

Study shows Housing First program significantly reduces homelessness over long term

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The longest running study of its kind on the "Housing First" model has found that it significantly reduces homelessness over the long term compared to treatment as usual, according to a study published in *The Lancet Psychiatry* by scientists at the Centre for Addiction and Mental Health (CAMH) and St. Michael's Hospital.

"The Housing First [model](#) results in a lasting and significant increase in the rate of days stably housed per year," said lead author CAMH Physician-in-Chief Dr. Vicky Stergiopoulos. "We now have evidence that we can offer to policy makers, clinicians and other stakeholders about solutions to chronic homelessness for people with [mental illness](#)."

Housing First provides immediate access to rent supplements and [mental health](#) support services to people who are homeless and have a mental illness. Traditional models require homeless people to stop using substances or receive [psychiatric treatment](#) before being eligible for [housing](#) support services.

The program began as a research demonstration project in 2008 with \$110-million in funding from the Mental Health Commission of Canada to implement the model in five Canadian cities, making it the largest research study in the world targeting homelessness and mental health. A review of the first two years of the program, published in the *Journal of the American Medical Association* and the *Journal Psychiatric Services*,

found a significant increase in stable housing days in the short term.

This study published in *The Lancet Psychiatry*, which followed participants over a six-year period, is the first to show that Housing First continues to be significantly more effective than treatment as usual in the longer term, especially for those with high needs for mental [health](#) support services. After 6 years, that group had stable housing an average of 85% of the time in the previous year compared to 60% for the treatment as usual group.

"These results show that if we choose to do so, we can end chronic homelessness in a way that is life-changing for individuals and enormously beneficial for all of society," said Dr. Stephen Hwang, Director of the MAP Centre for Urban Health Solutions at St. Michael's Hospital, where the study was conducted.

While a [cost-benefit analysis](#) has not been completed for the six-year study, the preliminary results after the first two years indicated that every 10 dollars invested in Housing First for the high needs group resulted in average savings of \$9.60 because participants spent less time in shelters and hospitals.

"This model can help break the cycle of [homeless people](#) with mental illness going from hospitals to shelters to jail and back," said Dr. Stergiopoulos. "It treats housing as a human right, restoring people's dignity, and building hope for the future."

Provided by Centre for Addiction and Mental Health

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