Progress Report of On-going Research: A Strengths Based Intervention for Homeless Youths: The Effectiveness and Fidelity of Houvast

Background

The start of a study on the effectiveness and fidelity of Houvast was announced in Vol. 5(2) of this journal in 2011 (Wolf *et al,* 2011). Houvast was developed in response to a lack of evidence-based and tailored interventions for homeless youths (Altena *et al*, 2010). Houvast is a strengths based method and developed based on scientific evidence as well as practice-based insight. It was developed in close collaboration with homeless youths and professional. The main aim of Houvast is to improve the quality of life of homeless youths by focusing on their strengths and stimulating their innate capacity for autonomy and self-reliance. In the meantime, data collection among homeless youths and professionals is almost finished and we can present results on the fidelity of the Houvast method in the experimental condition.

Objectives

The primary aim of this study is to test the effectiveness of the Houvast method on quality of life in Dutch shelter facilities for homeless youths. Research questions are:

- Is Houvast more effective than 'care as usual' in improving quality of life among homeless youths?

- Is Houvast more effective than 'care as usual' on secondary outcomes regarding recovery like psychological health, substance use, care needs, fulfilment of psychological needs, coping, resilience, working relationship with the professionals and attainment of goals.

- To what extent do trained professionals work according to the Houvast method? In other words: what is the degree of fidelity of the Houvast method?

Methods

We used a cluster-randomized controlled trial research design with a control and an intervention group and one baseline and two follow-up measurements. The study is conducted among ten Dutch shelter facilities, which provide ambulant or residential care to homeless youths. The shelter facilities were randomly allocated to the intervention ($n = 5$) or control group ($n = 5$). Professionals, team leaders and managers who participated in the intervention group were trained in the Houvast method. Subsequently, youths in the experimental group received care according to the Houvast method and youths in the control group received 'care as usual'. Youths in both groups were interviewed within two weeks after the start of the ambulant or residential care (T0). They were interviewed for a second time (T1) when they left the shelter facilities or care was terminated or when youths had received care for six months consecutively. The final follow-up interview (T2) took place nine months after the first interview. In addition, also professionals filled out a questionnaire around T1 about their perspective on the quality of the working relationship with their client and their quality of life. More details on the objectives, design and methods of the study can be found in a study protocol that was published recently (Krabbenborg *et al*, 2013).

Progress to-date

Implementation of Houvast

Different activities were conducted to facilitate the implementation of the Houvast method in each of the five shelter facilities in the experimental condition:

• End 2011, and prior to data collection, all five shelter facilities finished their training in the Houvast method:

  • Professionals received a four-day training provided by experienced trainers to learn the principles of Houvast;

  • Team leaders received a two and half day training to learn the principles of Houvast targeted at managing a team;

  • Two to three managers of each shelter facility attended a meeting with the researchers in which they on how to optimize the implementation of Houvast (e.g. by organizing internal seminars).

However, because transferring what was learned during the training to daily practice proved to be more difficult than expected (e.g. because of staff turnover), we organized the following additional implementation activities:

- April 2012, in each shelter facility a supervisor was assigned who would be responsible for coaching the workers on the job in the strengths based method. All supervisors attended a six-day training in the coaching of Houvast.

- September 2012, all professionals attended a follow-up training day.

- April – June 2013, all shelter facilities received a so called 'booster session' on location which was targeted at improving the recommendations that were given in the fidelity reports (see next paragraph).

It can be concluded that even though in general, professionals, team leaders and supervisors were enthusiastic about their training in the Houvast method, they experienced some difficulties fully implementing this method in their day-to-day practice. In particular, we found that it takes time to shift from a problem-oriented approach to a strengths-based approach and that facilitation by management is crucial.

Data collection

Data collection of the baseline measurement started at the beginning of 2012. At present, baseline interviews (T0) are completed with 251 homeless young adults of whom 68% are male. Also, we finished follow-up interviews (T1) at the time they leave the shelter up to a maximum of 6 months after T0. In total, 198 youths were interviewed for a second time (T1), which results in a response-rate of 79%. In addition, we started the final interviews (T2) nine months after T0 and expect to complete the last ones in January 2014. At baseline, 25,5% ($n = 64$) of the young adults received ambulant care and 74,5% ($n = 187$) received residential care. Their age ranged from 17 to 26 years (M age = 20, SD = 1.7) and the majority had a Dutch nationality (91%). At the moment, also 135 professionals have completed a questionnaire on the working relationship.

Emerging Findings on Fidelity

In order to answer our last research question, fidelity assessments were conducted between June and September 2012 among five Dutch shelter facilities for homeless youths that participate in the experimental condition. To assess the fidelity of Houvast several tools were developed, such as interview outlines, an observation scheme, and questionnaires. During a one-day audit by two trained researchers on location, a file analysis, a focus group with homeless youths, and interviews with the team leader and supervisor were conducted. Professionals, supervisors and team leaders had to fill out a questionnaire two weeks prior to the audit. Fidelity was measured using the Dutch version of the strengths model fidelity scale, which consists of ten indicators corresponding to three subscales: structure, supervision and clinical practice (Rapp and Goscha, 2006). A total fidelity score was composed by averaging

the ten indicator scores. The results showed that the average fidelity score on caseload, group supervision and strengths assessment was satisfactory. However, six months after implementation, none of the shelter facilities achieved a sufficient total model fidelity score. Recommendation on how to improve a low fidelity scores are diverse and range from factors at the primary process to the organizational level (Krabbenborg *et al,* forthcoming). For example, professionals did not consistently use the tools belonging to the Houvast method and shelter facilities tended to use institutionalized resources instead of naturally occurring resources. Also, professionals barely received field mentoring while supervisors argue that they did not have enough time to provide supervision to each professional. The availability of financial resources and the willingness from organizations to change their policy on certain points (e.g., investing in supervision) are factors which could lead to an improvement of all indicators. Each shelter facility received an informative report on the audit, including the scores on the indicators and the total fidelity score, a summary of the results with specific recommendations on how to improve model fidelity. This report was much appreciated by the team leaders and managers as it gave concrete pointers for improvement. In addition, an information leaflet about the aggregated results of the model fidelity of Houvast was disseminated.

Outlook

We are currently working on a publication of the role of self-determination in explaining quality of life in homeless youth at the time the enter shelter facilities. Additionally, as data collection is almost completed, with the input of an expert committee we are finalizing a data analysis plan for testing the effectiveness of Houvast. We expect the results on effectiveness to be available in Spring 2014. The final research report for the Netherlands Organization for Health Research and Development (ZonMw) who funded this study, will be available in Autumn 2014. These results will be disseminated at national and international conferences and publications.

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The Risk of Homelessness
in a Scandinavian Welfare State

The Danish National Center for Social Research is currently conducting a research project on the risk of homelessness in Denmark. Leader of the research project is researcher Lars Benjaminsen who is also a member of the European Observatory on Homelessness. The project is financed by a grant from The Danish Council for Independent Research, Social Sciences.

The project is based on individual micro data for the entire Danish adult population of 4 million people on various demographic, economic and social characteristics, such as income, employment, education, ethnicity, mental health, substance abuse etc. The data are obtained from administrative registers and are linked on individual level. This information is linked to data from a nationwide client registration system on homelessness shelters made available by the Social Appeals Board.

One subproject aims at comparing the risk of homelessness across different welfare systems. The analysis mirrors the paradigmatic study by Kuhn and Culhane on the typology of shelter users in New York and Philadelphia that found three different groups amongst the homeless – the transitional, the episodic and the chronic homeless, and that these three groups had both different patterns of shelter use and different profiles in terms of support needs. The Danish study analyses whether a similar or different pattern can be found in Denmark – in a different type of welfare state.

A second subproject aims at analysing the risk of homelessness in Denmark, determining what are the main risk factors for homelessness. It is analysed whether homelessness is a rare or regular event in major risk groups such as amongst the mentally ill, substance abusers, or individuals who have been incarcerated. Due to the strong data, detailed analysis on the relative impact of different risk factors can be conducted and interaction effects between different risk factors can be tested statistically – for instance to what extend comorbidity between mental illness and substance abuse further increases the risk of homelessness in addition to the statistical main effects of these factors.

A third subproject aims at analysing the risk of homelessness amongst young people. Besides risk factors characterizing young people themselves, also risk factors for their parents are included in the analyses, such as the educational level of the parents, and whether a parent has been diagnosed with mental illness. Thereby the project gives new knowledge on the impact of family background on the risk of homelessness.

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Research Project on
Prevention of Homelessness
in North Rhine-Westphalia, Germany

Background

The Ministry of Social Affairs in North Rhine-Westphalia (NRW), Germany's regional state with the largest population (17.5 million), is responsible for the only action program to tackle homelessness that exists in Germany. Under this program innovative projects are funded, a revised homelessness count is conducted every year, thematic workshops are organised and several research projects and the development of advice material have been commissioned. In November 2012 the GISS research institute in Bremen was contracted by the Ministry to conduct a large project on the prevention of homelessness in NRW.

Objectives

The research project aims at enumerating the number and profile of households in NRW that been threatened imminently with homelessness during the year 2012 (broken down by the 393 municipalities of NRW and differentiated by population size). The local responsibilities, administrative structures and proceedings for preventing homelessness are explored. The project works with a concept of secondary prevention, i.e. it focuses on households being in imminent risk of homelessness (but who have not (yet) lost their homes at the point of intervention).

Methods

Quantitative as well as qualitative methods are used in this research project. All municipal prevention services, NGO advice centres and jobcentres in NRW were asked to complete an online questionnaire with detailed questions about the local organisation of prevention services (which has often changed quite considerably after the introduction of the "Hartz reforms" in Germany in 2005), the number and structure of households in imminent risk of being evicted from their homes or

heaving to leave these for other reason (such as escalating conflicts), the reasons and triggers for being threatened with homelessness, support needs of the households in this situation, type and extent of support provided, the results of prevention measures etc. In addition a considerable number of qualitative local case studies are conducted, covering different types of administrative organisation of preventative work and involving all experts doing preventative work at the local level (at the municipality, NGOs, jobcentres etc.).

Progress to date

The written survey has been carried out in summer 2013 and had a very good response rate. Almost all of the 23 large independent cities (more than 95 per cent) and more than half of the 373 municipalities in districts have participated in the research. More than two thirds of all NGOs advice centres participated as well.

The project was able to base the quantitative analysis on data from 180 municipalities having been in contact with more than 45 000 households under imminent threat of homelessness in NRW during the year 2012. Details of this analysis will be published in summer 2014.

In autumn 2013 local in-depth case studies were conducted in twelve municipalities of different size all over NRW. The results of these qualitative case studies will be presented together with the quantitative results in 2014.

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Caring for the Homeless and the Poor in Greece: Implications for the Future of Social Protection and Social Inclusion

This research follows the growing policy concern in Europe on how to address acute forms of social exclusion and homelessness. In Greece, the issue has only recently been recognized in the context of the prolonged economic crisis, so its documentation is limited. This research seeks to assess the efficacy of current provisions for the homeless in Greece and examine the applicability of integrative models of care developed in the US and the UK. The research aims first: to provide updated evidence for the extent of various levels of visible and invisible homelessness in Athens and to map different types of shelter and homeless assistance. Second: to organize a dialogue among key stakeholders, to diagnose key problems in the provision of care and to consider the means for advancing social innovations like 'housing led' approaches. Attention is given to local responses to the crisis and the potential for bottom-up change. The project is led by associate professors Arapoglou Vassilis and Gounis Kostas at the Department of Sociology – University of Crete and is financed by the National Bank of Greece Research Innovation Fund on South East Europe and the Hellenic Observatory at the London School of Economics.

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