

## **June 20, 2014 - Landmark research shows Housing First approach proves effective in Winnipeg, particularly when tailored to the local Aboriginal context**

June 19, 2014

WINNIPEG – New research findings were released today in Winnipeg by the Mental Health Commission of Canada (MHCC) that underscore the clear effectiveness of the Housing First approach to ending homelessness amongst people with mental illness, particularly within the local Aboriginal context. The results are clear: the Housing First model rapidly ends homelessness, there are clear economic benefits, and people who are homeless and living with mental illness can aspire to a better quality of life.

“The MHCC is tremendously heartened by the promising results we have seen from At Home/Chez Soi,” stated Louise Bradley, President and CEO of the MHCC. “Working closely with all our partners, including the Aboriginal community, we are proving that the Housing First approach is a winning strategy for Winnipeg – and is a solution that can be adapted to work across the country.”

At Home/Chez Soi was created in 2008 thanks to a \$110 million investment from the Government of Canada. Demonstration sites included Winnipeg, Vancouver, Toronto, Montréal, and Moncton. The study followed more than 2,000 Canadians with mental illness experiencing homelessness; 513 participants were followed at the Winnipeg site. Central to the Housing First approach is providing people with a place to live first and then offering recovery-oriented services and additional support for underlying issues, such as addiction and mental health that best meet the needs of the individual. This approach helps affected individuals become self-sufficient, fully participating members of society.

“Thanks to this world-leading study, we have the evidence that Housing First works. The results specific to Winnipeg clearly indicate that Housing First can rapidly end homelessness among different groups, including Aboriginal people in our urban centres, while also being a sound financial investments,” said the Honourable Candice Bergen, Minister of State (Social Development).

In Winnipeg, study participants represent a distinct group, with 71 per cent identifying they are of Aboriginal descent. Most of the study participants were from shelters or the streets, with 69 per cent being absolutely homeless and the remainder were in precarious living situations. The program successfully developed culturally safe partnerships among universities, local Aboriginal organizations, and government.

“At Home/Chez Soi demonstrated that by working together in partnership to support the Housing First model, we can make a difference in the lives of those who are homeless, but the work must not end now,” said the Honourable Peter Bjornson, Manitoba Minister of Housing and Community Development. “On behalf of the Province, I’m pleased to announce that we will continue to provide housing subsidies and supports with over \$2 million this year alone for participants of At Home/Chez Soi.”

## Key conclusions:

- Housing First is feasible in Winnipeg.  
The At Home/Chez Soi team was successful in Winnipeg in a manner faithful to the model, yet tailored to the local Aboriginal context.
  - A larger strategy needs to include strategies to prevent the flow into homelessness as well as an increase in affordable housing options more generally.
  - Housing First can rapidly end homelessness for people with mental illness and is an important component of a larger strategy to address homelessness.
  - Excellent research follow-up rates of 81 per cent overall clearly favour the Housing First approach in Winnipeg. In the last six months of the program, 73 per cent of the Housing First participants were housed all or some of the time. However, historically low vacancy rates made securing housing difficult. The market may also reflect systemic patterns of discrimination by many property owners against Aboriginal tenants.
  - While 91 per cent of the participants were unemployed at the time of the study, 52 per cent had worked steadily in the past, suggesting a reasonable potential for re-employment after stabilization in housing.
  - The participants had multiple challenges in their lives that have contributed to disadvantaged states, including mental health and medical issues, only 69 per cent finished high school and all had low monthly incomes.
  - Housing First is effective.
- Housing First resulted in lower costs associated with other services.

The Winnipeg project was similar to the national picture - every \$10 invested resulted in average savings of \$9.30 for high needs, and \$3.85 for moderate needs.

The Winnipeg At Home/Chez Soi study was conducted between 2009 and 2013. Participants were randomly assigned to receive either a Housing First intervention or usual services provided to people who are homeless.

[Winnipeg site report now available for download](#)

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### **ABOUT THE MENTAL HEALTH COMMISSION OF CANADA**

The Mental Health Commission of Canada is a catalyst for change. We are collaborating with hundreds of partners to change the attitudes of Canadians toward mental health problems and to improve services and support. Our goal is to help people who live with mental health problems and illnesses lead meaningful and productive lives. Together we create change. The Mental Health Commission of Canada is funded by Health Canada.

[www.mentalhealthcommission.ca](http://www.mentalhealthcommission.ca)

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- See more at: <http://www.mentalhealthcommission.ca/English/article/32936/june-20-2014-landmark-research-shows-housing-first-approach-proves-effective-winnipeg-#sthash.HtXyfSG5.dpuf>