

The At Home/Chez Soí Project:

Year Two Project Implementation at the Vancouver, BC Site – Three Page Summary

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Three-Page Summary

This report follows an earlier report which examined how the Vancouver site mobilized research, housing, and service provider teams in order to recruit, house and support participants in the first year of project implementation. The current report documents the implementation of housing and support interventions in the second year of project implementation, including the second round of intervention fidelity assessments. It describes the continuing and emerging strengths and challenges faced by the housing and intervention teams as they implemented their programs from January 2011 to January 2012.

In response to the growing population of homeless people in Vancouver and related health and social problems, several non-profit organizations have established housing and other supportive services, many of which are located in the Downtown Eastside. However, while Provincial Assertive Community Treatment (ACT) Standards have been developed and a Provincial Advisory Committee has been established to initiate ACT province-wide, prior to initiation of the At Home Project, there were no ACT teams in Vancouver and only three teams province-wide. Thus, a critical element of context in Vancouver is the lack of basic service components (i.e., Housing First, ACT, Intensive Case Management). This dearth of services may help explain the magnitude of complexity and tension in planning and implementing the At Home Project; that is, not merely bringing people together around a common framework, but introducing key components of the framework at the same time.

In this report, qualitative methods were used to examine strengths and challenges faced by the housing and intervention teams; facilitators and barriers to housing and recovery; the involvement of people with lived experience of homelessness and mental illness; and the perspectives of landlords/building managers involved in the project. A semi-structured interview guide was created in consultation with the National Qualitative Working Group. Interviews with stakeholders were conducted during January and February of 2012. The final sample consisted of 23 individuals (5 individual interviews; 18 individuals participating in one of 3 focus groups), all of whom were involved to some degree in the implementation the project in Vancouver during the 2011 calendar year. Individual interviews included the Site Coordinator, the Housing Procurement Team (n=2), and landlords/building managers (n=2). Focus groups were held with each of the three intervention teams (n=18). One research assistant reviewed all transcripts and prepared a detailed summary of responses by question. The research assistant, along with two co-Investigators, then reviewed the summary and developed key themes, which are summarized below.

The Intervention Teams: Strengths and Challenges

Respondents identified a number of strengths and challenges inherent in providing housing and supports to formerly homeless adults with mental illness. All respondents observed a shift in tone among the intervention teams from initial chaos, to semi-crisis, to stable teams that work effectively together and

communicate an increasing confidence and maturity in all aspects of their operations. Another general shift has been from broad, oversight meetings to focused meetings that address important “on-the-ground” issues.

Key **strengths** include the development of partnerships with a wide variety of external agencies which has led to increased trust and a willingness to accommodate and problem-solve around difficult issues; collaborative, shared models of working together; and healthy team cultures that allow space for creativity, reflection, and innovations. All respondents noted the intervention teams have a stronger sense of how they fit into the broader system of services.

Several **challenges** that have been ongoing since the beginning of the project include consistently engaging a small group of participants in housing and support services, usually related to personal challenges and/or preferences, and maintaining stable staffing levels on the ACT and ICM teams. Challenges around staff burnout have decreased since the end of participant recruitment but it is still difficult to cover staff leaves and to bring new members onto the teams. Emerging challenges have predictably including (re)-engaging participants in work and educational endeavours and a variety of housing and re-housing issues. While most planned moves and evictions have been successfully managed, a few participants have been difficult to re-house.

Despite the low vacancy rate in Vancouver, the Housing Team successfully obtained a wide variety of good quality housing units in 22 different neighbourhoods across the city. The team attributed their success, in part, to the flexible rent cap and the level of support they are able to provide to landlords (e.g., guaranteed rent, assuming responsibility for damages, service providers who work from an outreach model, etc.) Compared to the recruitment phase of the study, the housing portfolio is now more limited and the focus of housing searches has shifted from quantity to quality (i.e., good participant-housing match).

Facilitators and Barriers to Housing and Recovery

A range of factors that can either facilitate or serve as barriers to stable housing and recovery were identified. Key themes included characteristics of the parent service organization; participant experiences of isolation and loneliness; involvement in the criminal justice system; family reunification; and substance use.

Given their experience with the ACT, ICM and congregate service models, respondents were able to identify a number of ingredients that are critical to successfully working with adults with mental illness who have had long histories of homelessness and social exclusion. These key ingredients include the Housing First philosophy (immediate provision of housing; client choice; no discharge criteria; commitment to re-housing), hiring the right staff, and the development of a strong team culture.

Other Key Themes

Meaningful involvement of people with lived experience of homelessness and mental illness continues to be a challenge for the Vancouver At Home Project. While all teams have engaged peers to some degree and the Peer Coordinator has consistently brought peer issues to various agendas, there is an overall lack of structure and accountability for including peers.

Finally, two landlords/building managers who are involved in the At Home Project in Vancouver were interviewed and described the importance of tenant-building fit as well as the challenge of leaving the “homeless lifestyle” for some participants.

Lessons Learned

With the benefit of hindsight, respondents identified a number of lessons learned including: establishing small committees to address on-the-ground problems earlier, rather than relying on higher-level meetings; ensuring a slower, more even rate of recruitment to ease the burden on staff teams in the scattered-site model; and starting to build relationships with key community partners earlier. A few lessons learned were specific to the design and staffing of the Bosman (e.g., dedicating floors to particular sub-groups) and to the Housing Team (e.g., offering to reimburse landlords for repairs is more effective than providing an initial damage deposit).

All teams have faced issues related to staff burnout, particularly staff on the ACT and ICM teams because they often work alone. Teams have experimented with different scheduling strategies as well as pairing up with colleagues. While working in pairs is helpful, it limits the number of participant who can be contacted each day. Both the ACT and ICM teams stated they have learned to “do more with less” and that current staffing models do not allow for good self-care.

Looking Forward

Although all teams have achieved a sense of stability and coherence compared to the start-up phase of the project, perhaps the biggest challenges lie ahead. As the project moves into its final year of operation, maintaining staff, team cohesion, and a continued sense of momentum and commitment will be a challenge across all teams. Sustainability of participant housing and support services is a concern for all teams and the uncertainty surrounding what happens to participants at the end of the project is already generating considerable anxiety for both participants and staff. All respondents expressed the hope that the scattered-site and congregate care models will be continued and included in a full housing continuum.