



FAQ's about Supportive Housing Research: Are Housing First Models Effective?

At its foundation, the “housing first” strategy operates under the philosophy that safe, affordable housing is a basic human right and a prerequisite for effective psychiatric and substance abuse treatment. Key components of the housing first model include (1) a simple application process that does not require numerous site visits and excessive documentation, (2) a harm reduction approach in which tenants are not required to be clean and sober in order to obtain or keep their housing, and (3) no conditions of tenancy that exceed the normal conditions under which any leaseholder would be subject, including participation in treatment or other services. Research has demonstrated the effectiveness of this model, particularly among people who have been homeless for long periods of time and have serious psychiatric disabilities, substance use disorders, and/or other disabilities.

The Studies

The following studies provide evidence that supportive housing is an effective strategy for chronically homeless single adults.

Sam Tsemberis, et al. “Housing First, Consumer Choice, and Harm Reduction for Homeless Individuals with a Dual Diagnosis”	This is an evaluation of the Pathways to Housing model in New York City. The study used an experimental design (random assignment) with a control group that received service through the “continuum of care” model.
Robert Rosenheck, et al. – Early outcomes from the Collaborative Initiative to Help End Chronic Homelessness (CICH)	This study is still in progress, but the researchers conducted an early analysis of client outcomes in the eleven sites. They compared outcomes in sites using the housing first model with site requiring residential treatment prior to placement.
Susan Barrow, et al. “Final Report on the Evaluation of the Closer to Home Initiative”	This study evaluated the Closer to Home Initiative. Researchers compared outcomes of supportive housing projects using the housing first model with shelter and lodging programs that were designed to get long-term shelter stayers into existing housing options.
Tia Martinez and Martha Burt. “Impact of Permanent Supportive Housing on Chronically Homeless Disabled Adults’ Use of Acute Care Health Services in a Public Hospital”	This study evaluates the impact of two supportive housing projects in San Francisco – the Canon Kip and The Lyric Hotel – that use the housing first model.
Martha Burt and Jacquelyn Anderson. “AB2034 Program Experiences in Housing Homeless People with Serious Mental Illness”	This is an analysis of client outcomes in the AB2034 pilot community mental health programs in California.

The Findings

These studies have a number of similar findings:

- **Housing first models lead to higher rates of housing retention.**

The Pathways to Housing model showed a much higher level of residential stability over time and a much lower proportion of time spent homeless than the continuum model. At the 24-month follow up, survey respondents in the Pathways group spent almost no time homeless whereas respondents in the continuum group spent about a quarter of their time homeless, on average.

The supportive housing projects in the Closer to Home Initiative achieved high levels of housing stability – 83% of formerly chronically homeless tenants remained housed one year later and 77% were still housed after two years. Even among those with the most severe psychiatric disorders, 79% remained housed a year later.

Other research suggests that “housing readiness” is not a strong predictor of housing stability as long as low demand housing options exist. An analysis of outcome data from California’s AB2034 programs (community mental health services targeted to people who are homeless or at risk of being homeless) found that programs serving a high proportion of people with co-occurring disorders had similar levels of housing stability to programs that serve people with fewer challenges.

- **There is very little difference in the level of tenant substance use and psychiatric symptoms between housing first and continuum models.**

Both the Pathways and CICH evaluations measured levels of substance use among participants in both the housing first and continuum models. Very few differences were found, providing some evidence that continuum models do not necessarily reduce the use of alcohol and drugs despite abstinence and/or treatment requirements.

The number of psychiatric symptoms was also similar in housing first and continuum models, indicating that the continuum model is no better at addressing mental health issues despite the fact that services are often required as a condition of tenancy.

- **Participation in services is still relatively high in housing first models, but lower than in continuum models where services are required as a condition of tenancy.**

In the Closer to Home Initiative, supportive housing tenants were engaged in a wide variety of services. The vast majority of participants received health care services (81%) and mental health treatment (80%) through these programs. Tenants participated in other services including substance abuse treatment (56%), money management (65%), assistance in applying for benefits (51%), and employment services (41%).

While most tenants may take advantage of the services offered, they tend to participate at lower rates than in models where participation is a requirement of tenancy. The Pathways to Housing program shows a significantly lower average number of substance abuse treatment services used by tenants.

The AB2034 data analysis shows that being housed is strongly correlated with retention in a mental health program, providing evidence that housing is a key component – and a necessary foundation – to start addressing serious mental health issues.

- **Tenants report having a better quality of life in housing first models and value the independence and choice they have.**

The CICH participants involved in housing first projects report a higher quality of life than those in continuum projects. Similarly, participants in the Pathways to Housing program reported a higher level of consumer choice as compared with participants in the continuum group.