

**Building the Bridge from Downstream to Upstream:
Housing First and Homelessness Prevention Initiatives in an International Context**

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Introduction

Since the early 2000's, communities around the world have approached their solutions to homelessness through a Housing First ("HF") framework in which individuals are permanently housed without preconditions of mental health treatment or sobriety. Salt Lake City ("SLC"), Utah is one such location which has received attention for its implementation of HF. The goal of this research is to understand how, through the *Consolidated Framework for Implementation Research* ("CFIR," see Research Methods section), HF interventions in SLC compare to similar efforts internationally. This research finds that, when compared to Helsinki, Finland and Calgary, Alberta, SLC's implementation of HF shares similar elements within three CFIR domains: Characteristics of Intervention, Outer Setting, and Process of Implementation. While a successful HF approach remains an integral component of reducing homelessness, all three locations prove that HF alone is insufficient to maximize and sustain these reductions. To progress significantly towards their goals of ending homelessness, these communities and all others must pair HF with robustly funded and institutionalized prevention measures.

Background Information & Literature Review

With a currently estimated population of 575,000 homeless Americans and a shortage of emergency shelter, transitional housing, and supportive housing beds for these individuals, the US faces a homelessness crisis (*State of Homelessness*, 2020). The recent pandemic promises to exacerbate this issue as more households face unemployment and eviction (Benfer et al., 2020).

To combat homelessness, communities have shifted their approach from "Treatment First" (TF) to "Housing First" (HF). TF was prevalent prior to the early 2000s, with homeless

service providers requiring clients to follow a staircase model of services: starting with mental health or substance use treatment, then transitional housing, and eventually permanent housing.

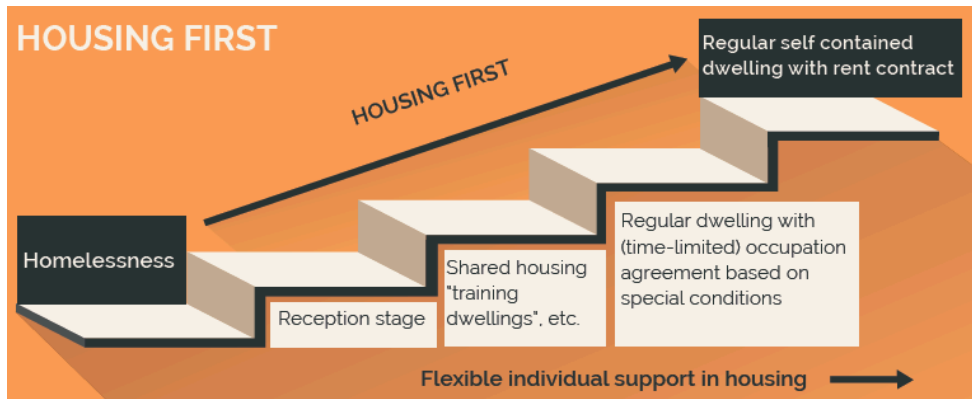


Diagram displaying how HF skips the staircase model that TF followed and immediately offers homeless individuals independent, permanent living accommodations. (Tsemberis & Henwood, 2013).

This high-barrier approach proved to be ineffective for housing individuals with complex needs. In 1992, Dr. Sam Tsemberis created HF with the notion that chronically homeless individuals (those who have been homeless for a long period of time and have a disability) should be first placed into permanent supportive housing and then given the choice to access treatment and other supports (Tsemberis, 2010). This client-centered, harm reduction, and community-based approach has been reinforced through a wide, international evidence base that displays HF's advantages in keeping individuals housed and reducing the financial burden of homelessness (Padgett et al., 2015, Chapter 1; Culhane et al., 2002; Goering et al., 2014).

Researchers have utilized CFIR to compare HF interventions within California (Gilmer et al., 2014), between the earliest American HF initiatives (Padgett et al., 2015, Chapter 7), and across Canadian communities (Worton et al., 2018). Numerous reports have drawn international comparisons between HF interventions (Pleace et al., 2015; Padgett et al., 2015; Greenwood et al., 2013). Beyond HF, an emerging prevention-based approach may be vital to ending homelessness (Gaetz & DeJ, 2017; Culhane et al., 2011; Pleace & Culhane 2016; Fowler et al., 2019).

Research Methods, Approach, Case Selection

This research was conducted through qualitative methods, including interviews, document analysis, and content analysis. I interviewed HF program administrators, leading researchers, and a journalist to obtain on-the-ground perspectives of implementing HF as well as the overarching academic point-of-view. The literature review draws from Web of Science, Homeless Hub, the European Observatory on Homelessness, and online libraries. I analyzed sources through *The Consolidated Framework for Implementation Research* (“CFIR,” Damschroder et al. 2009), which evaluates the dissemination of an evidenced-based practice through its Intervention Characteristics, Outer Setting, Inner Setting, Characteristics of Individuals Involved, and Process of Implementation. To apply this framework, I broke down these five domains and their subcomponents into a graphic organizer, relating each to HF. I then organized my interviews and content analysis into each CFIR subcomponent to understand the relevant implementation factors within each location. Due to space limitations, I have narrowed my focus to three CFIR domains and only address subcomponents which were most influential across all case studies.

In selecting my case studies, I chose locations recognized as successful examples of HF implementation in order to draw helpful lessons for communities which have yet to reduce their homeless populations. SLC, Utah is the main subject of this paper as it received widespread media attention in 2015 due to headlines which claimed it ended chronic homelessness (McCoy, 2015). Newspaper headlines also led me to the second case study of Helsinki, Finland. Receiving more accurate praise for drastically decreasing its chronic homelessness – with claims ranging from a 21-40% reduction – Finland’s capital is fit to serve as a role model for SLC (“Finland

has,” 2019; Pohjanpalo, 2019). Additionally, Finland’s population is similar to that of Utah (“Population,” 2020; “QuickFacts,” 2019).

Calgary, Alberta serves as my third case study as it has also received researchers’ attention for its highly advanced systems-response to homelessness (Gaetz et al., 2013, pgs. 24-44). Like SLC, Calgary is a large western city in the middle of a mostly rural environment.

Findings Part I: Implementation of Housing First

I will first address the three CFIR domains which played – and continue to play – the most significant role in the relative success of these three cities in their implementation of HF interventions and subsequent reductions in homelessness.

Characteristics of Intervention

“Characteristics of the Intervention” consist of both “core components,” which are constant in all HF implementations and an “adaptable periphery,” or elements manipulated to fit local contexts (Damschroder et al., 2009). Due to vast literature describing HF’s core components (client-centered, harm reduction, etc.), I will focus on the adaptable periphery.

In 2004, SLC introduced HF through Utah’s *10 Year Plan to End Chronic Homelessness* (*Ten-Year*, 2004). As part of a nationwide movement to introduce HF-centered, 10-year plans (Padgett et al., 2015, Chapter 7), Utah’s Plan was presented as a much-needed shift away from the status quo, in which 10,266 homeless individuals frequented SLC’s main shelter, The Road Home, between 2000 and 2004 (*Ten Year*, 2004). To encourage this paradigm shift, it was essential for a local HF champion to appeal to the largely conservative state stakeholders.

Lloyd Pendleton assumed this role. As a former businessman and bishop in the Church of Jesus Christ of Latter-day Saints (Mormon Church), Pendleton was well-connected to key

leaders within the state and city government and led Utah's Homeless Task Force in its adoption of the Plan. Qualitative evidence was key, and Pendleton gained HF approval by explaining that Utah could both reduce its homeless population and save money by housing chronically homeless individuals who previously relied on costly public services (Padgett et al., 2015). Recognizing the need to localize HF efforts, Utah created a system of Local Homeless Coordinating Committees (LHCCs) to assess and advocate their communities' needs and adapt HF principles to the local environment. Since the Plan's expiration in 2014, SLC is guided both by Utah's 5-Year Strategic Plan (*The State of Utah*, 2019) and city-wide plans like Operation Rio Grande (*Operation*, 2019), Growing SLC (*Growing*, 2017), and SLC Consolidated Plan (*Salt*, 2019).

Calgary and Helsinki also introduced HF through long-term plans: Calgary's 10 Year Plan to End Homelessness (*Calgary's*, 2008) and The Program to Reduce Long-Term Homelessness (abbreviated as "PAAVO I"; Kaakinen, 2012), respectively. Calgary produced two new iterations of its plan between 2008-2018 (*Calgary's*, 2011; *Calgary's*, 2015) and Finland shifted from PAAVO I to PAAVO II (Karppinen, 2014) and finally to The Action Plan for Preventing Homelessness in Finland 2016-2019 (*Action*, 2016). Like SLC, both locations possessed local HF champions (Scott, 2012; TEDx Talks, 2014), statistics highlighting the growing presence and costs of homelessness (Gaetz et al., 2013; Y-Foundation, 2017), and international evidence demonstrating HF's advantages (*Calgary's*, 2008; Y-Foundation, 2017). Both cities localized their HF efforts to alleviate the unique challenges of specific subpopulations, with Calgary tailoring programs to youth and Indigenous homelessness (Turner, 2018a), and Helsinki catering to groups like refugees and women (Pleace, 2017).

Given the lessons learned in these three cities about successfully implementing HF, communities need to adopt HF from the ground-up, giving localities enough flexibility to provide services in a manner that meets the needs of their specific demographics.

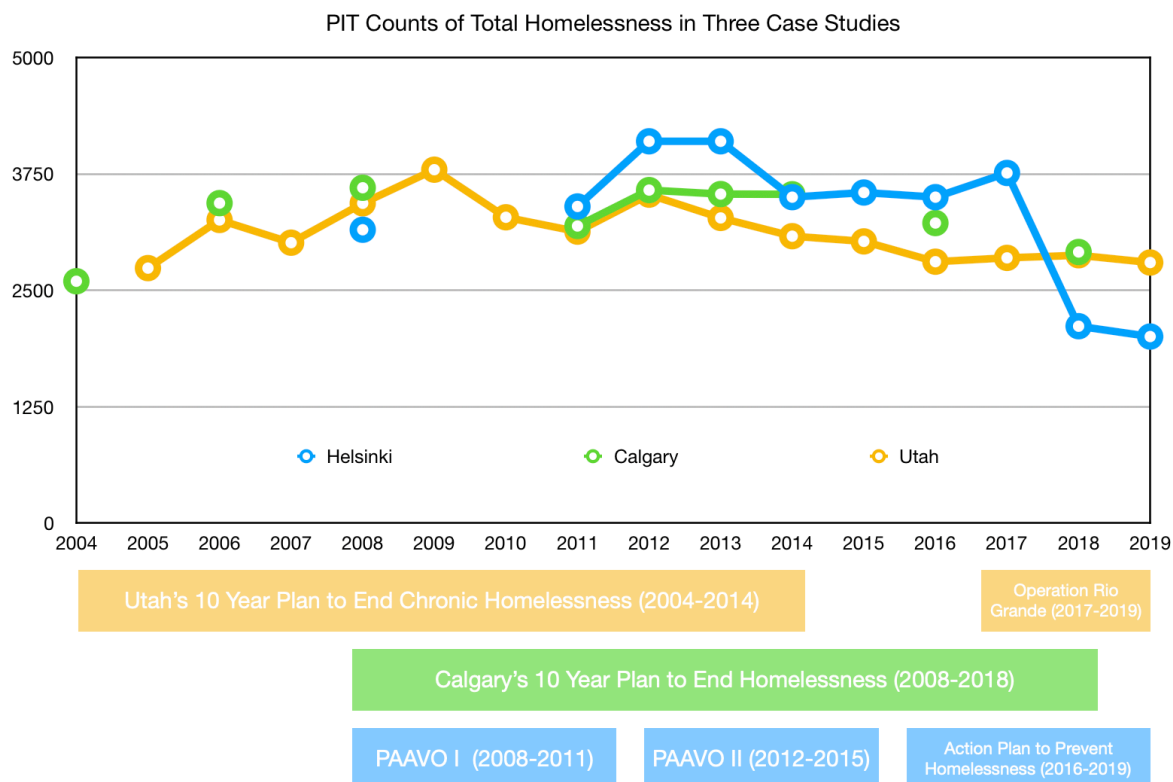
Outer Setting

While the intervention itself is vital to reducing homelessness, long-term plans will get nowhere without an environment conducive to change. HF's "Outer Setting" includes the economic, political, and social context within which it resides (Damschroder et al., 2009). This section will focus on three subcomponents: homeless population size, supportive government policies/political will, and cultural values.

The three cities each introduced their plans at a time when their homeless populations were large enough to be visible and incite action, but not so massive as to make progress appear hopeless. In 2005, the Utah homelessness point-in-time (PIT) count was 2,738 individuals or 0.11% of its overall population (*State*, 2019; "QuickFacts," 2019).¹ The numbers for Calgary and Helsinki in 2008 were similar: 3,601 people or 0.35% of Calgary's population (Turner, 2018b; "Calgary's," 2020), and 3,150 or 0.55% of Helsinki's population (Kaakinen, 2012; "Population," 2019).² Each city had an acute but manageable need, allowing policymakers to successfully introduce the evidence-backed HF approach.

¹ Data was not available which would provide the percentage of homelessness experienced in SLC in 2009, but it could not have been more than the total number of 3,795 individuals.

² These percentages represent the portion of individuals who were counted as homeless on a single night, so actual annual numbers of homelessness are higher.



Graph displaying the PIT counts of total homelessness from 2004-2019 for all three case studies. The rectangles below the graph show which plan the city was operating under during that time. Data was not available for some years in Calgary and Helsinki (Reports on, 2013-2020; Turner, 2018b; State, 2019)

To perpetuate its HF intervention, each city required supportive government policies, especially financially. Utah provides SLC with extensive funding to execute statewide and local plans (*State Homeless*, 2019), and the city itself established *Funding Our Future* – a sales tax supporting affordable housing initiatives (*Annual*, 2019). Similarly, between 2008 and 2019, Calgary’s efforts received around \$524.7M from the city, provincial, and federal governments (Turner, 2018b, pg. 75), while the Finnish government provided €342.6M, with a majority going to Helsinki (Kaakinen, 2012; Karppinen, 2014; *Action*, 2016). Governments also wisely allowed flexibility in how the money was spent. For example, Alberta permitted localities (Turner, 2018a, pg. 16) to decide how to spend funding and Utah empowered LHCCs, including

SLC's, to prioritize spending based on the community's reality (*Homelessness*, 2020). Sufficient and flexible financial support is key to implementing HF successfully.

Political will serves as another powerful tool for facilitating – or inhibiting – HF implementations. SLC exemplifies this reality as it was the political and social vigor fueled by Pendleton's efforts in 2004 that sparked the shift to HF. Recently, however, political will has pushed against HF through a 3-year plan called Operation Rio Grande. Harking back to the TF days, this Operation did not prioritize housing and instead led to the arrests of homeless individuals, who were then given the option to either serve time or receive substance use treatment ("Operation," 2019; Jessica Waters Interview). Although some individuals did appreciate the mandatory treatment aspect, service providers within SLC said "As far as the human element of it, it wasn't a successful mission" (Melissa Broderick Interview) and "it was not from a HF perspective whatsoever" (Jessica Waters Interview).

In 2019, this Operation ended with the closure of The Road Home's shelter and the creation of three smaller "Homeless Resource Centers" which together possess only 64% of the bed capacity as the original shelter (Rodgers & Stevens, 2019). With this "self-created" capacity issue (Taylor Stevens Interview), Utah has been forced to shift funding away from creating supportive housing and towards emergency shelters, an outcome that Pendleton's 10 Year Plan specifically sought to avoid (Stevens, 2020). These recent blunders, worsened by COVID-19, will most likely cause SLC to inadequately fund the affordable housing initiatives prioritized within its recent Consolidated Plan (*Salt*, 2019).

Despite these setbacks, SLC is unlikely to drift too far from HF due to its cultural values. Within SLC, there exists a strong sense of obligation to help the homeless with a public poll finding that the residents' top priorities include funding homeless services (*Salt*, 2019, pg. 43).

One reason for this is the prevalence of the Mormon Church which, in addition to donating \$52M to the homeless sector from 2007-2017 (“Responding,” 2017; “LDS,” 2017), also released an official statement that one’s “response to those in need defines us as individuals and community” (“Responding,” 2017). With 90% of Utah’s state legislature (Davidson, 2017) and 49% of Salt Lake County’s population identifying as members of the Church (Canham, 2018), this outspoken support for the homeless helps drive cohesive action amongst policymakers and the public (Sam Tsemberis Interview).

In addition to religious convictions, business-oriented values and rights-based philosophies can also increase HF buy-in. Within Calgary, according to Nick Falvo (former Director of Research and Data at Calgary Homeless Foundation), the prominence of the oil and gas sector gives “Calgary’s nonprofit [sector] a very corporate mindset” (Nick Falvo Interview). This lends itself well to HF, which is known for its cost-savings (Culhane et al., 2002). Within Helsinki, a rights-based mindset is more prominent as Finland’s Constitution commits its government to promoting everyone’s right to housing (Y-Foundation, 2017, pg. 21). As Nicholas Pleace (leading homelessness researcher) states, “If you wanted to kind of crudely characterize Finnish homelessness policy, it's kind of posited on the basis that it's our fault. Not the fault of the individual” (Nicholas Pleace Interview).

Cultural and social values – whether the product of religion, corporations, or constitutional commitments – help ground these cities in their HF approach and retain its main philosophy: everyone should have access to housing with no preconditions.

Process of Implementation

While this domain encompasses many aspects of the implementation process of HF (Damschroder et al., 2009), I will discuss only engagement of individuals with lived experiences and evaluation of progress as relevant, influential factors across all three cities.

Individuals who have lived (or are living) in a state of homelessness must be included in the creation and execution of HF programming to preserve its client-centric focus. In SLC, nonprofits such as The Road Home (“Peer,” 2020) and Volunteers of America (“Certified Peer,” n.d.) have paid positions for “Peer Support Workers” who help and advise those entering housing. Within Calgary, the Client Action Committee of individuals with lived experiences created the *Homeless Charter of Rights* and currently serves as homeless sector consultants (Turner, 2018b, pg. 27). Of the three cities, Helsinki certainly prioritizes “experts by experience” the most, through positions as steering committee members of PAAVO I and II, Peer Support Workers, trained professionals in nonprofits, and program representatives (Y-Foundation, 2017, pgs. 78-79). Helsinki highlights active participation of these experts – rather than symbolic roles (“Project,” 2014) – leading to HF plans molded from the perspective of those they are crafted to serve.

Perhaps most significant to sustaining any publicly funded initiative is evidence that the strategy is effective. HF, with its emphasis on housing retention and cost-savings outcomes, is well-suited for thorough, data-driven evaluation. While all three cities conduct annual PIT counts of the homeless population, Calgary stands out for its data-collection techniques as it also developed its own Homeless Management Information System (HMIS), “Key Performance Indicators” (Turner, 2018b, pg. 48) and a “Continuous Learning & Evaluation Framework”

(*Bridging*, 2020, pg. 16). In 2018, Calgary gathered city-wide feedback and thoroughly evaluated its 10 Year Plan to help craft its current strategies (Turner, 2018a).

Helsinki and SLC, however, can improve their evaluation methods. Pleace et al. (2015) recommended that Finland establish an HMIS to accumulate longitudinal data and track individual service-usage (pgs. 23-34). Although SLC utilizes an HMIS, it does not have a great track record with producing straight-forward data on its 10 Year Plan's outcomes. As previously noted, newspaper headlines erroneously claimed that Utah eliminated its chronically homeless population at the end of its Plan in 2014 (McCoy, 2015). These misrepresentations were due, in part, to Utah's changing definitions of who was counted as "chronically homeless" (*A Performance*, 2018, pgs. 21-22). Even today, this "skewed perception" lingers, with people often thinking "Utah solved homelessness...Utah knows how to do it" (Jessica Waters Interview).

Misleadingly encouraging data can cause the public to overestimate the effectiveness of HF as an all-encompassing solution to homelessness. When reality reveals that homelessness persists, it may lead people to question the value of HF-based strategies (Benjamin Henwood Interview). In the US, there have been recent calls to return to TF, with President Trump's newly appointed head of the US Interagency Council on Homelessness saying "I believe in Housing Fourth" (Walker, 2019) and the Administration's 2019 homelessness report encouraging a return to stricter requirements (such as sobriety treatment) after individuals are housed (*The State*, 2019, pg. 33). While it is unlikely that a return to TF is needed, something more than HF alone is required. "Ideally," as Stephen Gaetz, the director of the Homeless Hub states, "you have to recognize that as great as Housing First is, it's not enough. It's not sufficient. It's a key piece of the puzzle, but don't oversell (it)" (Stephen Gaetz Interview).

Findings Part II: Homelessness Prevention

On the edge of homelessness research are advocates of prevention-centered approaches. Homelessness prevention policies are diverse, but they share an underlying goal to stop someone's homelessness before it begins or immediately after it has occurred – unlike HF, which intervenes only after someone has become homeless, and usually not until they can be classified as “chronically homeless.”³ Logically, HF alone cannot solve homelessness as it only serves as a back door exit to housing rather than a front door closure to losing one's home in the first place. As Stephen Gaetz stated in our interview:

Without focusing on prevention, we are investing in the destruction of human lives...We're not asking the question, what would it take to make you not homeless right now? Can we help fix that thing? No, it's intake into the system and then you're told to sit and wait until you've been homeless a long time and you're really sick. And then you might be prioritized for housing.

In addition to Gaetz's profound, yet straight-forward, justification for homelessness prevention, it can also be supported from health, financial, and housing need perspectives. Healthwise, homelessness produces higher risks of premature death, serious diseases, and disabilities (Hwang, 2001). Therefore, it is physically cruel to not prevent someone from entering this state of heightened risk and worsened health (Stephen Gaetz Interview). It is also expensive, as homeless individuals frequently use hospitals and other costly public services. Pleace & Culhane (2016) have demonstrated that prevention saves money, specifically €9,266 per year per person, or over €796,000 for the 86-person population they studied. In terms of reducing housing need, Fowler et al. (2019) concluded that a “5% improvement in prevention generates a similar

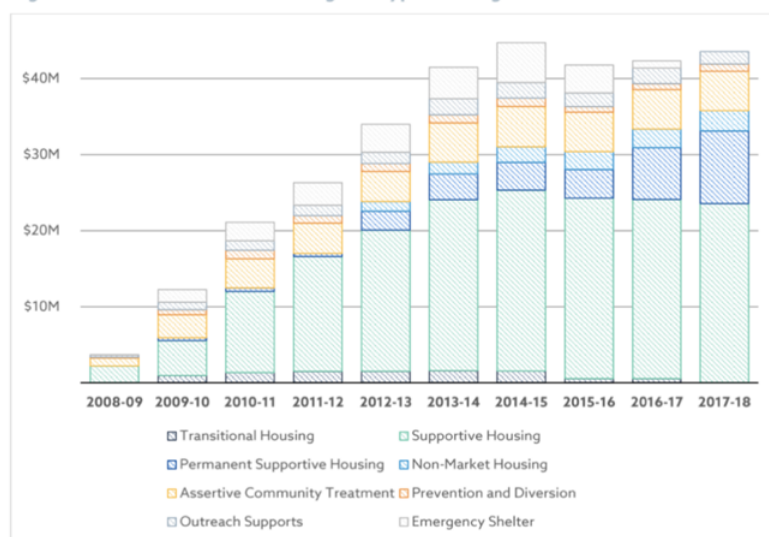
³ In the US, chronic homelessness occurs after 90 days of consecutive homelessness or 4 episodes of homelessness over three years (*Homeless Emergency*, 2015).

decrease on total need for housing as a 50% improvement in HF adaptations,” supporting suspicions that HF investments are not always as effective as those in prevention (pg. 478).

However, Fowler et al. (2019) also found that the best outcome for reducing homelessness is a combination of both HF and prevention. Communities need to focus on how to most effectively balance their resources between the two. One challenge in doing so is understanding what efforts count as “prevention.” Within the Canadian Alternative Framework for Preventative Services, there are five types of prevention: structural prevention, systems prevention, early prevention, eviction prevention, and housing stability. Prevention can range from upstream efforts to increase affordable housing to downstream initiatives such as emergency rent payments to stop eviction (Gaetz & Dej, 2017).

In the three case studies, there exist disparities between what each states as a priority and what it funds most. Although Utah’s 5-Year Strategic Plan sets a goal of reducing the number of “first-time individuals who experience homelessness” (*The State of Utah*, 2019, pg. 4), its prevention funding has risen from 0% of annual homeless spending (*FY19*, 2018) to 1.7% in the last four years (*FY21*, 2020). Furthermore, rapid re-housing beds (those allocated to end someone’s homelessness immediately after it begins) lag far behind the number of emergency shelter and permanent supportive housing beds (that is, HF beds; *State of Homelessness*, 2020). In Calgary, prevention funding is similarly close to nonexistent. Despite ambitious 2015-2018 goals to spend \$158.7M on prevention efforts (*Calgary’s*, 2015, pg. 48), Calgary’s “Prevention and Diversion” received a consistently small portion of funding throughout the plan and “Non-Market Housing” received less than “Supportive Housing” (Turner, 2018b, pg. 77).

Figure 24: Investment Dollars: Program Type Funding Allocations*



Calgary's funding allocation to different programs throughout its 10 Year Plan. The light blue and orange rectangles represent "Non-Market Housing" and "Prevention and Diversion" respectively. (Turner, 2018b, pg. 77)

Finland, on the other hand, has made its prevention priorities a reality with its most recent national plan – *Action Plan for Preventing Homelessness* – allocating €78M over three years (Action, 2016, pg. 4). Most of this funding went towards building and sustaining affordable housing as well as expanding “housing guidance” services (pg. 7). Because Helsinki already possesses systematic homelessness prevention through its universal social welfare policies (e.g. “housing allowance” entitlements given to low-income individuals; Y-Foundation, 2017, pg. 65), there are many fewer people at risk of homelessness than in Calgary or SLC (Nicholas Pleace Interview). Nevertheless, Helsinki funnels any cost-savings yielded from prevention back into the homeless sector (Pleace, 2017, pg. 103).

While SLC and Calgary both lag behind Helsinki's financial commitments to prevention, they too possess promising programs. The SLC Police Department includes the Community Connections Center (CCC) where social workers co-respond to 911 calls in order to connect homeless people to housing and social services (Jessica Waters Interview). Additionally, SLC

has a Homeless Court that provides homeless defendants with opportunities to be reintegrated into society and receive community service and treatment orders rather than serve time in jail (Hennick, 2017). By helping individuals get housed or access to services, both CCC and Homeless Court act as barriers between the criminal justice system and a state of homelessness. In Calgary, cross-sectorial collaborations like the Community Housing Affordability Collective and Collaborative for Health to Home connect multi-sector representatives to co-address the lack of affordable housing and sufficient health care for those at-risk of homelessness (Turner, 2018b, pg. 85). Increased financial backing would allow Calgary and SLC to expand these initiatives to move towards Helsinki's prevention standards.

Discussion & Conclusion

Moving forward, these three cities should strive for a greater balance between HF and prevention, with an emphasis on improving the latter. Helsinki, while on track with both its prevention and HF interventions, should improve its data collection methods which would help display the effectiveness of its costly initiatives (Pleace et al., 2017). As a city nearing functional zero homelessness (Nicholas Pleace Interview), Helsinki should continue to serve as a role model for international communities. SLC and Calgary, with governments less inclined to increase welfare payments, appear unprepared to instate the drastic upstream shift of providing a general housing allowance like Helsinki, but they can still adopt more modest programs, such as "housing guidance" services. Additionally, SLC and Calgary should increase the universality of their prevention programs; rather than delaying help until someone shows up at a shelter, they can connect individuals to services at the first sign of risk (Nicholas Pleace Interview). Doing so will require greater research, cross-sectorial collaboration, and "zero discharge policies" (in

which individuals are never released from the government's care into a state of homelessness; *Calgary's*, 2008, pg. 8). Furthermore, SLC should continue to move away from plans like Operation Rio Grande and those which reintroduce the misguided TF approach, and instead funnel valuable resources into homelessness prevention. Across all three cities, affordable housing needs to be increased – an issue wrought with vast complexities beyond the scope of this paper. Future research is needed to understand which of the above prevention strategies are most effective and realistic for reducing homelessness. Until this is understood, and preventative efforts are expanded, the rate of individuals entering homelessness will continue to surpass the rate at which HF and other interventions can take them out.

As Dr. Sam Tsemberis, the founder of the original HF program in the U.S., says: “We’re really just standing on the banks of a river, watching the flow.” Now is the time, with COVID-19 acutely exposing the harms of being without a safe place to call “home,” to stop watching and dam the flow into homelessness before it can begin.

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