	2	2	-	13
2	moderate	1	4	2	1	-	8	1	17
3	severe	1	-	-	1	-	2	-	4
TOTAL		4	7	4	4	2	12	1	34

Source: my own study based on the studies of the Municipal Council and the "Widzialni" Foundation, Częstochowa 2012.

It turns out that 1/3 of the respondents are people who have remained in the current situation for a long time – more than 5 years, but the group is dominated by the homeless with moderate disability, within the age range 55 – 64 and primary (4) and vocational (8) education. There is also a considerable number of people (11) among the respondents, who have been in this situation only for a short time – not more than 2 years. According to the collected data, we can observe that there are no significant differences in the length of time of remaining homeless due to the diagnosed degree of disability.

Family situation of the homeless

Examining family situation of the respondents I wanted to find out whether they are single or have a member of their close family around them.

Table 6. Maintaining contacts with families of the disabled homeless people (N=34)

No.	Disability	Detailed list				TOTAL
		yes, systematically	yes, unsystematically	No, I do not	No answer	
1	light	10	1	2	-	13
2	moderate	11	1	3	2	17
3	severe	1	3	-	-	4
TOTAL		22	5	5	2	34

Source: my own study based on the studies of the Municipal Council and the "Widzialni" Foundation, Częstochowa 2012.

It appears from the collected data that regardless of the state of disability the respondents systematically – 22 respondents or unsystematically – 5 respondents, maintain contacts with their families. Every seventh homeless person does not maintain contact with his or her family.

Financial situation of the homeless

The next issue that I was interested in was the question where the respondents obtain money for their living from.

Table 7. Sources of income of the disabled homeless (N=34)

No	Where do you obtain the money for your living from?	Disability			
		light	moderate	severe	TOTAL
1	permanent job, based on employment contract	-	1	-	1
2	part-time, seasonal jobs	2			2
3	zasiłek z pomocy społecznej	3	11	1	15
4	church aid	1	2	-	3
5	aid provided by charity institutions	1	1	1	3
6	Social security (ZUS, KRUS) benefits (invalidity, old age pension)	-	5	-	5
7	collecting	2	2	-	4
8	begging	1	-	-	1
9	maintenance / alimony	-	--	-	-
10	money not always obtained in an honest way (e.g. petty theft)	-	-	-	-
11	petty trading		1		1
12	other (such as?)	-	-	-	-
13	I have no income	3	1	2	6
14	No answer	1	-	-	1

The results do not add up to 100% ,the respondents could choose maximum 3 answers

Source: my own study based on the studies of the Municipal Council and the "Widzialni" Foundation, Częstochowa 2012.

The data quoted above shows that majority of the respondents – 15 people support themselves on allowances obtained from welfare institutions, including 11 people with moderate disability. Every seventh respondent draws benefits from Zakład Ubezpieczeń Społecznych [Social Security Administration] or from Kasa Rolniczego Ubezpieczenia Społecznego [Farmers' Social Security Administration]. Every sixth respondent does not have any income.

Physical and mental state of the homeless

The physical and mental state of the homeless who, after all, are in a difficult situation very well reflects their attitude towards other people and problems that they encounter. This is why I took into account the wide spectrum of factors describing individual dimensions of their everyday existence, such as the relations of the homeless with their social environment.

Table 8. Treatment of the disabled homeless people by the society in the opinion of the homeless (N=34).

No.	Disability	Detailed list								TOTAL
		people try not to notice me	people are afraid of me	people seldom help me	people treat me vulgarly	people are kind to me	people gladly help me	other	no awer	
1	light	5	1	3	-	2	-	-	2	13
2	moderate	5	1	1	3	4	-	1	2	17
3	severe	-	-	1	1	-	2	-	-	4
TOTAL		10	2	5	4	6	2	1	4	34

Source: my own study based on the studies of the Municipal Council and the "Widzialni" Foundation, Częstochowa 2012.

The respondents' answers show that there are actually three basic types of other people's attitude towards them:

- indifference – every second respondent (15) experiences such an attitude towards him/her. People not only refuse to help them, but first of all people pretend not to notice them. The degree of disability does not make any difference in this case (the layout of answers is similar).

- fear and aggression – this type of attitude is experienced by every sixth respondent. In this case, there is no difference in answers regarding disability. One of the respondents with moderate disability wrote: *they treat me badly, but I bear it with dignity.*

- empathy and compassion – are the attitudes experienced by every fourth respondent. The respondents with moderate disability experience such an attitude twice as often.

What reactions do these types of attitude trigger off in the homeless?

Table 9. Attitude of the disabled homeless people towards such behaviour of other people (N=34)

No.	Disability	Detailed list						TOTAL
		hurt when people treat	people treat me badly, I do	pay attention to the way people treat me, I do not	It is difficult to say	other	no answer	
1	light	4	-	7	-	-	2	13
2	moderate	5	-	9	2	-	1	17
3	severe	1	-	1	1	-	1	4
TOTAL		10	-	17	3	-	4	34

Source: my own study based on the studies of the Municipal Council and the "Widzialni" Foundation, Częstochowa 2012.

The way homeless people are treated by the "rest" of the public triggers off two types of their reaction:

- humiliation and distress – is the feeling experienced by every third of the respondents, whereas the degree of disability does not diversify their answers.
- unconcern – 17 respondents do not pay any attention to the way they are treated by other people. It should be noted that none of the respondents returns aggressive, vulgar and vile behaviour of other people.

One can understand unconcern and damaged family ties of the homeless, when one knows their life stories, but how can one understand the attitudes and bias of strangers? Such attitudes towards the homeless can hardly be explained. From the answers given by the respondents, it shows that in the best case they encounter indifference, and in the worst with dread and aggression. They seldom experience human compassion and empathy. This results in behaviour of the homeless, mostly marked with unconcern towards the surrounding world and often with the sense of inferiority and humiliation. It should be noted that none of the respondents displays aggressive, vulgar behaviour towards "other" people.

Occupational situation of the homeless

Trade and vocational qualifications of the disabled homeless people

Homelessness touches, against general opinion, people of diversified levels of education and different vocational qualifications and skills. It appears from the collected data that every third respondent had the lowest level of education – primary (10), and every second respondent had basic vocational education (15). It should be noted, however, that as many as 8 people had secondary education and 1

person had higher education. This means that majority of them have a concrete trade and vocational qualifications.

Table 10. Occupation/vocational qualifications of the disabled homeless people (N=34)

No.	Disability	Detailed list			TOTAL
		yes, I have a trade/vocational qualifications	I do not have a trade/vocational qualifications	no answer	
1	light	11	2	-	13
2	moderate	11	5	1	17
3	severe	3	1	-	4
TOTAL		25	8	1	34

Source: my own study based on the studies of the Municipal Council and the "Widzialni" Foundation, Czestochowa 2012.

According to the collected data, every fourth respondent does not have any vocational qualifications or a concrete trade. After analysing the data it becomes obvious that having a trade or vocational qualifications is not connected with the degree of disability. A number of the respondents have more than one trade and all their trades are listed in the Table below:

Table 11. Trade/vocational qualifications of the disabled homeless people (in absolute numbers)

Trade code acc. To the 4-digit ISCO-08 Code (first trade)	Trade/vocational qualifications of the homeless respondents	No of respondents
3114	Electronic technician	1
3119	shipbuilding technician	1
3142	agricultural technician	1
4321	warehouseman	1
5322	minder of elderly and disabled people	1
7112	bricklayer	2

Trade code acc. To the 4-digit ISCO-08 Code (first trade)	Trade/vocational qualifications of the homeless respondents	No of respondents
7116	paver	1
7126	plumber	1
7131	painter, decorator	3
7212	welder	1
7231	car mechanic	2
7522	carpenter	3
7534	upholsterer, stone mason (7113), warehouseman	2
7536	shoemaker, cobbler, shoe craftsman	1
8111	specialist in mining techniques	1
8322	lorry driver, mechanic	1
8344	forklift truck operator	1
	higher education	1
Razem		25

Source: my own study based on the studies of the Municipal Council and the "Widzialni" Foundation, Częstochowa 2012.

It appears from the collected data that $\frac{3}{4}$ of the respondents have concrete vocational qualifications that required education at least at vocational level. It should be emphasized that skills connected with their trades are in many cases

among the most demanded at the labour market, e.g. welder, plumber, car mechanic, or the building trades. Do they work?

The situation connected with employment of homeless, disabled people was still another issue.

Table 12. Paid work of the homeless people (N=34)

No.	Disability	Detailed list			TOTAL
		yes, I have a job	I do not have a job	no answer	
1	light	1	12	–	13
2	moderate	1	16	–	17
3	severe	-	4	–	4
TOTAL		2	32	–	34

Source: my own study based on the studies of the Municipal Council and the “Widzialni” Foundation, Częstochowa 2012.

Regrettably, the catalogue of responses is not very optimistic, because almost 50% of the respondents do not see any chance for improvement of their situation, 4 respondents have doubts about this matter, and only every fourth homeless respondent perceives his chance for a better life as quite good.

Résumé

The definition of homelessness that can be found in *Leksykonie Polityki Społecznej* (2002) describes homelessness as a complex and multi-dimensional phenomenon of elaborate aetiology. Looking for reasons of its occurrence, it is important to diagnose socio-economic as well as personality factors. Only an appropriate and diligently conducted overall diagnosis of a situation of an individual afflicted with homelessness and of the reserves of his/her environment (natural and institutional) will allow professional approach to limitation of the negative consequences of social exclusion. The conducted diagnostic and evaluation studies will allow to build effective models of managing the case of widely understood social service and thus ensure a stronger probability of implementation purposeful social policy based on the triad: social effectiveness – economic effectiveness = quality of service. This type of research is particularly important in the area of homelessness, due to the dynamic character of the phenomenon and people it affects [8]. Aid must be individualised, adjusted to the needs and possibilities of a beneficiary, and assume the nature of long-term activities. Working with an individual involves taking into consideration overall, covering the entire life biography of the individual. It is important to diagnose barriers, objective limitations, as well as existence, experiences and motivations of our client in order to design an individual plan of aid to improve the quality of functioning of our client. This is the way to treat a homeless person, because she

needs services in many fields of social and/or occupational service, especially that there are cases among them who look forward to such aid. It is necessary to learn the relations of an individual with his or her social environment, and the studies show that homeless people often encounter, at best, unconcern and, at worst, dread and aggression. It is the evidence of the importance of diagnostic studies and their propagation in order to implement their educational function among the general public [7; 5]. Especially as the surveyed people were the homeless suffering from disability (light, moderate, severe). As can be seen, this diagnosis did not significantly diversify their responses. It is just another signal for the society to ponder over whether it is not US who stigmatize, forming patterns and designating places for OTHERS, because they are ALIEN FOR US. Who is Alien and who is One of Us?

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ДІАГНОСТИКА НЕДІЄЗДАТНИХ БЕЗПРИТУЛЬНИХ У ЧЕНСТОХОВІ**Маріола Міровська***Університет Яна Длугоша в Ченстохові
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Процес вирішення соціальних проблем відомий у багатьох країнах світу. Завдання, пов'язані з благодійною допомогою, продовжують рости, оскільки кількість громадян, неспроможних впоратися з функціонуванням у різних сферах життя збільшується. Зміни в людській свідомості не відповідають розвитку технічним інноваціям і все більше число громадян страждають від відчуження. Безпритульність є одна з означених соціальних проблем. Професійний менеджмент в кожному конкретному випадку вимагає доречної, старанної діагностики. Дискусія на підставі діагностики людей, які страждають від недієздатності, намагається показати проблему безпритульності, а безпритульну особу як людину гідності, яка має право, щоб до неї ставилися гідно. Мета дослідження полягає у підтримці спроб розробити практичні моделі допомоги безпритульним у відновленні дієздатності у своїх спільнотах.

Ключові слова: безпритульність, безпритульна особа, недієздатність, діагностика.