

To: Homes First Society Board of Directors
From: Patricia Mueller, Executive Director
Subject: HFS Existing Housing Model Review
Date: October 19, 2010

Recommendation:

That this report be received for information.

Background:

The HFS Executive Director's Business Plan's objective 2 is to develop systems and/or tools that enable HFS to proactively identify future priority populations and supports needed for them to access and maintain stability in their housing situations, work towards planned growth, and provide a framework for fundraising activities. To assist in meeting this objective, the plan includes the "Review of existing models related to our population".

Comments:

Existing housing models related to our population can be categorized in several different ways: housing type (mixed use versus 100% hardest to house); setting; density (building size); and design. In addition, there is also a continuum of support with a whole array of supports provided.

HOUSING TYPES

It is important to note that all of these types of housing, with the exception of "unsupported housing", are regulated by government legislation and regulations, and receive government subsidies and/or other financial assistance. Also, for all housing types the residents also can receive financial assistance from the government.

LONG-TERM CARE: Long-term care is not technically considered housing and is generally not available to our population on a voluntary basis. Most admissions involve loss of personal rights.

RESIDENCES (GROUP HOMES): There are three types of categories of residences based on clients served: individuals with mental health needs and/or development issues; addictions (usually of limited duration); and corrections histories.

Also, supportive rooming houses and group homes are usually exclusively single purpose, i.e., catering to one population. There are some types of supportive housing that utilize a scattered approach which results in mixed-usage buildings. This is usually done via a service provider taking on a head lease from a housing provider.

SHELTERS: Shelters are usually not described as being a model of housing, but in fact, have often proved to be the only practical form of shelter for some individuals and are sometimes seen by the individuals as their home of choice.

Many of the people that end up living long-term in shelters have extreme mental health and or addiction issues and a sense of extreme disconnection from most social support networks.

Individual shelters themselves provide various levels of support and areas of focus. The system in general is fairly all-encompassing.

SUPPORTIVE HOUSING: Supportive housing may be provided in a range of building types from rooming houses to apartment buildings.

SUBSIDIZED HOUSING: There is also subsidized housing, in which many people considered to be the hardest to house may live. Some of the subsidized housing providers characterize themselves as providing supports, however, these supports are extremely limited and tend to be community focused rather than individually focused.

UNSUPPORTED HOUSING: In addition, there are unsupported, unsubsidized, low-income housing including single-room occupancy hotels, rooming houses, and generally unregulated bachelor and one-bedroom rental accommodations.

SETTING

Setting plays a role in community integration. Housing in built-up urban areas often connects people with existing supports in the community. Housing located within suburban and rural locations offer less official support, but on the other hand, there may be many well-developed, informal social networks, and decidedly less street culture.

DENSITY

Models of housing offered to the hardest to house can vary in size from one unit in a basement to that of a multi-unit high rise.

Supportive housing models typically provide housing in buildings sized anywhere from a four-unit house to a high rise. Many supportive housing providers, like Homes First, have grown in a patchwork of different sized buildings with different functions.

DESIGN FORM

Building design is affected by a number of things, including the building's original purpose, i.e., intentionally built supportive housing versus retrofitted, renovated or repurposed buildings.

Units may either be shared or self-contained and are predominantly single room occupancy, bachelor or one-bedrooms. The number of hardest to house families remains very small.

Buildings with 10 units or more that have been designed for supportive housing typically have space allotted for the supportive housing staff, as well as programming areas.

Typically, the larger the supportive housing structure, the larger the area put aside for programming.

Shelters and group homes usually have congregate dining areas, which provide larger program spaces.

ENTRY CRITERIA WITHIN SUPPORTIVE HOUSING

The entry criterion is as diverse as the number of mandates of the organizations providing supportive housing.

In most cases, residents cannot just chose to live in a particular building, but must meet entry criteria. The eligibility criterion ensures that the needs of the resident moving into the housing project are matched to the type of support services offered.

Some supportive housing organizations entry criterion also relates to the communities they have chosen to service within the hardest-to-house community. The criteria can include, but is not limited to, the following:

- Medical diagnosis required.
- Medication/treatment compliance.
- Membership in specific ethnic group/community.
- Sobriety.
- Specific diagnosis.
- Fleeing abuse.
- Age (youth/elderly).
- History of addiction.
- Single or family.
- Referral arrangements with specific organization.
- Ability or inability to live independently.

LINEAR/STAIRCASE HOUSING MODEL

For the past several years, the prevailing approach to housing homeless people has been described as the Linear or Staircase Housing Model. While the exact form of the services varies, this model essentially involves “progressing” or “graduating” homeless people through a series of separate residential services. These are typically: emergency shelter, transitional housing, supportive housing, and independent living. Each step assumes that as the client becomes stabilized clinically, their level of functioning improves and the need for services lessens, and the client will “graduate” and move on to a less restrictive/less supportive setting.

In the Linear/Staircase Housing Model, movement of clients forward is based on sufficient evidence of housing readiness. This model is often founded on a treatment-first philosophy. Progress along this model’s continuum, or up the staircase, is conditional upon the client’s accepted behaviour and compliance with treatment.

Many studies have demonstrated that participants with complex needs are unable to meet the demands of Linear/Staircase Housing Modeled systems. These individuals fail to reach the end of the linear continuum or fail to reach the final step.

On a fundamental basis, critics have criticized the principles underlying the Linear/ Staircase Housing Model, citing the logical divergences between the Linear/ Staircase Housing Model and the highly variable process of recovery from mental health problems. It is widely acknowledged that recovery is not a linear process, but often includes cycling back-and-forth between stages.

HOUSING FIRST MODEL

The Housing First Model essentially bypasses the transition stages typical of linear models by placing homeless people from the street or shelter directly into permanent independent housing, with comprehensive yet non-compulsory, support.

As the name implies, the Housing First Model is based on a “housing first” rather than “treatment first” philosophy, marking a conceptual shift in the approach to housing vulnerable people. This model does not attempt to “fix” clients to make them housing ready, but instead is founded on the assumption that the best place to prepare a person for independent living is in independent housing.

This model has extremely high success on paper; however, there has been a significant impact on landlords who have participated in the use of this model, specifically, in relation to property damage. Although supports are often offered and available to the individual, little or no recognition is given to the monetary impact on the landlord.

These concerns have been brought to City officials. There have been senior personnel changes at the City of Toronto’s Streets to Homes Program, and the current management is listening to landlord concerns and is attempting to address them.

SITES AND SERVICES MODEL/INCREMENTAL DEVELOPMENT

This model, generally used in developing countries or where disasters have occurred, allows homeless people to construct homes as they can afford, one room at a time, to have a better place to live. This model recognizes the needs, rights, and abilities of low-income groups to create their own solutions. Early models legalized existing spontaneously built and developed areas, thereby allowing for their improvement. Although this model is not directly applicable to a developed country’s urban poor, the underlying recognition of the individuals’ ability to improve their lot in life at their own pace may be of some assistance in further developing effective models.

“DO WHATEVER IT TAKES” MODEL

A number of experts in the area believe there is clear evidence of a will to “do whatever it takes” to accommodate and support homeless people with complex needs who regularly fall through the gaps of mainstream interventions.

I would propose that this model puts the emphasis on matching the housing to the individual rather than trying to match individuals into pre-existing models. This approach would borrow heavily from the models already described. From the linear model, it would take the wide range of services made available and accessible to homeless and marginalised people. From the Housing First Model, it would adopt the recognition that safe, adequate housing is an intrinsic element of the well-being of the individual. From the Sites and Services Model, it would abstract the recognition that the individual would be more adequately served by housing them in a manner that they consider safe, accessible, and maintainable, and allowing them to improve that situation at their own rate.

In practical terms, this would mean allowing the individual to determine what the most appropriate form of shelter was for them is at this point in their life. This model recognizes that effective change can only come from the individual themselves, i.e., they can only move on when they can move on.

SUPPORTS

Hardest to house people are supplied with a wide ranges and types of supports. The core supports provided in supportive, subsidized housing can include the following support services:

- **Counselling:** addiction, assault, child custody, childhood trauma, health, relationship, etc.
- **Life Skills:** budgeting, cooking, housekeeping, shopping, and laundry.
- **Community Programs:** barbeques, community meals, children's activities, gardening, crafts and arts programs, community celebrations, and meetings.
- **Employment Training:** community volunteering, daycare, training programs, education.
- **Advocacy:** phone, letters, forms, accompaniment, and follow-up.
- **Legal Assistance:** child custody, criminal, housing, immigration, and probation.
- **Housing:** placements, housing orientation, identification, income verification, transfers, and shared living management. Also, eviction prevention supports including rent arrears meeting and repayment agreement.

One type of housing support is medical in nature and relates to physical supports of the activities of daily living, which is normally provided by Personal Support Workers. There are also psychiatric housing supports which may be provided by psychiatric teams such as ACT teams or other mental health service providers. Another area of supports provided are within the shelter system, which contain many of the same elements as housing work with the addition of much more preparation of food, access control, and a greater expenditure of cleaning and maintenance.

Many of the same activities are provided within these different categories of support. For example, Personal Support Workers are often involved with food preparation on an individual basis, whereas housing and shelter workers often prepare group meals and may help individuals in developing food preparation skills.

Personal Support Workers often provide laundry services and assistance in housekeeping. Mental health workers also often provide laundry services and assistance in housekeeping. It is our understanding that individuals assigned mental health workers through CCAC are not eligible to have Personal Support Workers.

One of the key differences in levels of support is the intensity of the support(s) provided. Long-term care, group homes, and shelters are typically staffed on a twenty-four hour basis. However, the staff-to-client ratio does vary dramatically.

Long-term care providers have many specialized staff, such as Personal Support Workers, dietitians/nutritionists, and medical practitioners, which may result in a higher staff-to-client ratio or a low client-to-staff ratio, however, because of the specialization and entrenched practices there are some individuals who experience gaps in services.

Group homes offer a variety of service niches which impact on the services provided and client-staff ratio. Supports at group homes range in intensity from extremely low client-to-staff ratio, such as 1-to-1, to relatively high client-to-staff ratio, such as 10-1, but all offer service on a 24-hour basis.

Shelters within the City of Toronto are required by Shelters' Standards a minimum of two staff on site at all times, however, some smaller shelters require residents to vacate the premises within a specified timeframe to maintain the minimum standard in a cost-effective way. The typical client-to-staff ratio is 30-1, which means that there is more staff at larger shelters.

Although not perceived as supports, shelters generally require more janitorial/maintenance staff.

SUPPORTIVE HOUSING SUPPORTS

Supportive housing includes both rooming houses and self-contained apartments, and generally, has a moderately low client-to-staff ratio, typically 30-1, only available during the daytime business hours. Some providers range as high as 60 clients to one worker. These workers may provide varying levels and various combinations of services.

SUBSIDIZED HOUSING SUPPORTS

Subsidized housing is similar to supportive housing, and includes rooming houses, and self-contained apartments, however, it does not provide the core supports as does supportive housing. The only support it truly provides is low-income housing.

Typically, the population that HFS serves has not been able to access and maintain housing in this form. However, recently through Housing First, they have in fact been moving into these buildings.

LOW-INCOME, UNSUBSIDIZED HOUSING SUPPORTS

No professional supports are attached to this housing. Some individuals may access external supports. This category can include legitimate rooming houses, small landlords with basement apartments, but may also include dwellings that are illegal because they don't follow code or because they seriously under house people.

BIBLIOGRAPHY

The information within this report has been compiled from a wide range of sources, including the following online articles:

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<http://aspe.hhs.gov/hsp/homelessness/symposium07/report.pdf>

http://www.camh.net/Public_policy/Public_policy_papers/housingpaper.html

<http://www.jrf.org.uk/publications/comparing-models-housing-with-care-later-life>

http://www.raisingtheroof.org/ss-case-dsp.cfm?casefile=Portland_Hotel_Project

HOUSING MODEL USAGE

The following is a sampling of some of Toronto's larger providers of housing options for individuals on low incomes and for those who need housing with supportive care services, in addition to shelter providers.

PROVIDER	LONG-TERM CARE	RESIDENTIAL	SHELTERS	SUPPORTIVE HOUSING	SUBSIDIZED HOUSING	SUPPORTIVE ROOMING HOUSES	OTHER
All Saints Church Homes for Tomorrow Society				X	X		
Anduhyaun			X				X
CAMH		X	X			X	X
COSTI							
Dixon Hall	X	X	X	X	X		
Ecuhome				X	X	X	
Elm Grove Living Centre	X						
Evangel Hall		X	X	X			X
Fred Victor		X	X	X	X		X
Fudger House	X		X				
Good Shepherd Non Profit Homes			X	X	X		X
Homes First Society		X	X	X	X	X	
Houselink Community Homes		X		X	X		
LOFT			X	X	X		
Mainstay			X	X			X

PROVIDER	LONG-TERM CARE	RESIDENTIAL	SHELTERS	SUPPORTIVE HOUSING	SUBSIDIZED HOUSING	SUPPORTIVE ROOMING HOUSES	OTHER
NA-ME-RES			X	X			
Nellie's			X				
Pilot Place		X					
Regeneration Housing	X	X					
St Christopher House				X	X		
St Jude Community Homes				X	X		
Salvation Army	X	X	X	X	X	X	X
Sojourn House			X	X			X
Street Haven			X	X		X	
TCHC					X		
Victoria Shuter					X		
Woodgreen Community Services Housing				X	X		
Yonge Street Mission				X	X		

The "Other" category may indicate other services provided by multiservice agencies such as: child care, seniors programs, languages provided, educational programs, employment training, computer training, group counselling, short-term housing, etc.