



NATIONAL COALITION *for* HOMELESS VETERANS

“Housing Retention in Single-Site Housing First for Chronically Homeless Individuals with Severe Alcohol Problems”

Collins, Susan E., Daniel K. Malone, and Seema L. Clifasefi / [Full Report](#)

Quick Takeaways:

- Housing First programs seek to rapidly rehouse clients in individualized housing units, and unlike traditional programs do not prioritize abstinence or substance abuse treatment.
- Most homeless clients were interested in housing, but many did not believe they could maintain abstinence-based housing.
- Only 23% of Housing First participants returned to homelessness. Many commonly assumed risk factors had no association with a return to homelessness.

Study:

Housing First is a rapid-rehousing model which prioritizes placing homeless people into housing over abstinence or treatment as a prerequisite for housing. In order to study the effect of the Housing First model on housing retention in comparison to traditional housing models, researchers analyzed data from 111 chronically homeless people with severe alcohol problems in the Seattle area. Their study also examined the housing needs and desires of chronically homeless people.

Research participants were first administered a survey gathering information on age, race/ethnicity, history of homelessness, alcohol abuse issues, other substance abuse issues, desire for housing, and physical and mental health. Researchers hypothesized that these risk factors would be associated with an increased rate of return to homelessness.

Participants were then placed in single-site housing units, usually private studio apartments, though participants with greater medical needs were placed in a semiprivate cubicle unit. Housing was not predicated on abstinence or substance use treatment progression. Housing status was tracked over two years.

Findings:

Researchers found that 67% of participants were interested in abstinence-based housing, but only 54% believed that they could realistically maintain that housing. Over the two years of study, only 23% of Housing First participants returned to homelessness and of these 24% later returned to housing. None of the studied risk factors were associated with a return to homelessness, though non-alcohol substance use and aggression were associated with participants leaving the Housing First program for other housing.

Conclusion:

The restrictions imposed by traditional abstinence-based housing models may pose a barrier to housing retention. A Housing First model prioritizing housing retention over abstinence had a high rate of retention, and program participants reported that the stability provided by the program allowed them to make positive changes in their life. None of the commonly associated factors were associated with a return to homelessness.

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