



Housing First Guide Europe

Chapter 1. What is Housing First?

Nicholas Pleace



TABLE OF CONTENTS

1. Introducing Housing First.....	3
2. The History of Housing First	4
3. Housing First in Europe	8
4. The Evidence for Housing First	11
4.1. Ending Homelessness for People with High Support Needs.....	11
4.2. Health and Well-Being	12
4.3. Social Integration.....	12

1. Introducing Housing First

Housing First is probably the **single most important innovation in homelessness service design** in the last 30 years. Developed by **Dr. Sam Tsemberis** in New York, the Housing First model has proven very **successful in ending homelessness among people with high support needs** in the USA and Canada and in several European countries.

Housing First is designed for people who need significant levels of help to enable them to leave homelessness. Among the groups who Housing First services can help are people who are homeless with severe mental illnesses or mental health problems, homeless people with problematic drug and alcohol use, and homeless people with poor physical health, limiting illness and disabilities. Housing First services have also proven effective with people who are experiencing long-term or repeated homelessness who, in addition to other support needs, often lack social supports, i.e. help from friends or family and are not part of a community. In the United States and Canada, Housing First programmes are also used with homeless families and young people.

Housing First uses housing as a *starting point* rather than an *end goal*. Providing housing is what a Housing First service does before it does anything else, which is why it is called '*Housing First*'. A Housing First service is able to focus immediately on enabling someone to successfully live in their own home as part of a community. Housing First is also focused on improving the health, well-being and social support networks of the homeless people it works with. This is very different from homelessness services that try make homeless people with high support needs 'housing ready' *before* they are rehoused. Some existing models of homelessness services require someone to show sobriety and, engagement with treatment and to be trained in living independently before housing is provided for them. In these types of homelessness service, housing happens '*last*'.

Housing First is designed to ensure homeless people have a high degree of choice and control. Housing First service users are *actively encouraged* to minimise harm from drugs and alcohol and to use treatment; they are *not required* to do so. Other homelessness services, such as staircase services, often *require* homeless people to use treatment and to abstain from drugs and alcohol, before they are allowed access to housing and may also remove someone from housing if they do not comply with treatment or do not show abstinence from drugs and alcohol.

In the USA, Canada and in Europe, **research shows that Housing First generally ends homelessness for at least eight out of every ten people¹**. Success has also been reported with diverse groups of homeless people. Housing First has worked very well for people who are not well integrated in society after long-term or repeated homelessness, homeless people with severe mental illness and/or problematic drug and alcohol use and homeless people with poor physical health.

Housing First in Europe can be described as following eight core principles. These core principles are very closely based on those developed by Dr. Sam Tsemberis, who created the first Housing First service in New York in the early 1990s². These principles were defined in consultation with Dr. Tsemberis and the advisory board for this Guide.

1 Based on a review of existing evidence, see: Pleace, N. and Bretherton, J. (2013) The Case for Housing First in the European Union: A Critical Evaluation of Concerns about Effectiveness. *European Journal of Homelessness*, 7(2), 21-41
<http://housingfirstguide.eu/website/the-case-for-housing-first-in-the-european-union-a-critical-evaluation-of-concerns-about-effectiveness/>

The figure refers to formerly homeless people housed for at least one year by a Housing First service (see later in this chapter for more details on the evidence for Housing First).

2 Tsemberis, S.J. (2010) *Housing First: The Pathways Model to End Homelessness for People with Mental Illness and Addiction* Minneapolis: Hazelden.

Eight core principles:



Housing is
a human right



Choice and control for
service users



Separation of housing
and treatment



Recovery orientation



Harm reduction



Active engagement
without coercion



Person-centred
planning



Flexible Support for as
Long as is Required

Operating within these core principles, Housing First pursues a range of service priorities, which include offering help with sustaining a suitable home and with improving health, well-being and social integration. Housing First is designed to provide opportunities to access treatment and help with integration into a community. There is also the option to get help with strengthening social supports and with pursuing rewarding opportunities, such as arts-based activities, education, training and paid work.

2. The History of Housing First

Housing First was developed by Dr. Sam Tsemberis, at Pathways to Housing in New York, in the early 1990s³. **Housing First was originally developed to help people with mental health problems who were living on the streets;** many of whom experienced frequent stays in psychiatric hospitals. The target populations entering Housing First later grew to include people making long stays in homelessness shelters and those at risk of homelessness who were discharged from psychiatric hospitals, or released from prison. With some modification to the support services, Housing First services are now also used with families and young people who are homeless in North America.

Before Housing First, permanent housing with support was only offered to homeless people in North America after they had graduated from a series of steps that began with treatment and sobriety. Each step on this 'staircase' was designed to prepare someone for living independently in their own home. When all the steps were complete, a formerly homeless person with mental health problems was meant to be 'housing ready' because they had been 'trained' to live independently. These types of services are sometimes called 'staircase', 'linear residential treatment' or 'treatment-led approaches'.

These 'staircase' services and the 'housing readiness' culture had originally arisen from practice in North American psychiatric hospitals, where individuals with a diagnosis of severe mental illness were initially considered incapable of functioning in all areas of life and needed around-the-clock supervision and support. By the 1980s, North American mental health professionals were raising serious questions about the effectiveness of services based on these assumptions about severe mental illness⁴. However, a

³ See: Tsemberis, S.J. (2010) *Housing First: The Pathways Model to End Homelessness for People with Mental Illness and Addiction* Minneapolis: Hazelden.

⁴ Ridgway, P. and Zippel, A. M. (1990) The paradigm shift in residential services: From the linear continuum to supported housing approaches. *Psychosocial Rehabilitation Journal* 13, 11-31.

staircase approach became firmly established as the model for helping homeless people with high needs in North America.

The staircase approach for homeless people had three goals:

- Training people to live in their own homes after being on the streets or in and out of hospitals.
- Making sure someone was receiving treatment and medication for any ongoing mental health problems.
- Making sure someone was not involved in behaviour that might put their health, well-being and housing stability at risk, particularly that they were not making use of drugs and alcohol (sobriety).

During the 1990s, it started to become clear that staircase services for individuals with psychiatric diagnoses, especially those with co-occurring addiction problems, were not always working very effectively⁵. There were three main problems:

- Service users became 'stuck' in staircase services, because they could not always manage to complete all the tasks necessary to move between one step and the next.
- Service users were often evicted from temporary and permanent housing because of strict rules, such as requirements for total abstinence from drugs and alcohol and being required to participate in psychiatric treatment.
- There were worries about whether staircase services were setting unattainable standards in the requirements they placed on people, i.e. service users were expected to behave more correctly than other people; they were required to be a 'perfect' citizen, rather than an ordinary citizen.

North American 'supported housing' services, developed as an alternative to staircase services, had a different approach. Former psychiatric patients were immediately, or very quickly, given ordinary housing in ordinary communities and received flexible help and treatment from mobile support teams, within a framework where the service user had a lot of choice and control. Support was provided for as long as was needed.

'Supported housing' services in North America did not require abstinence from drugs or alcohol, and they did not expect full engagement with treatment as a condition for being housed. Giving former psychiatric patients far more choice about how they lived their lives, while encouraging positive changes and providing help when it was asked for, was found to be more effective than a staircase approach.

This supported housing model was the basis for Housing First⁶.

However, as homelessness began to increase, services for homeless people often continued to use the stairway model, because that was still consistent with the predominant mental health services model in the USA. As most of those who were on the streets - the visibly homeless - were thought to have very high rates of severe mental illness, it seemed reasonable to use the traditional mental health services approach that had often been used by psychiatric hospitals. Most homelessness services therefore followed the staircase model. In Europe too, homelessness services had been designed according to a staircase approach, which saw housing as the end goal rather than as the first step in ending homelessness.

5 Ridgway, P. and Zippel, A. M. (1990) The paradigm shift in residential services: From the linear continuum to supported housing approaches *Psychosocial Rehabilitation Journal* 13, 11-31; Carling, P.J. (1990) Major Mental Illness, Housing, and Supports: The promise of community integration *American Psychologist* 45, 8, 969-975.

6 Tsemberis, S. (2010) *Housing First: The Pathways Model to End Homelessness for People with Mental Illness and Addiction* Minnesota: Hazelden.

Research on staircase homelessness services reported similar problems to those identified in staircase mental health services⁷. In particular:

- Homeless people became 'stuck', unable to complete the steps that they were expected to follow to be rehoused.
- Staircase services were abandoned by homeless people who did not like or could not follow the strict rules.
- There were concerns about the ethics of some staircase services - particularly a tendency to view homelessness as the result of someone's character flaws - with homeless people being blamed for causing their own homelessness.
- Staircase services could be harsh environments for homeless people.
- Costs were high, but the effectiveness of staircase services was often limited.

Building on the supported housing model, Housing First, as developed by Dr. Sam Tsemberis in New York, was focused on homeless people with a severe mental illness⁸. Housing was provided 'first' rather than, as in the staircase model, 'last'. **Housing First offered rapid access to a settled home in the community, combined with mobile support services that visited people in their own homes.** There was **no requirement to stop drinking or using drugs and no requirement to accept treatment in return for housing.** Housing was not removed from someone if their drug or alcohol use did not stop, or if they refused to comply with treatment. If a person's behaviour or support needs resulted in a loss of housing, Housing First would help them find another place to live and then continue to support them for as long as was needed.

Rather than being required to accept treatment or complete a series of 'steps' to access housing, someone in a Housing First service leaps *over* the steps and goes *straight* into housing. Mobile support is then provided to help Housing First service users to sustain their housing and promote their health and well-being and social integration, within a framework that gives service users a high degree of choice and control (Figure 1).

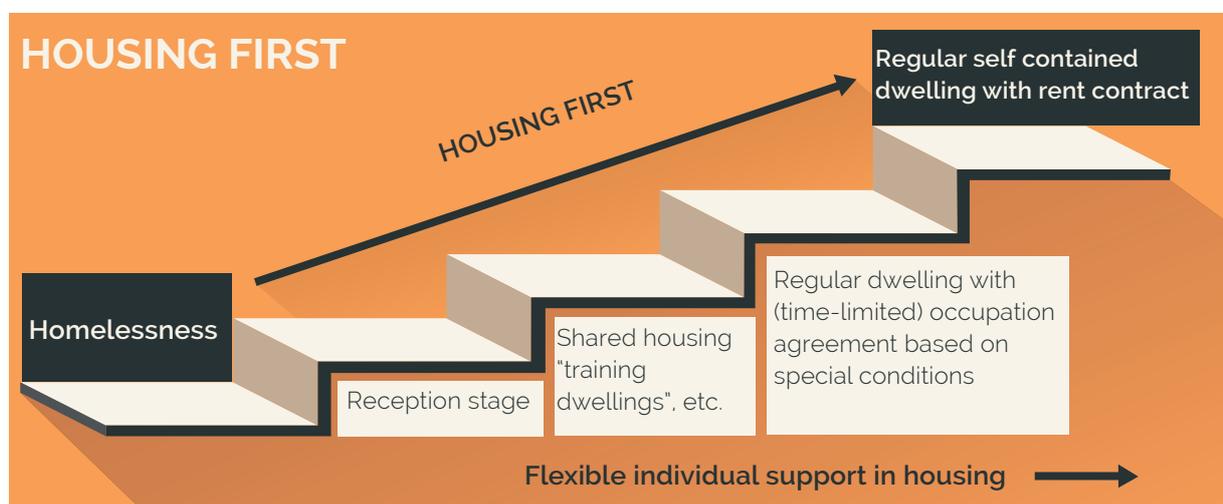


Figure 1: Summarising the differences between Housing First and Staircase Services⁹

7 Sahlin, I. (2005) The Staircase of Transition: Survival through Failure *Innovation: The European Journal of Social Science Research*, 18(2), 115-136.

Sahlin, I. and Busch-Geertsema, V (2005) The Role of Hostels and Temporary Accommodation. http://housingfirstguide.eu/website/wp-content/uploads/2016/03/The-role-of-Hostels-And-Temporary-Accommodation-ejh_vol1_article3.pdf

Pleace, N. (2008) *Effective Services for Substance Misuse and Homelessness in Scotland: Evidence from an International Review* Edinburgh: Scottish Government - <http://www.gov.scot/Resource/Doc/233172/0063910.pdf>

8 Tsemberis, S. (2010) 'Housing First: Ending Homelessness, Promoting Recovery and Reducing Costs' in I. Gould Ellen and B. O'Flaherty (eds) *How to House the Homeless* Russell Sage Foundation: New York.

9 Tsemberis, S. and Henwood, B. (2013) Housing First: Homelessness, Recovery and Community Integration. In V. Vandiver (ed.) *Best Practices in Community Mental Health: A Pocket Guide*, pp. 132-150. NY Oxford University Press

In the late 1990s, pioneering American social research by Dennis P. Culhane and colleagues showed there was **a small group of people with very high needs, who made long-term and repeated use of homelessness services, yet whose homelessness was never resolved**¹⁰. Staircase services were found not to be performing well in ending this long-term ("chronic" and "episodic") homelessness¹¹, which was being found to be very damaging to the health and well-being of the people experiencing it¹². Housing First, which research showed had been successful in New York, could, in contrast, end long-term homelessness at a much higher rate than staircase services¹³. **The systematic use of comparative research, demonstrating Housing First in comparison with other homelessness services, encouraged wider use of Housing First throughout the USA and attracted attention from the Federal government.**

Importantly, **there was also an economic case for Housing First. This case centred on the relatively high cost of frequent hospitalisation and incarceration associated with long-term homelessness**, i.e. long-term homeless people often made frequent use of emergency medical services, had high rates of contact with mental health services and could often have contact with the criminal justice system. As they did not resolve long-term homelessness in many cases, staircase programmes started to be seen as not cost-efficient, especially because the staircase services themselves were also relatively expensive.

Research was showing that Housing First could potentially deliver significantly better results, for a lower level of spending, than staircase services¹⁴. Comparatively, Housing First cost significantly less than other services. Figures from Pathways to Housing show programme costs of \$57 per night, compared to \$77 for a place in a shelter (approximately €52 compared €70, 2012 figures)¹⁵. In London, in 2013, one Housing First service was found to cost approximately £9,600 (€13,500) per person per year (excluding rent). This was compared to between £1,000 per year *more* for a shelter, or nearly £8,000 *more* for a place in a high-intensity staircase service (excluding rent). This represented an annual saving approximately equivalent to between €1,400 and €11,250 (2013 figures)¹⁶.

It was also seen that by ending homelessness among people with very high support needs, Housing First could potentially save money for other services, such as psychiatric services, emergency medical services and the criminal justice system. This was because homeless people with very high support needs, if they were housed with the proper support, would not encounter these services as often as when they were homeless and could stop using them altogether¹⁷. Homeless people with high support needs could now be offered Housing First, which, as well as being very likely to end their homelessness, could be more cost effective than alternative homelessness services¹⁸.

10 Kuhn, R. and D.P. Culhane. "Applying Cluster Analysis to Test a Typology of Homelessness by Pattern of Shelter Utilization: Results from the Analysis of Administrative Data" Departmental Papers (SPP) (1998). Available at: http://works.bepress.com/dennis_culhane/3

11 Pleace, N. (2008) *Effective Services for Substance Misuse and Homelessness in Scotland: Evidence from an International Review* Edinburgh: Scottish Government - <http://www.gov.scot/Resource/Doc/233172/0063910.pdf>

12 Culhane, D.P., Metraux, S., Byrne, T., Stino, M. and Bainbridge, J. "The Aging of Contemporary Homelessness" Contexts, in press (2013). Available at: http://works.bepress.com/dennis_culhane/119

13 Tsemberis, S. (2010) 'Housing First: Ending Homelessness, Promoting Recovery and Reducing Costs' in I. Gould Ellen and B. O'Flaherty (eds) *How to House the Homeless* Russell Sage Foundation: New York; Padgett, D.K.; Heywood, B.F. and Tsemberis, S.J. (2015) *Housing First: Ending Homelessness, Transforming Systems and Changing Lives* Oxford: Oxford University Press.

14 <http://www.york.ac.uk/media/chp/documents/2008/substancemisuse.pdf>

15 Source: <https://pathwaystohousing.org/housing-first-model>

16 Pleace, N. and Bretherton, J. (2013) *Camden Housing First: A 'Housing First' Experiment in London* York: University of York <https://www.york.ac.uk/media/chp/documents/2013/Camden%20Housing%20First%20Final%20Report%20NM2.pdf>

17 Culhane, D.P. (2008) The Cost of Homelessness: A Perspective from the United States *European Journal of Homelessness* 2.1, 97-114 - <http://housingfirstguide.eu/website/wp-content/uploads/2016/03/The-cost-of-Homelessness-A-perspective-from-the-United-States.pdf>

Pleace, N.; Baptista, I.; Benjaminsen, L. and Busch-Geertsema, V., (2013) The Costs of Homelessness in Europe: An Assessment of the Current Evidence Base Brussels: FEANTSA http://housingfirstguide.eu/website/wp-content/uploads/2016/03/feantsa-studies_03_web-Cost-of-Homelessness.pdf

18 Pleace, N. and Bretherton, J. (2013) The Case for Housing First in the European Union: A Critical Evaluation of Concerns about Effectiveness *European Journal of Homelessness*, 7(2), 21-41 vid supra

3. Housing First in Europe

European use of Housing First has been encouraged by the North American research results.

Initially, the inspiration came from the original service developed in New York¹⁹, then from other US Housing First services²⁰. More recently, some very successful results from the Canadian At Home/Chez Soi Housing First programme, a randomised control trial (RCT) involving 2,200 homeless people comparing Housing First with existing homelessness services, have become influential in European debates²¹ (see [Chapter 5](#)).

Within Europe, the results of the **Housing First Europe research project**, led by Volker Busch-Geertsema, were among the first to confirm that Housing First could be successful in European countries²². A large-scale randomised control trial as part of the French Un Chez-Soi d'abord Housing First programme, being conducted by DIHAL, will provide systematic data on Housing First effectiveness across four cities in France, in 2016²³. A number of observational studies, that look at Housing First but do not compare it with other homelessness services, have also reported very positive results from Denmark²⁴, Finland²⁵, the Netherlands²⁶, Portugal²⁷, Spain²⁸ and the UK²⁹. Collectively, these findings show that:

- o In Europe, Housing First is generally more effective than staircase services in ending homelessness among people with high support needs, including people experiencing long-term or repeated homelessness.
- o Housing First can be more cost-effective than staircase services because it is able to end homelessness more efficiently. Housing First may also generate cost offsets for (reduce the costly use of) other services. For example, Housing First may reduce frequent use of emergency medical and psychiatric services, prevent long and unproductive stays in other forms of homelessness service and lessen rates of contact with the criminal justice system.
- o Housing First addresses the ethical and humanitarian concerns raised about the operation of some staircase services³⁰.

19 Padgett, D.K.; Heywood, B.F. and Tsemberis, S.J. (2015) *Housing First: Ending Homelessness, Transforming Systems and Changing Lives* Oxford: Oxford University Press.

20 Pearson, C.L., Locke, G., Montgomery, A.E. and Buron, L. (2007) *The Applicability of Housing First Models to Homeless Persons with a Severe Mental Illness* US Department of Housing and Urban Development: Washington DC.
<https://www.huduser.gov/portal/publications/hsgfirst.pdf>

21 Goering, P., Veldhuizen, S., Watson, A., Adair, C., Kopp, B., Latimer, E., Nelson, G., McNaughton, E., Streiner, D. and Aubry, T. (2014) *National At Home/Chez Soi Final Report* Calgary, AB: Mental Health Commission of Canada. - http://www.mentalhealthcommission.ca/English/system/files/private/document/mhcc_at_home_report_national_cross-site_eng_2.pdf

22 Busch-Geertsema, V. (2013) *Housing First Europe: Final Report* - <http://housingfirstguide.eu/website/wp-content/uploads/2016/03/FinalReportHousingFirstEurope.pdf>

23 Tinland, A., Fortanier, C., Girard, V., Laval, C., Videau, B., Rhenner, P., Greacen, T., Falissard, B., Apostolidis, T., Lancon, C., Boyer, L. and Auquier, P. (2013) Evaluation of the Housing First program in patients with severe mental disorders in France: study protocol for a randomized controlled trial *Trials*, 14, p. 309

24 Benjaminsen, L. (2013). Policy Review Up-date: Results from the Housing First-based Danish Homelessness Strategy. *European Journal of Homelessness*, 7(2), 109-131 - <http://housingfirstguide.eu/website/?p=4906>

25 Pleace, N., Culhane, D.P., Granfelt, R. and Knutagård, M. (2015) *The Finnish Homelessness Strategy: An International Review* Helsinki: Ministry of the Environment - <https://helda.helsinki.fi/handle/10138/153258>

26 Wewerinke, D., Al Shamma, S. and Wolf, J. (2013) *Housing First Europe. Local Evaluation Report Amsterdam* <http://housingfirstguide.eu/website/housing-first-europe-local-evaluation-report-amsterdam>

27 Ornelas, J., Martins, P., Zilhão, M.T. and Duarte, T. (2014) Housing First: An Ecological Approach to Promoting Community Integration *European Journal of Homelessness* (8.1), 29-56 - <http://housingfirstguide.eu/website/housing-first-an-ecological-approach-to-promoting-community-integration/>

28 https://www.raisfundacion.org/sites/default/files/rais/noticias/infografia_habitat_DEF_A3.pdf
https://raisfundacion.org/es/informate/noticias_y_eventos/jornada-internacional-h-bitat
https://issuu.com/rais_fundacion/docs/presentaciones_habitathf_web?e=5650917/30872088

29 Bretherton, J. and Pleace, N. (2015) Housing First in England: An Evaluation of Nine Services - <https://www.york.ac.uk/media/chp/documents/2015/Housing%20First%20England%20Report%20February%202015.pdf>

30 Sahlin, I. and Busch-Geertsema, V (2005) The Role of Hostels and Temporary Accommodation. *Vid supra*

In 2016, Housing First was becoming increasingly important in Europe. In some cases, Housing First was integral to comprehensive homelessness strategies, in others, experiments were still underway. The countries where Housing First was being used include:

- **Austria**
- **Belgium**
- **Denmark**
- **Finland**
- **France**
- **Ireland**
- **Italy**
- **The Netherlands**
- **Norway**
- **Portugal**
- **Spain**
- **Sweden**
- **The United Kingdom**



Housing First has been successfully piloted in  Vienna³¹. Nine Housing First projects were tested in  Belgium in 2015, with 150 homeless people with high support needs receiving Housing First. The programme is being evaluated with a view to testing whether Housing First could be more widely used³² (see the [Country fact sheet](#)).

The first stage of the  Danish Homelessness Strategy from 2009-2013 was one of the first large-scale Housing First programmes in Europe and housed more than 1,000 people³³. A summary of the Danish programme is included in the [Country fact sheet](#).

 Finland has made extensive use of Housing First within its national strategy to reduce and prevent homelessness³⁴. Absolute and relative reductions in long-term homelessness have been achieved by using a mix of Housing First service models, including both congregate and scattered housing models (see [Chapter 3](#) and [Chapter 4](#)).³⁵ An example of a Finnish Housing First service is described in the [Country fact sheet](#). Initial results from the  French Un Chez Soi d'abord Housing First pilot programme are positive³⁶, with the existing work to continue through 2017 before use of Housing First is expanded from 2018 onwards (see the [Country fact sheet](#)).

In  Italy in 2015, homelessness service providers and academics cooperated to form the Housing First Italian Network³⁷, a confederation of organisations providing, or with an interest in, Housing First. Housing First Italia had 51 members in 10 Italian regions, of which 35 had operational projects in 2015. Two Italian examples of Housing First services are summarised in the [Country fact sheet](#).

In 2014-17, Housing First services were operating across the  Netherlands. In Amsterdam, the Discus Housing First project had been operating successfully since 2006³⁸.  In Portugal, the Casas Primeiro³⁹

31 http://www.neunerhaus.at/fileadmin/Bibliothek/Neue_Website/Neunerhaueser/Housing_First/20150925_HousingFirst_Report_English.pdf

32 <http://www.housingfirstbelgium.be>

33 Benjaminsen, L. (2013). Policy Review Up-date: Results from the Housing First-based Danish Homelessness Strategy. *European Journal of Homelessness*, 7(2), 109-131. *Vid supra*

34 <http://www.housingfirst.fi/>

35 Pleace, N.; Culhane, D.P.; Granfelt, R. and Knutagård, M. (2015) *The Finnish Homelessness Strategy: An International Review Helsinki: Ministry of the Environment*. - <https://helda.helsinki.fi/handle/10138/153258>

36 <http://hf.aeips.pt/wp-content/uploads/2013/10/Pascale.pdf>

37 <http://www.housingfirstitalia.org/en/>

38 Wewerinke, D., Al Shamma, S. and Wolf, J. (2013) *Housing First Europe Local Evaluation Report Amsterdam*. *Vid supra*

39 <http://www.aeips.pt>

service in Lisbon has pioneered the use of Housing First⁴⁰. A summary of Casas Primeiro is presented in the Country [fact sheet](#).  In Spain, the first Housing First service, HÁBITAT, began operations in May 2014, working in Madrid, Barcelona and Málaga⁴¹. The HÁBITAT project was evaluated throughout and Housing First has now become part of wider Spanish homelessness strategy⁴² (see the Country [fact sheet](#)).

 Norwegian use of Housing First has expanded quite rapidly from 12 Housing First services with 135 service users in December 2014 to 16 Housing First services with a total of 237 service users in July 2015⁴³. In Norway, Housing First is one of a range of services used within an integrated homelessness strategy (see the Country [fact sheet](#)).

In  Poland, a practitioner conference on Housing First was held in Warsaw in February 2016⁴⁴. Promotion of Housing First is being pursued by an evidence-based advocacy project.

In  Sweden, the University of Lund has been actively promoting the idea of Housing First with homelessness service providers and policy makers. In 2009, the University hosted a national conference on Housing First. Two municipalities, Stockholm and Helsingborg, began to operate Housing First services soon afterwards, as a direct result of this conference. Since that time, another 11 municipalities have started up Housing First services. It seems that Housing First has spread even more widely in Sweden, since 94 municipalities state that they provide Housing First services to their citizens (according to one of the 'Open Comparisons' conducted by the National Board of Health and Welfare). These on-going initiatives have been developed at local level rather than as a result of national policy⁴⁵ (see the Country [fact sheet](#)).

In the  UK, the first successful experiment with Housing First was run by Turning Point in Scotland in 2010⁴⁶. An observational evaluation conducted over the course of 2014-2015 also showed that early experiments with Housing First in England were also proving successful⁴⁷, although as in Sweden, development was often at local level. In England, there was not yet a national Housing First policy as of early 2016, but the English federation of homelessness organisations (Homeless Link) had launched a Housing First England initiative to promote the use of Housing First in the country. Additionally, the Welsh Government recommended the use of Housing First models in its guidance for its recently revised homelessness laws in 2015 (see the Country [fact sheet](#)).

In some countries in Central and Eastern Europe, Housing First was still in the process of being developed in 2015/16. Experiments with Housing First have taken place in the  Czech Republic and  Hungary.

40 Ornelas, J., Martins, P., Zilhão, M.T. and Duarte, T. (2014) Housing First: An Ecological Approach to Promoting Community Integration *European Journal of Homelessness* (8.1), 29-56. - <http://housingfirstguide.eu/website/housing-first-an-ecological-approach-to-promoting-community-integration/>

41 https://raisfundacion.org/es/que_hacemos/habitat

42 <http://www.msssi.gob.es/ssi/familiasInfancia/inclusionSocial/docs/ENIPSH.pdf>

43 Source: Norwegian State Housing Bank. Note that not all 16 Housing First services were fully operational in July 2015, some were yet to start supporting homeless people.

44 <http://www.czynajpierwmieszkanie.pl/en/>

45 For more information see: <http://www.soch.lu.se/en/research/research-groups/housing-first>

46 <http://www.turningpointscotland.com/what-we-do/homelessness/glasgow-housing-first/>

47 Bretherton, J. and Pleace, N. (2015) *Housing First in England: An Evaluation of Nine Services* - <https://www.york.ac.uk/media/chp/documents/2015/Housing%20First%20England%20Report%20February%202015.pdf>

4. The Evidence for Housing First

4.1. Ending Homelessness for People with High Support Needs

Housing First services are very successful at ending homelessness for homeless people with high support needs. In most cases, European Housing First services end homelessness for at *least* eight out of every ten people⁴⁸.

- In 2013, the Housing First Europe project reported that **97%** of the high-need homeless people using the Discus Housing First service in Amsterdam were still in their housing after 12 months in the service. In Copenhagen, the rate was **94%** overall, with a similarly impressive level reported by the Turning Point Housing First service in Glasgow (**92%**). The Casas Primeiro Housing First service in Lisbon reported a rate of **79%**⁴⁹.
- The French Un Chez-Soi d'abord Housing First programme reported interim results in late 2013, showing **80%** of the 172 homeless people using Housing First services in the four city pilot sites had retained their housing for 13 months⁵⁰.
- Initial results from the Spanish HÁBITAT Housing First programme indicated extremely high levels of housing sustainment in late 2015⁵¹.
- Finland has reported a fall in the absolute numbers of long-term homeless people following the adoption of a national strategy centred on using Housing First to end long-term homelessness. In 2008, 2,931 people were long-term homeless in the ten biggest cities. This number had dropped to 2,192 in late 2013, a reduction of **25%**. Numbers of long-term homeless people fell from **45%** to **36%** of the total homeless population during the same period⁵².
- In 2015, an observational evaluation of Housing First in England reported that, across five Housing First services, **74%** of homeless people had retained their housing for at least 12 months⁵³.
- In 2015, the Housing First service in Vienna reported that, among all the service users worked with over a two-year period, **98%** were still in their apartments⁵⁴.

Success rates in Europe parallel or exceed the results achieved in North America. US studies have reported rates of housing sustainment between 80% and 88%⁵⁵. The recent evaluation of the Canadian At Home/Chez Soi programme reported that Housing First service users spent 73% of their time stably housed over two years, compared to 32% of those receiving other homelessness services⁵⁶.

48 Pleace, N. and Bretherton, J. (2013) The Case for Housing First in the European Union: A Critical Evaluation of Concerns about Effectiveness *European Journal of Homelessness*, 7(2), 21-41

<http://housingfirstguide.eu/website/the-case-for-housing-first-in-the-european-union-a-critical-evaluation-of-concerns-about-effectiveness/>

49 Busch-Geertsema, V. (2013) *Housing First Europe: Final Report* - <http://housingfirstguide.eu/website/wp-content/uploads/2016/03/FinalReportHousingFirstEurope.pdf>

50 <http://hf.aeips.pt/wp-content/uploads/2013/10/Pascale.pdf>

51 https://www.raisfundacion.org/sites/default/files/rais/noticias/infografia_habitat_DEF_A3.pdf

52 Pleace, N., Culhane, D.P., Granfelt, R. and Knutagård, M. (2015) *The Finnish Homelessness Strategy: An International Review* Helsinki: Ministry of the Environment. - <https://helda.helsinki.fi/handle/10138/153258>

53 Bretherton, J. and Pleace, N; (2015) *Housing First in England: An Evaluation of Nine Services* - <https://www.york.ac.uk/media/chp/documents/2015/Housing%20First%20England%20Report%20February%202015.pdf>

54 Neunerhaus (2015) *Housing First Pilot Project Report* - http://www.neunerhaus.at/fileadmin/Bibliothek/Neue_Website/Neunerhaueser/Housing_First/20150925_HousingFirst_Report_english.pdf

55 Tsemberis, S. (2010) 'Housing First: Ending Homelessness, Promoting Recovery and Reducing Costs' in I. Gould Ellen and B. O'Flaherty (eds) *How to House the Homeless* Russell Sage Foundation: New York.

56 Goering, P., Veldhuizen, S., Watson, A., Adair, C., Kopp, B., Latimer, E., Nelson, G., MacNaughton, E., Streiner, D. and Aubry, T. (2014) *National At Home/Chez Soi Final Report* Calgary, AB: Mental Health Commission of Canada. - http://www.mentalhealthcommission.ca/English/system/files/private/document/mhcc_at_home_report_national_cross-site_eng_2.pdf

An international evidence review conducted in 2008 reported that between 40% and 60% of homeless people with high support needs were leaving or being ejected from staircase services before they were rehoused. This was in sharp contrast to Housing First services that were typically keeping 80% or more of their service users housed for at least one year⁵⁷.

As previously stated, Housing First is very successful at ending homelessness among homeless people with high support needs. However, there are some people, typically between 5–20% of service users, for whom Housing First is not able to provide a sustained exit from homelessness.

4.2. Health and Well-Being

Housing First can make a positive difference to the health and well-being of homeless people with high support needs:

- In 2013, the Housing First Europe research project reported that 70% of Housing First service users in Amsterdam had reduced their drug use, with 89% reporting improvements in their quality of life and 70% reporting improvements in their mental health. Positive results were also produced by the Turning Point service in Glasgow, where drug/alcohol use was reported to have stabilised or reduced in most cases. In the Casas Primeiro service in Lisbon, 80% reported a lower level of stress. Danish Housing First services reported a more mixed picture, but 32% reported improvements in alcohol use, 25% an improvement in mental health and 28% in physical health⁵⁸.
- In 2015, interim results reported from the French Un Chez-Soi d'abord Housing First programme⁵⁹ showed that, in the six months prior to inclusion in Housing First, homeless people had spent an average of 18.3 nights in hospital. When they had been using Housing First for 12 months, the time spent in hospital in the last six months had fallen to 8.8 nights on average. Contacts with hospitals and the frequency of stays in hospital had fallen significantly.
- The 2015 evaluation of Housing First in England found that 63% of service users self-reported improvements in physical health and 66% self-reported gains in mental health, with some smaller improvements around drug and alcohol use⁶⁰.

Housing First, both in Europe and North America, has been shown to deliver improvements in health and well-being. Results can be variable - not all Housing First service users benefit from better health and well-being - but Housing First is able to deliver positive changes for many of the people using it⁶¹.

4.3. Social Integration

Social integration has three main elements:

57 Pleace, N. (2008) *Effective Services for Substance Misuse and Homelessness in Scotland: Evidence from an International Review* Edinburgh: Scottish Government - <http://www.gov.scot/Resource/Doc/233172/0063910.pdf>

58 Busch-Geertsema, V. (2013) *Housing First Europe: Final Report* - <http://housingfirstguide.eu/website/wp-content/uploads/2016/03/FinalReportHousingFirstEurope.pdf>

Some deterioration in health and well-being were also reported.

Estecahandy P. A "Housing First" Trial in France - <http://hf.aeips.pt/wp-content/uploads/2013/10/Pascale.pdf>

59 Tinland, A. and Psarra, C. (2015) Housing First: Lessons from France presentation at the IGH *Homelessness in a Global Landscape* conference, Chicago, June 2015

60 Bretherton, J. and Pleace, N. (2015) *Housing First in England: An Evaluation of Nine Services* - <https://www.york.ac.uk/media/chp/documents/2015/Housing%20First%20England%20Report%20February%202015.pdf>

61 Pleace, N. and Quilgars, D. (2013) *Improving Health and Social Integration through Housing First: A Review*. Brussels: DIHAL/FEANTSA http://www.housingfirstguide.eu/website/wp-content/uploads/2016/03/improving_health_and_social_integration_through_housing_first_a_review.pdf

Johnson, G., Parkinson, S. and Parsell, C. (2012) *Policy shift or program drift? Implementing Housing First in Australia* AHURI Final Report No. 184 -

http://www.ahuri.edu.au/_data/assets/pdf_file/0012/2064/AHURI_Final_Report_No184_Policy_shift_or_program_drift_Implementing_Housing_First_in_Australia.pdf

- o *Social support*, which centres on someone feeling that they are valued by others, called *esteem support*; help in understanding and coping with life, called *informational support*; *social companionship* (spending time with others) and practical or *instrumental support*⁶².
- o *Community integration*, which can be tricky to define precisely, but which generally refers to positive, mutually beneficial relationships between Housing First service users and their neighbours. In a broader sense, community integration also refers to a homeless person not being *stigmatised* by the community⁶³. Housing First can help someone to adjust to new community roles, i.e. being a good neighbour.
- o *Economic integration*, which can mean paid work, but also socially productive or rewarding activities, ranging from participating in arts-based activities through to informal and formal education, training and job-seeking.

A key goal of Housing First (see [Chapter 3](#) and [Chapter 4](#)) is to promote social integration in the community. Housing functions as the basis, or foundation, from which Housing First seeks to help a service user develop the social supports, community integration and economic integration that can improve their quality of life. Good quality social supports, living a life that involves positive engagement with the surrounding community and having a structured, purposeful existence, can all demonstrably enhance health and well-being⁶⁴.

- o The Casas Primeiro Housing First service in Lisbon reported that almost half the Housing First service users had started to meet people in cafés to socialise, with 71% reporting they felt 'at home' in their neighbourhood and 56% reporting feeling part of a community⁶⁵.
- o A recent evaluation of Housing First in England found that of 60 users of Housing First services, 25% had reported regular contact with their family prior to working with Housing First, rising to 50% once they were receiving Housing First support. Prior to working with Housing First, 78% of people were involved in nuisance behaviour, such as drinking alcohol on the street. This fell to 53% after they began working with Housing First⁶⁶.
- o There is qualitative research from both Europe and North America that shows that people using Housing First can have a greater sense of security and belonging in their lives than was the case before homelessness. This has been described as Housing First enhancing someone's sense of security in their day-to-day life, or *ontological security*⁶⁷.

Evidence that Housing First has the capacity to help homeless people with high support needs into paid work is not extensive in Europe or North America, but it must be noted that the people using Housing First often face multiple barriers to employment. Housing First is designed to deliver improvements in health, well-being and social integration. Housing First is not presented, nor expected to be seen, as a 'miracle cure' or panacea that will rapidly end all the negative consequences of homelessness. Housing First successfully ends homelessness and that, in itself, creates a situation in marked contrast to the multiple risks to health, well-being and social integration that are associated with homelessness.

Watch this [video](#) on the origins, history and main evidence of Housing First.

62 Cohen, S. and Wills, T. (1985) Stress, Social Support and the Buffering Hypothesis *Psychological Bulletin*, 98, 310-357.

63 Pleace, N. and Quilgars, D. (2013) *Improving Health and Social Integration through Housing First: A Review*

64 Ibid.

65 Ornelas, J., Martins, P., Zilhão, M.T. and Duarte, T. (2014) Housing First: An Ecological Approach to Promoting Community Integration *European Journal of Homelessness* (8.1), 29-56 - <http://housingfirstguide.eu/website/wp-content/uploads/2016/03/Housing-First-An-Ecological-Approach.pdf>

66 Bretherton, J. and Pleace, N. (2015) *Housing First in England: An Evaluation of Nine Services* <https://www.york.ac.uk/media/chp/documents/2015/Housing%20First%20England%20Report%20February%202015.pdf>

67 Padgett, D. K. (2007). There's no place like (a) home: Ontological security among persons with serious mental illness in the United States. *Social science & medicine*, 64(9), 1925-1936, p. 1934.

For more information and details, contact:
info@housingfirstguide.eu

