



Home is where it starts.



What “housing first” means to people housed under Toronto’s Streets to Homes program

**Preliminary Findings of 2007
post-occupancy research**

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"I am getting more help now that I have housing. For a long time I didn't want any help. Now it's time to do something. Time to be an adult."

Streets to Homes client.

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Research was conducted between November 2006 and April 2007.

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Introduction

This study contributes to the growing literature on the impacts of a “housing first” approach to ending street homelessness. The findings provide detailed evidence that homeless individuals housed directly from the street can maintain their housing with the appropriate supports in place including client perspectives on the housing process, the supports they receive, and changes in a variety of quality of life indicators.

Toronto Context

Toronto is Canada’s largest city – and the fifth largest city in North America – with a population of 2.5 million within a region of 7 million people. Toronto municipal government has 44 City Councillors who represent individual wards, and the Mayor, a position voted in by the entire electorate within the City. Under the direction of a City Manager, there are 38 City Divisions. Homeless programs – including Streets to Homes – are within the Housing and Homelessness Supports and Initiatives section of the Shelter, Support and Housing Administration Division (SSHA). SSHA is responsible for:

- Funding and administering 90,000 units of social housing;
- Funding 63 homeless shelters (directly operating nine) which serve approximately 30,000 different people annually and roughly 4,000 people on any night;
- Funding to more than 100 non-profit community agencies for the delivery of drop-in (day centres) services, housing help services and street outreach services;
- Funding for a number of other related programs, such as pre-employment supports and community economic development activities.

The Toronto Streets to Homes Program

The City of Toronto’s Streets to Homes program focuses on ending, rather than managing street homelessness. It has been operating since February 2005 and has so far housed more than 1,200 people directly from the street. The Streets to Homes program is based on the idea that moving people directly into permanent housing is the best way to end street homelessness. This approach, often known as “housing first,” is being implemented in cities across North America, and holds that other barriers, such as lack of employment skills, addictions, and poor mental and physical health, can best be addressed once a person has stable housing. In addition, the Streets to Homes model focuses on a low or no barrier approach to housing programs, such that individuals do not need to be in treatment programs as a condition of housing.

The mandate of Streets to Homes is to serve homeless people who live outdoors, which includes individuals living in parks, ravines, under bridges, on sidewalks, laneways, alleys, stairwells, building alcoves, squats and living in vehicles. Streets to Homes works one-on-one with homeless individuals to create individualized housing plans that respect clients’ personal preferences and autonomy. Outreach workers assist their clients through each step needed to find housing, such as replacing identification, accessing income supports, completing housing applications, and searching for apartments.

Streets to Homes works hard to find housing options that meet clients’ needs at rents they can afford, despite the fact that Toronto’s rental market is characterized by low vacancy

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rates and high rents. For example, the average monthly rent for a bachelor unit in the Greater Toronto Area is \$743, while the shelter portion of social assistance benefits for an individual is \$325. Streets to Homes has worked intensively with large property management firms to secure units for clients in conventional private market rental apartments, and has also developed partnerships with some rent-geared-to-income, supportive and transitional housing providers, all of which provide units on a monthly basis to Streets to Homes.

Once in housing, clients are provided with follow-up supports for a one year period. Through intensive goal setting, the frequency of visits decreases over time. Follow-up workers meet with clients in their new homes and assist with the often difficult transition from life on the street by linking them to resources in their new community and helping to develop life skills. Follow-up workers also conduct regular check-ins with the landlord or building superintendent and work to troubleshoot any issues before they turn into reasons to consider eviction. This includes addressing behaviours and ensuring there are no problems with rent payments.

Methods

The research was conducted between November 2006 and April 2007. Any client housed through Streets to Homes, including its non-profit street outreach partners, who was currently receiving follow-up services and who had been housed for three months or more was eligible to participate in the survey. Interviews to complete the survey were conducted in person with clients, in a location of their choosing. Interviews were conducted orally, and lasted between 45 minutes and an hour on average.

A total of 88 individuals were surveyed out of 639 people who met the eligibility criteria at the time the survey took place. The sample reflects a diversity of housing locations and types, and is also generally representative of the demographic composition of Streets to Homes clients. This sample size gives results that are accurate 19 times out of 20, within 10 percentage points. The McNemar test was used to examine statistical significance of changes in service use after housing.

Demographics

Of those surveyed, 82% were male and 18% were female. In terms of age, 13% were under 25, 57% were between 25 and 49 years of age, 27% were 50 to 64, and 3% were 65 or older.

Of those surveyed, 26% had been housed for between three and six months, 23% had been housed for seven to 12 months, and 50% had been housed for more than a year.

Of those surveyed, the largest percentage was in private market housing, 40% in total. Thirty-five percent were in social housing and 25% were in alternative or supportive housing. Alternative or supportive housing is considered to be housing run by a non-profit organization. Usually these buildings have some form of on-site staff support and rents are often geared to income.

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A majority, 54%, of those surveyed were living on their own, 30% in bachelors and 24% in one bedroom units. Eight percent had their own two bedroom unit that they lived in as a couple or with family. A further 39% were living in some form of shared accommodation. Shared accommodation includes individuals sharing a 2 or 3 bedroom private market apartment with roommates (8%), some form of group shared accommodations in non-profit housing (generally these are individual rooms with shared common areas such as kitchens and washrooms) (26%), or a rooming house (5%).

Findings

Satisfaction with Housing

“What do I like the most? Security. Knowing that I have a place to sleep every night. I got all the amenities that I need. I can cook, I can bathe and shower, I can do whatever I want. Stability I guess you would say.”

When asked how satisfied they were with their housing, 88% said they were mostly or very satisfied. Only 5% said they were very unhappy.

When asked what they like the most, the most frequently mentioned things were, in declining order:

- the size or a specific amenity like a balcony or air conditioning;
- the privacy;
- the fact that it was off the street or a roof over their heads;
- the location;
- that the building was well-maintained or clean;
- that it was quiet.

The top things that people liked the least about their place included having problems with the roommates or neighbours or that the building was too busy, that the unit was too small or lacked some amenity, that there were problems with the landlord or that repairs were not done, dissatisfaction with the location, having to abide by rules (for example about guests), and proximity to drug or alcohol use.

Housing Changes Lives

“Everything has changed. Waking up is a whole new life. I have a lot more opportunities now. It’s a life saving program, it literally saved my life.”

“When I left rehab, someone gave me a drawing with a person hanging on the bottom rung of a ladder. He said that was me. Now, I see myself standing on the bottom rung, not hanging on for dear life anymore.”

When asked to reflect on how their life had changed overall, 61% said their life had improved a lot and 30% said it had improved somewhat. Just 7% said their life had stayed the same, and 2% said it had gotten worse. Those who said it had stayed the same or gotten worse spoke about missing some aspects of living outdoors, or were unhappy

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with their current housing. However, most people spoke about the improved stability, sense of security and privacy and an overall improved mental outlook since they moved into housing.

Quality of Life Improves

“I don't have to worry anymore. I can lock the door and the world's outside. When you're living outside, the world's in your bedroom. Everybody's walking through your room. You don't know who's the lunatic that's going to come kick you in the head, or steal your shoes.”

“My drug use is down, energy level is up, eating better, getting regular sleep, and I can stick to my medication.”

Individuals reported improvements in nearly all quality of life indicators.

	Improved	Stayed the Same	Gotten Worse
Health	70%	17%	13%
Mental Health	57%	31%	12%
Food Quality	63%	22%	15%
Sleeping	69%	18%	13%
Personal Safety	72%	22%	6%
Social Interaction	40%	35%	26%
	Increased	Stayed the Same	Decreased
Stress Level	16%	24%	60%
Food Eaten	65%	18%	17%

Figure 1: Changes in Quality of Life

Less Alcohol and Drug Use

“When I was on the street, I drank every day, now I go two or three weeks without a drink. When you're on the street, all your friends do the same thing, so if you stay at home, you don't see them you don't need to drink.”

Participants were asked to describe whether they felt their alcohol and drug use had increased, decreased or stayed the same and to describe how they felt it had changed. Of those who reported using alcohol, 49% said their alcohol use had decreased (including 17% who said they had quit altogether), 41% said it had stayed the same and 10% said it had increased.

Of those who said they used drugs, 74% said their use had decreased since they moved into housing, including 33% who said they had quit using completely. Eighteen percent said it had stayed the same and 8% said it had increased.

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Changes in Health Services Use

While clients were accessing more routine health services, there was a marked decrease in the use of emergency services.

Up	
Family Doctors	32%
Psychiatrists	71%
Dentist	5%
Optometrist	143%
Specialists	233%
Down	
Clinics	-28%
ER	-40%
Hospital	-25%

Figure 2: Changes in Health Service Use

The frequency of use also decreased. Of those who said they had used the Emergency Room(ER) while homeless, 40% said they had gone just once in the last year they were homeless, and another 35% said they had gone between 2 and 5 times. However, 25% of those who said they used an ER while homeless, or 12% of the total surveyed, were frequent emergency room users, from every two months to several times a week. Of these frequent users, 20% had not been to the ER since moving into housing, and the other 80% reported a decrease in the frequency of visits.

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Reductions in Emergency Service Use

There was also a decrease in the use of emergency and police services after individuals were in housing, which has also been found in other studies of formerly homeless individuals.

	%
Call 911	-35
Ambulance	-38
Fire Dept	-71
Police Detox	-75
Get Arrested	-56
Jail	-68
Court	-58
Probation	-38

Figure 3: Changes in Emergency Service Use

For those who did still have interactions with emergency services, the frequency was also far less. For example, of those who had been arrested while homeless, 52% reported being arrested multiple times in a year. Of those who said they had been arrested since being housed and described the frequency, only 25% said they had been arrested more than once. Similarly, of those who used police detox (“drunk tank”) while homeless, 63% said they used it more than twice a year, some up to several times a month. Once in housing, none of those who had used police detox reported using it more than twice since moving into housing.

Changes in Social and Community Service Use

Participants were also asked to identify what kinds of services they had used while homeless, and what services they used since moving into housing.

Once in housing, the most commonly used service was food banks, at 81%, which was a 55% increase in food bank use from when people were homeless. People were also more likely to use education programs, job training, drug and alcohol treatment and mental health programs. However, there was a significant reduction in the use of other services.

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UP	
Food bank	55%
Education	57%
Drug/ alcohol treatment	50%
Mental health programs	20%
Job training	175%
Down	
Drop-ins (day centres)	-38%
Identification clinics	-44%
OOTC meals (faith-based)	-67%
Harm reduction services	-32%
Legal services	-32%
Health bus (Mobile Health Service)	-77%
Detox	-62%

Figure 4: Changes in Social and Community Service Use

Statistically Significant Changes in use of Emergency and Homeless Services

The McNemar test was used to examine statistical significance of changes in service use after housing. The McNemar test is designed to test the difference between paired proportions, and is the appropriate test for before and after design studies where individuals serve as their own control.

A “yes” in the table on the next page means the change in service use after being housed was found to be statistically significant.

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Family doctor	YES	Health bus	YES
Clinics	YES	Identification clinics	YES
ER	YES	Job training	NO
Hospital	NO	Legal services	NO
Psychiatrist	NO	Mental health programs	NO
Dentist	NO	OOTC (faith-based) meals	YES
Optometrist	YES	911	NO
Specialists	YES	Ambulance	NO
Detox	YES	Fire	NO
Drop-ins (day centres)	YES	Police detox (“Drunk Tank”)	YES
Drug/ alcohol treatment	NO	Get arrested	YES
Education	YES	Jail	YES
Food bank	YES	Court	YES
Harm reduction services	YES	Probation	NO

Housing Security

“In the beginning I was thinking about leaving. It’s hard to think about having a roof over your head. But not anymore.”

When asked if they felt their housing was currently secure, 85% said yes. For the 15% who said they did not feel it was secure, the most common reason was complaints from neighbours or the landlord regarding their behaviour. Other reasons mentioned included the building possibly being sold, drug and alcohol use, mental health or feeling paranoid, and a roommate moving out.

When asked whether they had ever thought of leaving their housing to return to the streets, 39% said they had, particularly in the first few months after moving in. The main reason people said they had thought about leaving was because it was difficult to adjust to being indoors, or they missed living outdoors.

People who said they had thought about leaving were also asked why they decided to stay. In 24% of these cases, the individual said that it was because their follow-up worker had convinced them to stay or had fixed whatever problem was making them want to leave. Another 18% said they didn’t leave because it was too cold out or they weren’t used to sleeping outside anymore. A further 21% said it was because they realized that they didn’t actually want to lose their housing for various reasons, including their health, the security it provides, a sense of privacy or escape, and stability.

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Thirty-two percent of those surveyed had moved at least once since they had been housed. This was more common for those who had been housed more than a year - 50% of these individuals had moved at least once, compared to 15% of those housed a year or less. Of those who had moved, the largest number (29%), said the reason was because of problems with their roommate, either disagreements or their roommate(s) had moved out and could not afford the apartment on their own.

Housing Satisfaction and Choice

“If I had my choice, I’d be living by myself.”

There is a relationship between perception of choice, type of housing, and housing satisfaction which may have important implications for how the kinds of housing choices offered affects ultimate housing satisfaction and stability.

Those who felt they had the most choice in type of housing were most likely to report the highest satisfaction with their housing, while those who said they felt they had no choice were most likely to report being unhappy with their housing.

Choice	Yes	Somewhat	No
	%	%	%
very happy	63%	42%	32%
mostly satisfied	34%	26%	52%
Somewhat unsatisfied	2%	26%	4%
very unhappy	0%	5%	12%

Figure 5: Choice and Housing Satisfaction

As well, those who were in independent units (e.g. bachelors or one-bedrooms) were more likely to be very happy or mostly satisfied than those in shared accommodations or rooming houses.

These two factors together are the greatest predictors of housing satisfaction – choice and type of unit. Those who had a choice in their housing were more likely to be happy, regardless of type. Even when individuals said they had no choice in their housing, 100% of those in independent units still said they were mostly satisfied or very happy. However, those in shared accommodation or rooming houses who said they had no choice in their housing had the lowest satisfaction with their housing (20% very unhappy).

Those in rooms or shared accommodation were more likely to say that their eating had stayed the same or gotten worse. Only 56% said it had improved compared to 68% of those in independent units. This was most often attributed to a lack of secure food storage areas, as several people commented on the fact that they had problems with roommates stealing their food, or that they lacked adequate, secure food storage space.

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Follow-up Supports

“...just the sense that they're there for support. She often suggests things and gives feedback. It's good to know you can call and see what's up and you can be open-minded and you don't have to worry about saying certain things. It's a comfortable situation where you can express yourself openly.”

When asked what service provided by their follow-up worker they found most valuable, people most frequently said that their worker helped them to discuss options and make decisions. Other common responses included providing information about other services and resources, advocating with social services or landlords, help with appointments and transportation, help finding new housing and help completing paperwork.

Forty-one percent of people said they were in contact with their worker once a week. Twenty-three percent said they were in touch more frequently than once a week, and 36% said less frequently.

	%
Once a week	41%
Several times a week	17%
Once every two weeks	15%
Once every few months	12%
Once a month	8%
Once a day	6%
Once every six months	1%

Figure 6: Frequency of Follow-up Supports

When asked if they felt the amount of contact they had with their follow-up worker was the right amount, 88% said it was the right amount. Only 2% said it was too much, and 10% said not enough. Many commented that it was the right amount because they knew that if they needed help with anything they could contact their worker.

When asked how their need for support services had changed since they had moved into their apartment, 33% said it had decreased. Many said that as they settled into their housing they became more independent. Fifty-one percent said their need for services had stayed the same, and 16% said it had increased. Of those who said it had increased, several mentioned starting to deal with other life issues as the reason why.

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Income and Budgeting

“I don’t know if [my budgeting skills] have improved but the understanding of the need to improve is definitely there now. I know I need to get better at it. I don’t know if I’m there yet. Living in the house has allowed me the opportunity to see that. Oh no, I’m out of detergent again or toilet paper and oh, I should have bought that coffee. I’m learning those things more and more.”

When asked how they felt about the amount of money they had left after paying rent, 68% said it was not enough to live on. Twenty-two percent said it was just enough to make ends meet, while 10% said their income was plenty.

Sixty-six percent said that they regularly ran out of money to buy food. Some people said they had difficulty managing to buy enough food at the beginning of the month because they didn’t have a proper storage, such as a fridge or secure cupboard space. Others said they found it difficult to juggle buying food with other priorities, such as hygiene products, household items, and luxuries like cigarettes or fast food. Others said they were able to manage by using food banks, and some said they found they had more money since cutting back on cigarettes, alcohol or drugs.

When asked if they felt their ability to budget their money had improved since they moved in, 56% said yes. Several people said it was something they were actively working on with their follow-up worker. Those who said they hadn’t improved at budgeting often said that they received so little money there was nothing to budget because it was gone immediately after paying bills. Others said they found it difficult to manage to make the money last the whole month.

Reduction in Panhandling once Housed

The number of people reporting income from panhandling decreased 57% once in housing. Of those who still panhandled, 76% said they panhandled less than before, while 24% said they panhandled the same amount as when they were homeless.

Those who reported using drugs while homeless (n=49) were more likely to report having income from panhandling, 71% compared to just 38% of non-drug users. Once in housing, of those who had stopped panhandling and were alcohol users, 70% had also quit or decreased their alcohol use. This compares to 48% of those who were still panhandling who had quit or decreased their alcohol use. While those who had decreased their drug use were still as likely to panhandle, those who had quit using drugs were less likely to continue to panhandle

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Client Perspectives on Housing First

When asked what worked for them about Streets to Homes services, or what they found most helpful, the most common responses were that Streets to Homes had better connections or staff were able to find the right kind of housing, and that it was easy or that their worker took care of all the details for them. Others attributed it to their housing worker, for example they said that it was because their worker was caring and friendly, or that their worker was reliable or persistent and would not give up. Others said that housing was obtained quickly, or that housing services were offered to them directly on the street or were offered repeatedly.

“If they didn't keep after us we wouldn't have done it.”

“They didn't just put us on a waiting list for subsidized housing. They went and talked to landlords with us.”

“The willingness and friendliness of staff. I didn't feel uncomfortable calling or asking for help.”

“When she talks to you, it's not like she's better than you. She came to my level.”

“She made it easier for me, made all the appointments and did all the work. I just had to show up.”

“Because they approached me directly to offer services. Otherwise I would not have been able to ask for help on my own.”

“I'd probably be dead by now if not for them. They have a lot of connections. I don't know how they work it out, but they just make it happen.”

Those who were long-term homeless (more than two years) were much more likely to say that the reason Streets to Homes worked for them was that their worker was persistent and reliable (20% compared to 4%). Common comments from these individuals included that their worker knew how to do their job well, didn't give up, and was true to their word. Those homeless longer were also more likely to say that a caring and friendly attitude that made them feel comfortable was important (18% compared to 8%).

Housing Makes the Future Look Better

“I now have freedom to deal with myself. The thought of eating tomorrow does not occupy all my time. I can think about seeing my doctor and can think about how to get myself out of this hole. I can consider things beyond survival.”

When asked about their outlook for the future, 82% said it was more positive. While 18% said it had not really changed, less than 1% said their outlook had gotten worse. Many people spoke about having higher self-esteem; that they were able to set goals for

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themselves; look for a volunteer position; and begin planning to go back to school or work.

Policy and Program Implications

The survey findings have several important implications for the Streets to Homes program in particular, and the housing first approach in general. First and foremost, clients said that the principles behind the approach were things that worked for them in finding and keeping housing. Being offered housing services directly on the street, providing advocacy in dealing with landlords and social assistance, and having someone to go to for resources and help once in housing were all identified as things that made the Streets to Homes approach successful for clients.

The survey findings also demonstrate that housing with appropriate supports improves the quality of life for individuals with long histories of homelessness, mental health issues and substance use. Clients reported improvements in virtually all quality of life indicators, including personal security, food and nutrition, sleeping, stress, physical and mental health, as well as reductions in alcohol and drug use. There was also a reduction in the use of the criminal justice system, a reduction in the use of emergency medical services, and an increase in the use of regular health services.

The survey findings also point to areas for program improvements. The findings show that greater perception of choice in housing leads to greater housing satisfaction and eventual stability. This is particularly important for clients moving into shared accommodation, where individuals generally felt they had less choice and had less satisfaction with their housing. Individuals in shared accommodation also had more food security issues and were more likely to move, often related to problems with roommates.

While the survey findings show that clients have made significant improvements in almost all areas, they also face difficult challenges. Adjusting to living indoors and the responsibilities of maintaining housing can be stressful. The area of social interaction was one where many individuals reported having difficulties, in re-establishing social networks appropriate to their new neighbourhoods and circumstances. Some people admitted to thinking about leaving their housing to return to the streets, particularly in the first few months. However, despite all these difficulties, people wanted to stay housed and know that, despite thinking about leaving, they are better off in their housing than they were on the street. Although many people expressed frustration or dissatisfaction with aspects of their situation such as the condition of their housing, problems with roommates, and struggling to get by on very limited income, many also expressed a sense of optimism and hope for the future that they hadn’t felt when living on the street.