Best Practice Guideline: How to Build Supportive Housing in Canada
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Creating Permanent Supportive Housing

This best practice guideline is intended to help all individuals and organizations who are involved in supportive housing and related systems/services to develop effective, permanent supportive housing. Based on a research study aiming to understand how to create supportive housing to meet the needs of Canada’s most vulnerable people, this best practice guideline provides depth and detail from a single case study analysis of a successful permanent housing site in London, Ontario, Canada.

Supportive housing can be delivered through a variety of different approaches (Government of Ontario, 2017). We encourage those using this best practice guideline to consider necessary adaptations for their context and service delivery. Best practice recommendations, as well as grey and scholarly literature were reviewed during the development of this best practice guideline to recognize case specific differences. It is our hope that improved resident and system outcomes result from this work.
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Canadian Definition of Homelessness (Gaetz et al., 2012, p. 1): Homelessness describes the situation of an individual, family or community without stable, safe, permanent, appropriate housing, or the immediate prospect, means and ability of acquiring it. It is the result of systemic or societal barriers, a lack of affordable and appropriate housing, the individual/household’s financial, mental, cognitive, behavioural, or physical challenges, and/or racism and discrimination. Homelessness describes a range of housing and shelter circumstances and can include being, 1) unsheltered, 2) emergency sheltered, 3) provisionally accommodated, and/or 4) at risk of homelessness.

Housing First (Government of Canada, 2019): Housing First involves moving people experiencing homelessness—particularly people experiencing chronic homelessness—rapidly from the street or emergency shelters into stable and long-term housing with supports. Principles of Housing First include: 1) rapid housing with supports, 2) offering clients’ choice in housing, 3) separating housing provision from other services, 4) providing tenancy rights and responsibilities, 5) integrating housing into the community, and 6) strength based and promoting self-sufficiency.


Social inclusion: A situation in which individuals have the resources and opportunities to be involved in society to an extent that is satisfactory to them (Canadian Mortgage and Housing Corporation [CMHC], 2018). It is the process of improving the terms of participation in society, particularly for those who are disadvantaged by enhancing opportunities, access to resources, voice, and respect for rights (United Nations, 2016).

Supportive housing: Supportive housing provides a physical environment that is specifically designed to be safe, secure, enabling, and home-like, with support services such as social services, provision of meals, housekeeping and social and recreational activities, to maximize residents’ independence, privacy, and dignity (CMHC, 2018).
Introduction to Permanent Supportive Housing

For those who struggle with housing stability, including those who experience homelessness, life histories are complex and unique. However, consistent within research on ending homelessness is the idea that many individuals or families require some level of support services to achieve housing stability. This may be supports in relation to physical or mental health, substance use, trauma, culture, or activities of daily living.

This need for support explains in part the successes seen through the delivery of Housing First. With individualized supports being a key principle in the model, Housing First programs see higher levels of housing stability than usual care. However, Housing First programs are stretched for resources, and in particular those who require on-site health and social support may need additional services beyond what a Housing First program offers. Secondly, ‘integrating housing into the community’ has received the least consideration of Housing First principles, as Housing First program metrics tend to focus on rates of housing or re-housing. At times, housing stability workers are stretched beyond the ability to do significant community integration work other than usual practices of referrals to other community resources. As such, successful supportive housing requires a shared responsibility among partners, such as community agencies, residents of supportive housing, housing providers, and provincial ministries (Government of Ontario, 2017).

In addition to learning about this particular supportive housing site’s success, the research that informed this best practice guideline is exploring two key gaps in our knowledge around housing stability:

- How on-site health services impact housing stability for persons recently re-housed?
- What community integration really looks like in the lives of vulnerable persons living in supportive housing?

Through this research work we hope to achieve several objectives, including:

- Creating a body of work that adds to our understanding of best practices in permanent supportive housing;

- Assessing the impact of a significant injection of housing and community support resources in reducing chronic homelessness and the lived experience of individuals accessing such housing; and

- Determining future opportunities for reducing chronic homelessness in Canada through creation of high-quality affordable housing and supports.

This research work will continue to produce a variety of resources to better understand supportive housing.

More project tools and details are available at:

https://www.abeoudshoor.com/making-supportive-housing-work-for-the-most-vulnerable/.
Case Study: Description of Indwell & a Supportive Housing Site– Woodfield Gate

Indwell

Indwell is a non-profit, charitable organization based in Ontario. Their Woodfield Gate program has been studied as a National Housing Strategy Demonstration Initiative and is now the subject of our broader study exploring multiple facets of its operations including management, structure, service satisfaction, use of partnerships to create affordable housing, and community engagement. The mission of Indwell is to create affordable housing communities that support people seeking health, wellness, and belonging. Since 1974, Indwell has distinguished itself in offering supportive housing that builds independence and ends housing instability for individuals with disabilities including mental health and addiction. In 2000, the organization embarked on a program of rapid expansion, growing from an organization that served a maximum of 7 individuals to a current capacity of serving more than 700 people, across 3 municipalities.

According to their mission and vision, Indwell is committed to matching quality, affordable housing environments with a full range of high quality, professional services that support tenants in maintaining housing and experiencing health. They exist to serve some of the most marginalized Canadians and their growth is reflective of their vision: Hope and Homes for All.

700+ Tenants have affordable supportive homes
100 New homes opened in the last year
430+ Units under construction or pre-development

Image: https://indwell.ca/
Indwell has implemented a unique model of permanent supported housing that includes an interdisciplinary professional team in close proximity to tenants. As an approach, the practice has roots in the Housing First and Assertive Community Treatment evidence. The key difference is implementing a full array of mental health, addiction and housing supports in dedicated and purpose-designed housing. Since implementation in 2016, Indwells enhanced support housing model is emerging as a promising practice:

- It creates a unique opportunity for marginalized Canadians to experience independent housing perhaps for the first time as they emerge from institutions, absolute homelessness, incarceration or otherwise precarious housing.
- It provides immediate access to supportive and preventative health and housing services, creating opportunities for individuals at high risk for homelessness or health crises that threaten housing stability to benefit from early interventions that produce crisis avoidance and healthier outcomes.
- It’s a practice that emerges from a place of dignity; the means to affirm the worth of all Canadians is to embrace the notion that the most vulnerable ought to have access to high quality housing and supports.

**Woodfield Gate**

Woodfield Gate is Indwells first permanent supportive housing building in London, Ontario and is located in the downtown core of the mid-size urban city located in Southwestern, Ontario. Woodfield Gate opened in 2019 and supports over 67 tenants in one-bedroom apartments. Many of the tenants arrived to Indwell from hospital, the justice system, shelter services, or other forms of precarious housing.

Woodfield Gate offers an on-site interdisciplinary staff team with blended, wrap around supports such as nursing, mental health and addiction, food security, and housing support (including community activities). Staff have daytime and evening hours with 24/7 on-call support.
This project follows a community-based participatory action research (CBPAR) (Minkler & Wallerstein, 2009) and case study (Merriam, 2009) methodology. Western researchers, Indwell staff, and interested tenants are working collaboratively through the project. The data used to inform this Best Practice Guideline is derived from qualitative interview data with Indwell residents (n = 20), staff (n = 4), and leaders (n = 4) during the fourth quarter of 2020. The ‘case’ in this study is a single case of the Woodfield Gate site and the analysis focus is deep immersion in understanding this site in terms of processes, experiences, and culture.

To analyze our data, we utilized interpretive description (Thorne, 2016) which is a method designed to create understanding specific to the needs of a discipline. In this case, the disciplinary need being addressed is that of understanding how supportive housing works. Due to pandemic restrictions, there was limited ability to engage with Woodfield Gate neighbours and community stakeholders, however this will be a key focus of upcoming data collection.

Ethics approval was granted through Western University’s Research Ethics Board. Informed consent was obtained from all participants. All participants have been assured anonymity and pseudonyms are used for participant quotes.
Recommendations: How to Build Supportive Housing in Canada

1. Employ a values based approach
2. Have engaged, knowledgable, dedicated, hopeful and flexible leadership
3. Navigate complex funding
4. Focus on housing affordability
5. Involve community participation in project development
6. Support tenancy
7. Create healthy living environments
8. Provide sustainable and professional services
9. Consistent innovation
1. Employing a Values Based Approach

A values-based approach to program and project development that is focused on affirming the dignity of its tenants supports best affordable housing practice. This has a tremendous impact on enlisting buy-in from future tenants, neighbours, funders, policy makers, and system leaders among others.

"Something changes when you see people as humans, rather than something laying on the side of the street... I think that’s actually the starting point... people’s humanity, and worth, and value, and some leaders, some communities get this. ...seeing people as more than just their economic value is where this starts."

-Malek, Indwell leader

Tenants and neighbours realize the value of supportive housing when they connect to the greater vision of what a healthy community looks and feels like—shifting beyond measures of charity and keeping someone safe for more than one night. This involves upstream thinking and adopting values that are centered on the dignity and worth of each human being. When community members think about behaviours that disrupt their communities (e.g., property crime), measures like permanent supportive housing are a part of helping create conditions in which people no longer need to engage in these mechanisms of survival. Permanent supportive housing helps build community, networks, and belonging for those who live there. Making these positive and inclusive values explicit helps organizations to garner broad community support.

Further, a value centered analysis of the current state of homelessness also supports organizations in filling in the gaps of system failures. For example, stepping in to be a permanent home for people who would otherwise be transitioned into homelessness, such as through discharge from government systems including hospitals and incarceration. Examining best practices, theories, and models under a lens of compassion, equity, and dignity for all can prepare an organization for working with Canada’s most vulnerable. Further, when the work of supportive housing becomes tiresome, connecting to the value laden “why” for the work continues to influence and motivate staff.

"I think... the recognition of quality of life for individuals, allowing individuals to define what quality of life meant for them, and working with each person through that lens... This is something that Indwell really valued. Dignity for all and that everything is based upon relationship."

-Joan, Indwell leader
2. Engaged, Knowledgable, Dedicated, Hopeful, and Flexible Leadership

The case in this project, Indwell, employed diverse leaders with professional backgrounds ranging from health and social services to history majors. Many of the leaders have spent a lot of time working alongside those experiencing mental health, substance use, or housing issues. This experience informed and inspires leadership to focus intensely on the mission of creating supportive housing and in turn, the experience of housing development has exposed leadership to the systemic barriers and challenges to overcome in achieving the mission. Hands-on knowledge, a solution focus and historical context (e.g., witnessing the shift towards deinstitutionalization in health care) are key elements leaders can bring to decision making and advocacy tables.

Organizational structure also plays a significant role. Indwell operates in such a way that there remains a strong and encouraged connection between those who have direct tenant relations and those who facilitate future program designs. This style of leadership supports the ongoing evolution of establishing new programs that are relevant to both community and individual needs.

“That’s really where my passion got aroused, because it was just appalling that we were satisfied as a community that folks were receiving adequate housing and care when they clearly were not.” – Joan, Indwell leader

Many of the Indwell leaders continue to be actively engaged in and dedicated to improving and reforming social conditions for those who are disadvantaged. This includes involvement in research, advocacy, and policy and program development. Allowing leadership the space to work beyond the day-to-day management tasks supports both higher impact for the community as well as making the work continually engaging and rewarding. The focus on achieving tangible change further drives leader engagement.

“Interestingly enough, it took 10 years of solid work, up until 2016, to convince any health planner policy decision maker that investment in a supportive housing development and builder and operator was worthwhile.”

– Thomas, Indwell leader
Flexibility and being responsive to evolving needs are key traits prioritized in an effective leadership team. Identifying systemic and structural gaps, projecting project-based risks/issues, and pivoting to the needs of residents, are all examples of why a static approach to the work of permanent supportive housing development will not work.

"Indwell began a program of intensive development that really hasn’t stopped since [2004], expanding to a different community, Woodstock, but also expanding the range of options that we were providing, really constituted a shift in our work, where the organization was originally founded as an alternative for folks leaving psychiatric hospital to get independent living training and moving on to permanent housing from there. Because the permanent housing didn’t exist, we actually shifted to- let’s just provide permanent housing and supports and let’s just go on this program development of actual housing stock."

-Thomas, Indwell leader

Attention to a diverse, responsive, and motivated Board of Directors is also vital for making supportive housing projects work. The Board of Directors in this case analysis served key roles in developing community partnerships, securing funding, strategic planning, and determining operations that meet community needs. It is recommended that permanent supportive housing providers recruit and engage a Board of Directors early on to provide guidance through all phases of planning, implementation, evaluation, and quality improvement.
3. Navigating Complex Funding

Commitment to Solutions for Unique Challenges

Because traditional funding does not currently exist or prioritize permanent supportive housing (i.e., most housing funding covers housing affordability but not staffing for supports), in our case study, Indwell leaders had to creatively approach multiple funders to reach their end goal: deeply affordable, permanent, supportive housing. Historically speaking, this was made possible by collecting failure data from unsuccessful services they provided (e.g., group home settings), identifying gaps in service delivery (e.g., supportive housing for complex/chronic homelessness with mental health/substance use needs), and including the voice of service users. Capital funding to buy Indwells’ first permanent housing building came from the local municipality and a local hospital. One notable barrier has been the longstanding division between housing and health care budgets; with models having overlooked intersecting health and housing needs. Further, provincial health funding cycles clashing with necessary time for construction cause inherent limitations and risks to new project development, causing Indwell to have to purchase/build purpose designed rental housing without guaranteed operational funds. The work around for Indwell to develop high support programs has been to partner with large health-based organizations, who may provide capital or operating support, or any sufficient guarantees often required to unlock public funding.

"It’s always been an uphill battle to get attention to this idea [permanent supportive housing]. The breakthrough came around 2014, 2015, and it meant partnering with a local hospital, St. Joe’s in Hamilton. Simply saying, we bought a building." - Thomas, Indwell leader

"We have typically, almost always, had to make a calculated risk on the financial investment in a building or in a property without any surety of success of the program model or funding." - Aiden, Indwell leader

Success in obtaining healthcare operating dollars has included demonstrating positive outcomes that include better financial responsibility for public funds than long-term hospitalization.
With promising results from Indwells’ first permanent supportive housing site, Indwell has grown their services in other nearby cities, including London’s Woodfield Gate. A key element to succeed in this growth has been the ability to differentiate permanent supportive housing success from other models. To do so, Indwell has been dedicated to ongoing service evaluation and using their program data to support their case.

“We went from having the phone hung up on us, to, “how soon can you build?” in a very, very short period of time.” – Thomas, Indwell leader

As Indwell continues to grow, leaders share meaningful advice that has contributed to funding success:

- Willingness to take risks and layer funding sources (including private investors) to overcome provincial funding gaps and other funding barriers
- Tailoring their organizational story (business case) to their various audiences
- Exploring, identifying, and building relationships with decision makers
- Valuing networking opportunities to build alliances
- Finding a variety of audiences with whom to share their success stories
- Staying connected to/focused on their organization’s mission, vision, and values
4. Housing Affordability

The mission of our research case, Indwell, is to create permanent supportive housing that is affordable. Ensuring that rent is affordable for those on social assistance (e.g., Ontario Disability Support Program [ODSP]) makes a successful exit from homelessness, complex housing situations, or an institution (e.g., hospital, jail) possible.

"ODSP barely covers rent in most communities now, so the number one barrier is inadequate income." - Aiden, Indwell leader

Given the desperate state of housing costs, affordability alone was a major appeal to many of the Indwell tenants:

“Well [I was] looking for accommodations connected to my disability, so I came up with a list of accommodations that support me in housing and financial support is one of the pillars. So, I’m on ODSP and my ODSP there’s only so much for housing and Indwell accommodates that and provides housing for the amount that I get off ODSP... Then I think they match the rest of the amount for the apartment, so there’s a donation or a charitable donation given to the cost of the apartment. So, I’m able to afford it, so affordable is primary.”

- Jane, Woodfield Gate tenant

Indwell makes permanent supportive housing affordable with the use of mixed funding sources from donors, investors, health funds, and housing dollars at a municipal, provincial, and federal level. Although tenants rent is somewhat above the shelter allowance of monthly income programs (ODSP/Ontario Works), Indwell’s (rental) housing rates are set by balancing financial stability of the program while also providing tenants continued autonomy. The remainder of the ‘rent’ comes from various multiple sources of funding accessed by the housing provider such as government funding, community partners, and private donors. Rent is both affordable to tenants and helps to cover a portion of ongoing operational costs.

"An affordable rent. It’s huge, it’s huge. I means I can eat properly. And that affects my physical and mental health, so that is huge."

- Sameer, Woodfield Gate tenant
Notably, affordability does not have to come at the cost of quality as it typically happens with other rental units. In our research case, Indwell is able to offer a building with a quality of design and finishes equivalent to private sector rentals:

“The day I first moved in here, big apartment, it was my dream home because I never had an apartment like the one I got right now in my entire life. That’s the best one I had so far. And Indwell is very—it’s a beautiful building and a wonderful building, it’s a nice layout.” -Laura, Woodfield Gate tenant

Incorporating Passive House Standards when building permanent supportive housing is another opportunity to reduce energy costs and enhance affordability.

“The prevalent belief likely still remains that housing access is a service access issue. That if you roster an individual that is homeless, or in a hospital or whatever, with your ACT [Assertive Community Treatment] team, or intensive case management team and provide them with a worker with rent supp’s [supplements] then we can find housing and make it affordable, and you can provide support. That’s still the operating theory of the province of Ontario, even though we have demonstrated a lack of deeply affordable housing in the province... Vacancy rates in market rental housing are low everywhere, even if there is housing available, the process of monetization of housing over the last 5–6 years has destroyed any opportunity for sort of random access to market rate housing that people with disabilities can afford, or on OW [Ontario Works], can ever afford.” -Thomas, Indwell leader
5. Community Participation in Project Development

Connecting with the vision of the neighborhood and sharing that with partnering organizations and members of the community throughout all phases of the supportive housing design and implementation is important in early relationship building and buy-in. Networking (such as with key funders), sharing at public tables, and including narratives of successful housing tenancy also facilitate the community’s embrace:

"I know that when it comes to being invited to network tables, there’s always been an invitation, “you should be a part of this,” or, “you should join here.” So that’s been very welcoming. I think there’s been community members who have said we would really like for you to come and speak and share here so that people can learn about the good work that you’re doing. So, that’s been a very positive experience as well.” - Joan, Indwell leader

Leveraging community organizations and neighbours to be active partners through all phases of supportive housing design and implementation can also generate opportunities for community support. For example, at Woodfield Gate, community members provided support and volunteered time to furnish many of the apartments.

When met with community resistance, Indwell leaders in our case study chose to focus on achieving common goals and employing a value centered mindset. For example, the common goal of reducing visible homelessness in a neighbourhood can be achieved by inviting people to live healthily within it. Further, capitalizing on developing/converting housing that is typically not well liked to that which is new and visually appealing not only provides tenants with dignified housing, “Give people who need the most, the best” (Thomas, Indwell leader), but also helps renew neighbourhoods. New/renovated housing can also be purposefully designed to include commercial spaces which can provide economic opportunities for neighbourhoods.

"I attended a pre-pandemic town-hall meeting hosted by [Counsellor], and they were talking about the downtown core when Dundas Street was under construction and the impacts that was causing. I was very pleased to hear what seemed to be a resounding theme... [that] these individuals are a part of our community... And so, I think there are shifts happening in terms of supporting every individual.” - Joan, Indwell leader
6. Tenancy

Tenant Screening and Selection

- Clear identification of the roles of Indwell as the housing and service provider
- Clear identification of what is available to the tenant
- Early engagement with tenants on the culture of the building and what individuals can expect
- Engagement with potential applicants on two core thresholds for access: 1) the need for deep affordability and, 2) a desire to live in a supportive community and utilize the supports available
- Collaboration with existing supports (formal and informal) on individual needs and general interests

Tenancy Agreements

- Clear identification of the relationship between the tenant and Indwell
- Clear delineation of roles and responsibilities using formal agreements as the framework for discussion
- Emphasizing the value of rights, responsibilities, and relationship for both tenant and landlord (Rent Smart Education Education & Support Society, 2021)
**Eviction Prevention**

Eviction prevention is an important tenant of effective permanent supportive housing. Given the high support needs, limited incomes, lack of affordable housing, and often poor rental histories of tenants, eviction can be traumatizing, exacerbate health and social challenges, and contribute to chronic homelessness. Permanent supportive housing providers should carefully balance harm reduction principals and provide wrap around, individualized support to all tenants at risk of eviction: ultimately working in collaboration to resolve issues effecting tenancy. When it is not possible due to significant health and safety concerns, permanent supportive housing providers should work with community partners to facilitate supportive transfers to the best alternative opportunities for housing and support and consider maintaining a relationship with the resident for a future opportunity for tenancy (if appropriate).

**Tenant Rules & Managing Conflict**

Creating effective permanent supportive housing amidst a diverse population can be complex and challenging. Tenants with unique experiences may view policies and procedures differently, such as either empowering or disempowering. Examples of this may include building security and surveillance policies, such as building access, communal spaces, and guest rules. While for some these may offer safety, security, and autonomy, others may feel these are intrusive and interfere with social connections (Stahl et al., 2016). Therefore, effective supportive housing providers can work to include tenants in the design of such policies and minimize overly restrictive policies by promoting the development of personal, relational, and conflict resolution skills, and making neighbourly connections (Burgess et al., 2021).

At our case study site, Woodfield Gate, staff implement practices of conflict resolution and work collaboratively with/ empower residents to find solutions to their challenges. This is particularly important to respond to residents’ tension about mixed acuity levels, and who the space was for. Encouraging residents to see and respect their neighbours’ differences is an important part of building connections and establishing a community. Given that this remains an ongoing challenge, some permanent supportive housing providers may wish to consider how they approach mixed acuity levels and the individual needs of residents.
7. Creating Healthy Living Environments

To make supportive housing work, it must be a quality living experience and environment for residents. Healthy living environments in supportive housing are achieved by:

- Affordability and access to supports (including a balanced meal program, health care) help ensure that basic needs are met
- Combination of private living spaces and communal/congregate areas
- Accessible and appropriate location (i.e., neighbourhood safety, transportation, access to community services, opportunities for community integration)
- Supports that attend broadly to social determinants of health
- Promote empowerment and independence
- On-site support through daytime hours, and on call support available overnight
- Timely support, triaging concerns based on acuity
- Focus on early intervention and primary prevention
- Fostering opportunities (e.g., programming) for relationship development between tenants and between staff and tenants
- Shared community rules for tenants
- Policies and procedures that balance harm reduction principles (e.g., eviction prevention) and tenant safety (e.g., guest management, anti-discrimination)
- Opportunities for community participation and integration to promote social inclusion and reduce isolation
- Building design features such as:
  - The location of on-site amenities (e.g., laundry and computer rooms), as it is essential that these spaces are visible, well-lit, and inviting
  - Assurance of quality natural light in units and common spaces
  - Sense of security without feelings of institutionalization (e.g., secure main entrance through card-reading devices, video surveillance, secure locks to individual units

“Creating a situation of stability where people can focus on things other than, where am I going to live and what am I going to eat?” - Thomas, Indwell leader
"If there is a community program offered... is there a way that we can reach out and advocate for an affordable membership and participate with tenants in the program, so they get familiar with it? Tenants were wanting to volunteer, wanting to give back to the community. The community was voicing a need for a school nutrition program, so we were able to certify tenants in their food handlers and they made muffins that went to a local school... it feels so good to be able to contribute in this way... And so those are some of the ways that I see that working well in terms of integrating individuals... being a part of the broader community." -Joan, Indwell leader

Spaces that Reduce Social Isolation and Foster Community

Our research case, Indwell, incorporated natural light, gathering spaces, and community kitchen spaces to facilitate regular interaction between tenants. Through this approach, buildings cease to be "programs for vulnerable people" and become neighbourhoods; places where relationships can develop between people and communities of mutual support emerge.

Social isolation disproportionately affects individuals experiencing poverty and chronic illness. The experience of homelessness is a profoundly disconnecting experience. When more urgent needs are not preoccupying their time, staff can provide relational support and help residents get connected to one another by fostering conversation, encouraging involvement in programs, and seeking means of tenant connection. In addition to providing access to supports, supportive housing providers should be proactive in generating opportunities for tenants to emerge as members of a community. Belonging is represented by individuals who were homeless volunteering and participating in their neighborhood. This may include individuals who were institutionalized taking on community leadership roles and those that include paid employment.

"A big part of what we can do, is say, okay, "what are the big rocks we can help put in the bucket?" Stable and affordable housing, and a supportive community where we can reduce isolation, or the impacts of isolation." -Aiden, Indwell leader

"All of us need community, need belonging. And all of us have something to offer in addition to receive." -Malek, Indwell leader
Effective supportive housing providers can encourage and support tenants’ integration with community members and neighbours (e.g., involving each other, giving and receiving from one another), which includes community de-stigmatization and aiding tenants in realizing the socially protective behaviours they have built up over years of homelessness. Indwell has engaged in unique opportunities to help bridge the gap between tenants and their communities, such as taking advantage of opportunities available to all citizens. In particular, some tenants engaged in a community health initiative and were featured on billboards to promote early cancer screening. Therefore, effective supportive housing providers seek to create conditions where tenants gain exposure to their community and “fit in, in an unremarkable way” (Joan, Indwell leader).

"And just having like... just having friends in the building that we could kind of still self-isolate with or isolate with [Covid-19 pandemic reference], not in a perfect way, but in a, we still need, like I need to be around people for mental health. So, I don’t think I, unless I had Indwell and I had like community online, I don’t think I made, would’ve made it through the pandemic without like a hospitalisation."

-Serb, Woodfield Gate tenant

"We had a police officer come to provide a talk to our tenants on how to stay safe in your building. We had quite a few tenants show up. After that he told me, anytime we need them, give them a call."

-Breanna, Indwell staff

“What would it take for any Indwell program, anyone living in an Indwell program to be considered first as a neighbour, or somebody living in a neighbourhood, rather than a program participant.”  

-Thomas, Indwell leader


Programming

Key tenants of successful programming in permanent supportive housing include:

- Variety in programming (including educational, instructional, and recreational)
- Individualized opportunities that meet tenant goals
- Relevant, adaptable, and accessible (i.e., dates, times, locations)
- Elicit resident feedback and strive for quality improvement
- Promote health and well-being
- Generates supportive and healthy relationships

"I can tell you one neat thing, is that I really like here how they encourage residents to learn activities. Because I ran a journaling workshop, and I was not feeling that great mentally when I did it, but it was empowering to be given that opportunity to do that, and I did a lot of research preparing for it and it was well-received, and it was good for my self-esteem to do that, even though it was hard." - Jo, Woodfield Gate tenant

"Staff have worked hard at getting individuals connected virtually to various things and so there is a group operating right now hearing about how people are connecting. Those that don’t feel comfortable in a small group distancing right now are joining virtually from their apartment or wherever to participate in the program and I think that’s really neat." - Joan, Indwell leader
8. Sustainable and Professional Services

Despite challenges in obtaining funding for on-site professional supports, they are necessary for many who require daily services to support autonomy. Some of the key components of successful on-site professional services, include:

- Intentional, value centered hiring
- Sufficient funding for adequate staff to resident ratios
- Interdisciplinary team which contributes to a holistic and supportive approach to care
- Interdisciplinary team (See Appendix A: Role Descriptions of Indwell Team Members)
- Staff retention to promote trusting relationships
- Flexible, dynamic, and innovative in a new field- health supports within housing
- Skilled with the ability to work autonomously and as part of a team
- Individualized, tenant centered care that focuses on relationship development and tenant specific goals
- Engage in opportunities for volunteer/student placements

"People need an element of support throughout their life, particularly folks with serious and persistent mental illness, and those needs change. Most of our tenants live in low support, independent units, most are quite independent but there are periods where they need more intensive support, and we can intervene at those moments." - Malek, Indwell leader

"We know each other here right... if I see someone in the hall I can say, "Hey how are you today?" and then we can talk about it. Knowing their name, recognizing them, hearing them..." - Casey, Indwell staff member

"And like peer support is really good and really important, so I find that really helpful. And I was at first using the addiction support, but I've since like kind of moved on past that. So, just having kind of someone to go to when I [need to] -instead feeling like I had nobody has been really good, like just there being a person here throughout the day." - Jolie, Woodfield Gate tenant
9. Consistent Innovation

The role of evaluation in supporting ongoing investment in permanent supportive housing is critical. The majority of system-based indicators in the health and housing sector remain financial and statistical recording of service outputs with very little regular collection of meaningful data suggesting individual progress in health, wellness, and belonging. Replication of supportive housing on a scale that will fundamentally shift how health and housing services are accessed requires that models of practice clearly demonstrate tangible improvements in lived experience beyond “satisfaction.”

The full integration of health and housing services creates several opportunities to generate different understandings of what constitutes an effective practice:

- Integration with digital technologies that track individual use of health and social services over time
- Creation of valid and reliable measurements that focus on perceptions of housing, affordability, and access to service, in other words reliable measures of the social determinants of health
- Systems level measurements of the impact of supportive housing development, including an understanding of what impact creation of supportive housing with scale can have on access to shelters, emergency mental health care, residential addiction treatment and acute and tertiary care

"I love the creativity of seeing what doesn’t exist and trying to make it happen. Finding the unlikely allies, the resources that aren’t automatically fitting together and saying, ahh, that’s the puzzle that fits here." – Aiden, Indwell leader

“We all want to make a difference, we want to feel like our life has purpose, and that our work is making a difference. We want to be a part of a story that while we’re faith based, and a lot of Christian organizations have a bad wrap and for good reason, focused on who they’re going to keep out rather than extending the tent, and we’re pretty clear on that is, that if our motivation and our goal and objective is the same, come join the movement... let’s find out what’s mutual and grow.” – Malek, Indwell leader
Best Practice Overview

Housing is a human right, social determinant of health, and anchor for personal stability (Suttor, 2015). For some of Canada's most vulnerable, housing stability is not achieved without on-site support. Utilizing best practices to create permanent, supportive housing helps to address the call for unique and comprehensive approaches to ending homelessness.

<table>
<thead>
<tr>
<th>What: Overcoming barriers:</th>
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<tbody>
<tr>
<td>- Navigate complex funding</td>
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<tr>
<td>- Create affordable housing</td>
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<tr>
<td>- Consistent innovation</td>
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<tr>
<th>Who: Right people and the right partners:</th>
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<tbody>
<tr>
<td>- Dedicated direct support staff &amp; leadership</td>
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<td>- Community involvement</td>
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<td>- Values based approach</td>
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<tr>
<th>Why: Ending homelessness for Canada's most vulnerable:</th>
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<tbody>
<tr>
<td>- Support tenancy</td>
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<tr>
<td>- Healthy living environments</td>
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<tr>
<td>- Professional, on-site services</td>
</tr>
</tbody>
</table>

"We end homelessness, one person at a time."

- Thomas, Indwell leader
References


Appendix A

Role Descriptions of Indwell Team Members

The following table highlights role descriptions of interdisciplinary team members in Indwells permanent supportive housing.

<table>
<thead>
<tr>
<th>Registered Nurse</th>
<th>Housing Support Worker</th>
<th>Addiction Worker</th>
<th>Food Security Supports</th>
<th>Psychosocial Support</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Therapeutic relationships</td>
<td>• Therapeutic relationships</td>
<td>• Therapeutic relationships</td>
<td>• Therapeutic relationships</td>
<td>• Therapeutic relationships</td>
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<tr>
<td>• Health education</td>
<td>• Tenancy support: Unit management</td>
<td>• Motivational interviewing</td>
<td>• Wellness recovery action planning</td>
<td></td>
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<tr>
<td>• Mental health and addiction</td>
<td>• Integrated pest management</td>
<td>• Mental health assessment</td>
<td>• Goal development</td>
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<tr>
<td>• assessment</td>
<td>• Crisis prevention</td>
<td>• Crisis prevention</td>
<td>• Supporting personal growth</td>
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<tr>
<td>• Crisis prevention</td>
<td>• Medication management</td>
<td>• Social/recreational activity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Medication management</td>
<td>• Health assessment</td>
<td>• Community development/engagement</td>
<td></td>
<td></td>
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<tr>
<td>• Health assessment</td>
<td>• Wound care</td>
<td>• Tenancy supports: Financial</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Wound care</td>
<td>• Diabetic foot care</td>
<td>• Tenancy supports: Financial</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Diabetic foot care</td>
<td>• Health promotion</td>
<td>• Tenancy supports: Financial</td>
<td></td>
<td></td>
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<tr>
<td>• Health promotion</td>
<td>• Tobacco cessation</td>
<td>• Tenancy supports: Nutritional</td>
<td></td>
<td></td>
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<tr>
<td>• Tobacco cessation</td>
<td>• Non-urgent health intervention</td>
<td>• planning and meal preparation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Non-urgent health intervention</td>
<td>• Crisis management</td>
<td>• Crisis management</td>
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<td>• Crisis management</td>
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Appendix B

Additional Canadian Supportive Housing Resources


Notes: