

Housing First—The Benefits and Problems

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Housing First, what is it exactly? The term is used very loosely as the opposite of traditional services for homeless people (emergency shelters, transitional programs). There are ambitious claims made about ending homelessness and saving tax-payers money through using a Housing First approach. I wanted to understand Housing First, the research, benefits, problems, who it works for and how it could be applied in Saskatoon. Here is what I found out. Housing First (HF) has two different, but connected meanings.¹

Housing First is an intensive, clinical intervention program developed specifically for chronically street homeless individuals with a mental illness that originated in New York (Pathways to Housing). This program prioritizes permanent housing as a right and self-determination, and the only expectations are that clients pay some income towards their rent and that they talk to an outreach worker or case manager weekly. Earlier program versions were implemented elsewhere with less intensive supports². In Toronto, *Houselink* placed people in housing without requiring treatment first as they left institutions in the 1970s. The term “Housing First” was actually coined in Los Angeles with the program *Beyond Shelter* that rapidly rehoused families at risk of homelessness.

Housing First is a general philosophy of providing homeless/at-risk people with permanent housing, first, without a requirement of sobriety or compliance, respecting their choice about where they want to live and promoting health and wellbeing. Many different types of services or programs could be based on this ‘rapid rehousing’ or ‘housing led’ philosophy for a broader range of people.

It is legitimate and accurate to call any intervention Housing First if it is based on the **philosophy** of immediate access to permanent housing without other compliance requirements.³ *However*, almost all of the research on the effectiveness and cost savings of Housing First is referring specifically to the Pathways to Housing (PTH) **program** or similar programs in the United States.⁴ This is important to know. When claims are made that Housing First is proven to work, save money, etc, it is in reference to the PTH model, specifically.

The Housing First Program Model

Pathways to Housing (PTH) was the first organization to implement the Housing First (HF) philosophy on a large scale. The PTH founders felt that the ‘housing readiness’ model which required sobriety or treatment compliance to access housing was failing, and instead implemented HF as a harm reduction approach to dealing with street homelessness.⁵ The PTH model is the program that the majority of HF programs are modelled after.

How exactly does PTH support chronically homeless individuals who have complex needs to successfully stay in private rentals? During intake, clients are scored on their vulnerability and the intensity of their needs (acuity scale). There is ‘no wrong door,’ which means any service provider they go to will ensure they get linked to HF support.⁶

Housing First (HF) support is provided on a spectrum, from Assertive Community Treatment (ACT) teams (professional medical staff and community workers) doing outreach to the hardest-to-house, to Intensive Case Management (ICM) and brokerage (advocacy, locating housing, resources and working with landlords) for those with more manageable needs.⁷ PTH also includes Peers as support and recovery coaches who play an essential role on the teams. 24-7 support is available to all clients. It is housing first, but not housing only. There is a requirement for clients to visit with a team member regularly and recovery is the goal of the program.⁸ PTH promotes scattered-site housing, rather than congregated, targeted housing, although that varies from city to city where it has been implemented.

PTH founder, Sam Tsembaris, has been clear about the importance of program fidelity, creating a fidelity scale to stop program drift as HF is replicated in other places.⁹ However, Tsembaris notes that the model has been adapted successfully based on the needs of various groups.

Research on Housing First

Multiple research studies have been done on the PTH model in New York and other US cities, showing impressive housing retention results for chronically homeless people, up to 85%.¹⁰ The other 15% do not manage well in independent housing even with intensive support teams—typically people with severe addictions. However, Tsembaris explains that many of these individuals can do well in congregated, supervised settings that are based on harm reduction, not abstinence.¹¹

Waegemakers Schiff and Rook (2012) reviewed all of the existing research on HF. The studies which showed positive results focused on HF programs for single adults who had a mental illness or were dually diagnosed (substance use).¹² They note that there is no research available yet on the appropriateness of HF for youth, families, people with persistent substance abuse issues, seniors, immigrants and refugees or Aboriginal people. They conclude that the evidence of HF being a “best practice” is lacking and that calling it such has been a political decision, not a research-based decision:¹³

Despite the rapid uptake of this approach, there is the absence of “best practice” evidence to support this. “Best practice” is commonly understood to imply evidence-based techniques or interventions that have been demonstrated to work well with most persons and have the least potential for adverse results. To the extent that there was some, but not conclusive, evidence that HF was effective for those with mental illness and co-occurring mental illness, the Mental Health Commission of Canada (Mental Health Commission of Canada, 2010), introduced a large, multi-site study of HF in five Canadian cities (referred to as the At Home/Chez Soi project).¹⁴

Looking at emerging research, they state that the early results from At Home/Chez Soi, which uses the PTH Housing First model, are promising.¹⁵ In a 2012 report on the progress, the At Home project compared the results from the HF group to a ‘control’ Treatment as Usual (TAU) group. People in the HF group retained housing at a much higher rate (86% compared to 23%).¹⁶

Kertesz et al (2009) looked at research studies across the US comparing HF to traditional addiction recovery services and found that HF had better housing retention rates.¹⁷ However, they found that while HF is excellent at improving housing retention for people with non-addiction psychiatric disorders, there is no conclusive proof that it shows better outcomes for people with persistent addictions.¹⁸ They state that ‘overreach’ has happened with regards to Housing First, as advocates make claims that are

not substantiated by the research. The risk of overreach is public disenchantment, and even defunding, if the plans to end homelessness through HF or save money do not create the expected outcomes.

Housing First—The Benefits

As mentioned, a tangible benefit of Housing First (PTH model) is that it has a great success rate for people who are chronically homeless and who have a mental illness or are dually diagnosed (generally with less acute addictions). Estimates are that 85% of people can remain housed (using a scattered-site model).¹⁹ The research on PTH and similar programs shows that these participants use fewer emergency services and have a better quality of life in their new homes. Some (not all) participants in HF programs reduce their substance misuse, although that is not the primary goal. The ACT teams incorporate and respect the contribution of peer support, and offer clinical interventions in a more relational way and base treatment on self-determination, compared to traditional, clinical outreach services.

Secondly, HF has helped highlight the clear value of a harm reduction approach. The philosophy of “housing as a right” should guide all housing and human service policy, regardless of the model of support. A person’s right to housing should not be based on compliance with interventions. Most service providers working with homeless/at-risk people already use harm reduction to some extent, but HF advocates have popularized both the practical and rights-based logic of this approach.

Probably the top benefits of Housing First programs are that they have raised awareness about homelessness and attracted considerable financial resources to support those who are most vulnerable. HF Advocates have successfully shifted the public discussion, from ignoring the problem of homelessness to believing that there is a solution, at least for those who are chronically homeless. Money from government and business has followed throughout the US and in Canada, especially Alberta where there has been a substantial investment and thousands of people housed. We clearly need an equivalent investment in Saskatoon.

Housing First—The Challenges and Problems

Homelessness is complicated—caused by structural issues like poverty, lack of affordable housing, low wages, involvement in foster care/residential schools, racism, colonialism and marginalization, as well as individual issues to do with addictions, mental illness, family conflict and social exclusion. A simple fix is not likely. Housing First alone cannot address all of these issues. Sam Tsemberis, PTH founder, explains the limitations:

Housing First and other supportive housing interventions may end homelessness but do not cure psychiatric disability, addiction, or poverty. These programs, it might be said, help individuals graduate from the trauma of homelessness into the normal everyday misery of extreme poverty, stigma, and unemployment.²⁰

Who is homeless? Housing First is central to ten year plans to end homelessness. Do the advocates for HF mean ending chronic, street homelessness, or also helping those who are at-risk of homelessness and inappropriately housed in shelters or living in substandard, crowded housing due to poverty? One of

the big criticisms of HF in the research is that by targeting people with the most intensive needs, HF leaves out the vast majority of individuals and families who experience homelessness.²¹ The ten-year plans to end homelessness in the US tended to focus on only chronically homeless people. Activist blogger, Chris Johnson, suggests that language drift is happening with the Victoria plan to end homelessness, as the city recently began talking about ending “street homelessness” compared to an earlier definition that was broad.²² Johnson claims that this happens in every city that commits to ending homelessness in ten years.²³

Affordable housing: Homelessness cannot be ended without increasing access to truly affordable housing, with or without HF.²⁴ This is an important criticism—that HF really isn’t about more housing.²⁵ Trying to administer a HF program in a city with a very tight rental market and high rents is not going to be easy. Talking to front-line HF providers in Vancouver and Calgary, they admitted that affordable housing stock is a huge challenge in their work. Poverty and discrimination in the rental market are reasons why a lot of people are homeless or at-risk.²⁶ In Saskatoon, real estate speculation and immigration drove up the price of rental housing. More social housing where rent is geared to income is essential if we are going to deal with homelessness. Toronto street nurse, Cathy Crowe, offers the criticism that adopting Housing First means that a national housing program, poverty reduction and food security come last as priorities.²⁷ Vancouver recently saw a reduction in visible homelessness and the change is attributed to new social housing, continuous funding for shelters and outreach.²⁸

Poverty: With HF, poverty is not directly addressed.²⁹ In the short-term, a rent subsidy allows people to access housing they otherwise could not afford. HF does not offer a solution to low incomes that leave people at risk and struggling. In Toronto, the HF program, Streets to Homes has been criticized for creating a new problem.³⁰ The high cost of rent that participants are paying creates food insecurity, and the apartments are too far away from free, emergency food services. Homelessness is largely an economic issue, just as much as it is sometimes influenced by individual circumstances.

Cost Savings: the research is clear that homelessness is expensive.³¹ There is also research showing that supported housing of various kinds for homeless individuals can be cost effective or cost neutral.³² However, the argument that Housing First saves public money doesn’t entirely stand up to scrutiny. Tsai and Rosenheck, along with other reviewers (Kertesz et al, 2009; Pleace and Bretherton, 2012), note that the studies on cost reduction apply specifically to chronically homeless people with a mental illness who are the heaviest users of services. HF interventions and rent subsidies are expensive, and the cost-effectiveness studies on PTH have not included all capital or intervention costs in the analysis.³³ Overall, in the At Home/Chez Soi, the HF intervention was more costly (+\$7,900) than the treatment as usual services.³⁴ However, singled out, the high users of emergency/police services saw a large drop in annual service costs (-\$9,360).³⁵ I would argue with Tsemberis that cost-savings shouldn’t be the bar that determines social policy anyway.³⁶ We should do the right thing even if it costs more.

People who are Hard to House: People with persistent addictions are usually less successful in HF programs that rely on market housing.³⁷ Supported or intentional housing that incorporates harm reduction is a good alternative. Flexibility, respectful, harm reduction services and low-barrier housing resources are needed to support homeless people with chronic addictions or challenging behaviour.

Motivation: This is the big criticism. Who is paying for HF and why? In most cases it is probably largely out of compassion, but often there is an additional motivation of cleaning up the streets (getting rid of the visible homeless). In the US and Toronto, and to some extent Calgary, the motivation of moving the homeless out of view may have increased the flow of money to HF programs. The Streets to Home program in Toronto has been criticized by anti-poverty activists for uprooting the homeless for the purpose of downtown redevelopment.³⁸ In 2008, four people in the S2H program had died.³⁹ Activists and researchers suggest that many S2H participants experience food insecurity and social isolation.⁴⁰ Paul Boden explains how the criminalization of homelessness is linked to the defunding of social housing in the US and federal efforts to individualize the issue of homelessness through 10-year plans and other initiatives.⁴¹ Cathy Crowe agrees that “street sweeps of homeless people” can be the underlying motivation behind Housing First and 10-year plans.⁴² On the Calgary Homelessness Foundation website, they list more advantages of ending homelessness—supporting the construction industry and increasing “the sense of safety and overall experience for people living in or visiting Calgary.”⁴³ Hmmm...

Reduced Services: The goal of ending homelessness through HF includes closing shelter beds, ostensibly because they would no longer be needed. Toronto activists at the Ontario Coalition Against Poverty mounted a campaign to keep the shelters open, in particular a harm reduction “wet” shelter (the School House) that has the unfortunate luck of being in the way of upscale redevelopment.⁴⁴ This is serious. Any new HF program should not reduce existing services until they are really, really unnecessary.

Conclusion

It’s important to say that the challenges and problems associated with HF do not necessarily negate the benefits. On the surface, Housing First is a no-brainer. Who wouldn’t want to see all people accessing appropriate housing in neighbourhoods they choose, without strings attached, no matter what individual challenges they face? However, that isn’t always the outcome. The criticisms from the front-line and researchers tell us that it isn’t so easy to implement, and that it is important to ask hard questions.

We also must recognize and applaud what is already working well in Saskatoon. Housing First advocates assert that emergency/transitional services are “managing homelessness” instead of ending it. Researcher Guy Johnson calls this dichotomy disingenuous as it ignores the fact the many services for homeless people already utilize long-term intensive support and harm reduction.⁴⁵ The reality is much more complicated.

Likely, the big problem is really a lack of funding to be able to support people properly, and lack of access to housing due to inflated rents, poverty and often discrimination. With appropriate funding, transitional programs also have a high rate of success in keeping people housed.⁴⁶ One study suggests that it is the quality of support services, not the type of housing program, which matters most in the success of people leaving homelessness.⁴⁷

If done right, Housing First services, particularly ACT teams, could make a difference in Saskatoon. A program that offers brokerage, rapid rehousing support and ongoing rent subsidies could improve lives immensely. The philosophy of “housing as a right” is inspirational. But if we pursue HF, I offer a caution

that we must: 1) develop a lot of real affordable housing units geared to income, and low-barrier supportive housing alternatives; 2) continue to offer a diversity of supportive, emergency and transitional programs; and most importantly 3) work to seriously address the structural causes of homelessness. We also **must not** overreach and make Housing First a panacea.

¹ Guy Johnson, "Housing First 'Down Under': Revolution, Realignment or Rhetoric?" *European Journal of Homelessness* (Volume 6, No. 2, December 2012), pp. 183-192.

² Jeanette Waegemakers Schiff & John Rook, *Housing first – Where is the Evidence?* (Toronto, Homeless Hub Press, Canadian Homelessness Research Network).

³ Nicholas Pleace & Joanne Bretherton, *What Do We Mean by Housing First? Categorising and Critically Assessing the Housing First Movement from a European Perspective*, (ENHR Conference, Lillehammer, June 2012 WS-14: Welfare Policy, Homelessness and Exclusion), p. 5.

⁴ Waegemakers Schiff & Rook; G. Johnson; Pleace & Bretherton.

⁵ Nicholas Pleace, "The Ambiguities, Limits and Risks of Housing First from a European Perspective," *European Journal of Homelessness* (Volume 5, Number 2, December 2011), pp.113-127.

⁶ Pleace

⁷ Pleace; Mental Health Commission of Canada, *At Home/Chez Soi Early Findings Report Volume 2* (January 2012)

⁸ Jack Tsai & Robert A. Rosenheck, "Considering Alternatives to the Housing First Model," *European Journal of Homelessness* (Volume 6, No. 2, December 2012), pp.201-208.

⁹ Sam Tsemberis "Housing First: Basic Tenets of the Definition Across Cultures," *European Journal of Homelessness* (Volume 6, No. 2, December 2012), pp. 169-174.; Waegemakers Schiff & Rook.

¹⁰ Tsemberis (2012); Nick Falvo, "The "Housing First" Model: Immediate Access to Permanent Housing," *Canadian Housing* (2008 Special Edition) pp.32-35.

¹¹ Tsembaris (2012).

¹² Waegemakers Schiff & Rook.

¹³ Waegemakers Schiff & Rook.

¹⁴ Waegemakers Schiff & Rook, (p. 4).

¹⁵ Waegemakers Schiff & Rook.

¹⁶ Paula Goering, Scott Veldhuizen, Aimee Watson, Carol Adair, Brianna Kopp, Eric Latimer & Angela Ly, *At Home/Chez Soi Interim Report September 2012*. (Mental Health Commission of Canada).

¹⁷ Stefan G. Kertesz, Kimberly Crouch, Jesse B. Milby, Robert E. Cusimano & Joseph E. Schumacher. "Housing First for Homeless Persons with Active Addiction: Are We Overreaching?" *The Milbank Quarterly*, (Vol. 87, No. 2, 2009, Milbank Memorial Fund, Wiley Periodicals Inc.), pp. 495–534.

¹⁸ Kertesz et al.

¹⁹ Tsemberis (2012).

²⁰ Sam Tsemberis, "Housing First: Ending Homelessness, Promoting Recovery and Reducing Cost," in: Ellen, I. and O'Flaherty, B. (2010) (Eds.) *How to House the Homeless* (New York: Russell Sage Foundation) pp.37-56. Quoted in Johnson.

²¹ Pleace; Tsemberis (2012); Cecilia Hansen Lofstrand, "On the Translation of the Pathways Housing First Model," *European Journal of Homelessness* (Volume 6, No. 2, December 2012), pp.175-182.

²² Chris Johnson, "A Closer Look at 'Ending Homelessness' in Ten Years." The Dreamer Propulsion Project. Published April 10, 2012, Online retrieval February 6, 2013). <http://bullsheet.wordpress.com/2012/04/10/a-closer-look-at-ending-homelessness-in-ten-years/>

²³ Chris Johnson, "City changes its homelessness strategy and nobody notices," The Dreamer Propulsion Project. (Published December 21, 2011, Online retrieval February 6, 2013) <http://bullsheet.wordpress.com/2011/12/21/city-changes-its-homelessness-strategy-and-no-one-notices/>

²⁴ Pleace; G. Johnson; Hansen Lofstrand; Volker Busch-Geertsema, "Housing First Europe: Progress Report on a Social Experimentation Project," *European Journal of Homelessness* (Volume 6, No. 2, December 2012), pp. 241-246.

²⁵ Cathy Crowe, "'Housing First' is about a national housing program LAST!" *Cathy Crowe Newsletter #48 – Summer, 2008*

²⁶ CBC News, *At-risk renters shut out in tight market: Agencies that help homeless and low-income people say their clients face discrimination*, (Published February 21, 2013, Online Retrieval February 22, 2013) <http://www.cbc.ca/news/canada/calgary/story/2013/02/21/calgary-rental-discrimination-market.html>

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²⁸ Mike Howell, "Fewer homeless seen on Vancouver streets, Former Biltmore Hotel to become social housing," *The Vancouver Courier*. (Published online and retrieved February 8th, 2013).

<http://www.vancourier.com/news/Provincial+Conservatives+unknown+Vancouver/7859227/story.html#ixzz2KEDMlpMQ>

²⁹ G. Johnson

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