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## A Longitudinal Service-User Perspective on Dutch Housing First Implementation

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# Context

Proven effectiveness of HF method (Tsemberis, 2000 and others)

Upscaling/ implementation challenging (Pleace and Bretherton, 2013)

Since 2005 Dutch implementation, practices showing variations, due to differences in duration, context and arrangements (Wewerinke, Al Shamma and Wolf, 2014)

Following discussion on theoretical (US, Tsemberis )/ guiding (EU) typology (Pleace and Bretherton, 2013) guiding principles (Wewerinke, Al Shamma and Wolf, 2014; Smit, 2019), Dutch accreditation is on it's way (By National Institute Mental Health and Adiction)

# HF guiding principles



Housing is  
a human right



Choice and control for  
service users



Separation of housing  
and treatment



Recovery orientation



Harm reduction



Active engagement  
without coercion



Person-centred  
planning



Flexible Support for as  
Long as is Required



We contribute to Dutch accreditation with data on HF clients within wider longitudinal study on implementation of deinstitutionalization homelessness and mental health (367 participants)

In database we rarely come across Housing First participants (44 participants, 4-12%)

Finding: approach is still only there for the lucky few

# Practices



<b>Practice</b>	<b>Start practice</b>	<b>(wider) sample</b>
1	2009	4/6 (69)
2	2011	4 (41)
3	2013	2 (20)
4	2014	1
5	2020	2 (43)
6	2020	29/31
Total		44

# The sort of questions we ask



- To what extent do you feel at home here? (asked for house and neighbourhood separately) What makes you feel at home, or not? What is important for you to feel at home?
- Which people are important in your life, what kind of role do they play in your (daily) life? Do they live near you, is this important to you? Did you meet the neighbours, how is the contact with them?
- Would you like to have more contacts in the neighbourhood? Are you already undertaking something to facilitate this? what are barriers for you? Would you like to receive support for this, what kind of support/help?
- What does housing first staff do for you? To what extent are you happy with what they do for you? Can you give an example?
- What do you feel is important in your recovery? Can you bring that in with the staff? Do they pick up on it?
- Have you set goals/ objectives with the staff? What are your personal goals?
- Do you feel the staff supports you where you need it? Do they need to work with others to realise this? Can you give an example?



# Sample



44 service user participants: 34 participants are male (77 %)

Age: < 35: 11 (25%) 35-55: 14 (32%) >55: 2 (4%) unknown: 17 (39%)

# interviews: (1) 37, (2) 2, (3) 5

All participants have been homeless and have social problems

Often alcohol/ drug use, mix of good/ bad experiences with care

Some use mental health help, most only want guidance in a practical sense.

Practice 6, less frequent dual diagnoses.

# 1) Housing is a Human Right

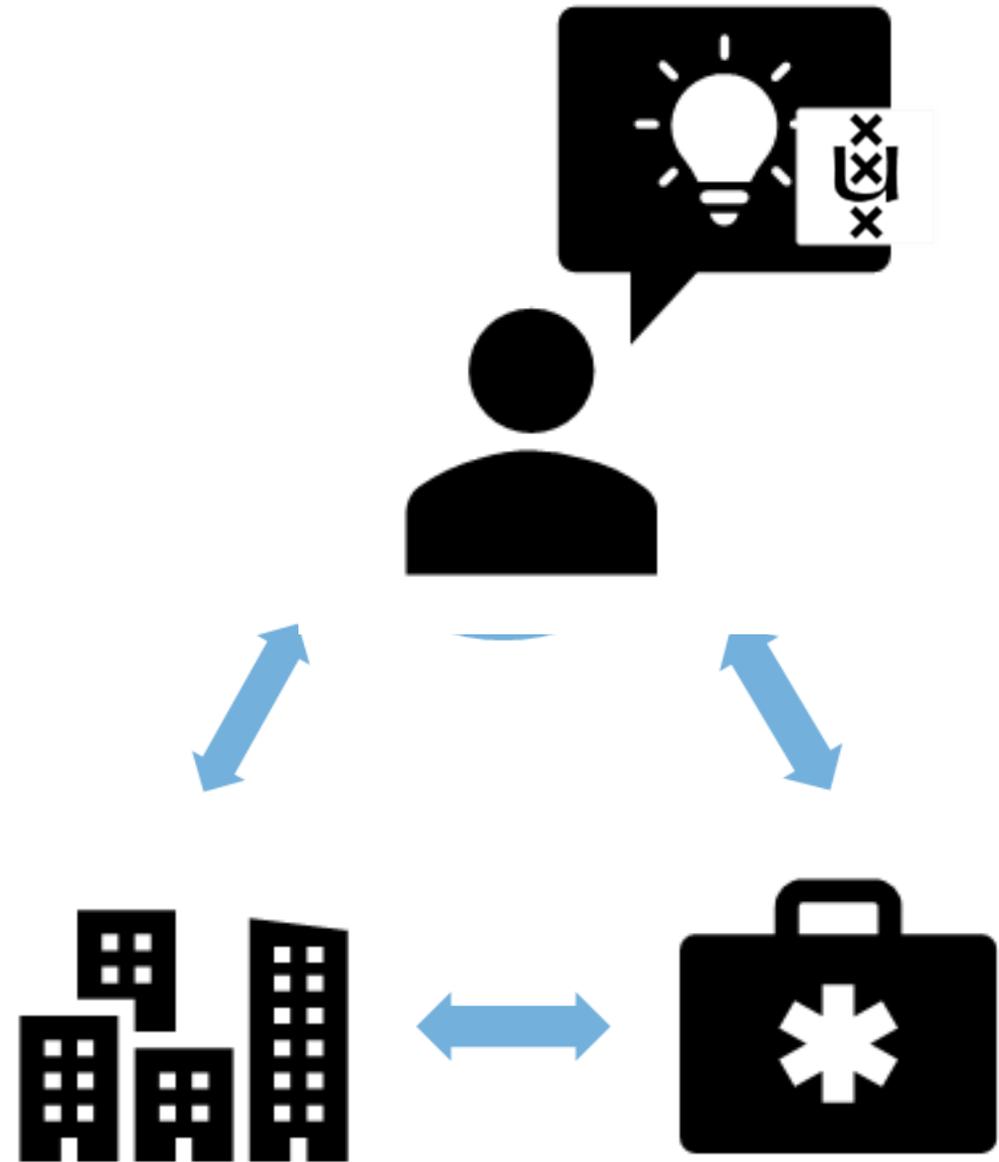
Housing-associations increasingly require NGO as middleman in rental agreement.

Risk of unclear situation for all three parties

Housing associations requiring NGO's to set additional requirements

Renter unknown to housing association

Demands housing association at times mitigated by NGO





## *Lost in translation (client experience)*

Unrealistic expectations were raised with Jonas about rules relating to rental-agreements and extra slack given, resulting in complex legal procedures with support services withdrawing themselves from the client remaining housed.

In the translation of information from the corporation by the housing first service provider, warnings or conditions can sometimes be conveyed differently or softened than they are maintained by the corporation. This can lead to undesirable situations for both the client, care provider, corporation and the living environment. As can also be seen in the example of Jonas.



Jonas has been staying in a house of Housing First for almost two years. His home would be flipped a week after the interview. He is currently in danger of being evicted from his home because of housing fraud. The corporation and Housing First indicate that in the event of housing fraud, eviction is immediately carried out and there are no question of three official warnings.

The joint action of corporation and Housing First in the judicial process is experienced as painful for confidence in Housing First. Jonas indicates:

*Even though I now get a house, I do not want to continue with Housing First.*



# 1) Housing is a Human Right (continued)



Client not always a fair chance for a good start (noisy house, experiences of nuisance from previous neighbors so that neighbors are extra keen on this).

*Yes, we have a house for you. But there is one problem, there is noise nuisance." So that was about the previous occupants [...] I don't even live there yet and there is already some whining about noise nuisance. I thought that was a bit of a shame. thrown in at the deep end by [housing association] It was a very businesslike and cold conversation.*

Due to previous experiences with housing first clients, housing association have less room for errors/complaints. Set extra conditions for housing first target group

Connection with housing first guidance in case of nuisance related to neighbors and the police often missing: nuisance directly communicated to police/housing

Intensity of support in in a number of cases rapidly decreases, are people overestimated?

## **(2) Choice and Control for Service Users/ (5) Harm Reduction**



Satisfaction with support in general very high

We found cases in which much support and care (> 5 times a week) is provided to persons detoxing in their own house.

But not all support equipped to provide tailor-made support to participants that find asking for help difficult and distrust others, especially related to addiction, psychological challenges and social contacts



## (4) Recovery Orientation



Social living environment may be experienced as very pleasant, but social connection is not self-evident.

Example: In one of the mixed locations (project 6) there is a group of residents who organize a lot together, but the mutual connection (also with 'regular' residents) is not yet found by everyone. For a group of residents, the threshold for meeting is still high. The desire for more meaningful day-to-day activities and increasing social contacts among many residents, COVID-19 certainly plays a role in this.



## (8) Flexible Support for as Long as is Required

Satisfaction with support in general very high

- Towards the end of his trajectory, Jonas received less guidance (30 min, once in 2 weeks). Scaling down care happens during a critical turning point (CTI).
- case (next slide) illustrates support stopping when rental agreement in own name
- case (next slide) illustrating how less support eventually led to the loss of housing



# Rental contract on own name, meaning losing HF support

*There has been an appointment, but I don't want it yet. I said to the (supervisor) I want to postpone it as long as possible. Because I don't have to worry anymore. The moment it flips over, and it becomes my home, Housing First can say, I'm withdrawing. And I do not want that. I find it very pleasant to continue with (supervisor). Not just because he's taking me to the hospital, but I really want to talk to him. [..]*

*If you know what the problem is, you'll have to start all over again. You have to tell everything all over again. Before you get there, you are 6, 7 months further. I don't need that anymore.*

*I want it to stay nice and quiet, the way it is now. If there's anything we can call each other. They talked about this with the highest level of management. It may now be extended. I still have a one-year contract. I believe that from the bottom of my heart, I have been with (guide), since (guide) came into my life, such a hope has changed for me. He's for me...we can talk. I can scold him when I have to. Yes, that is nice.*



How quickly less support eventually led to the loss of housing



# Conclusions



- client-experiences with implementing housing first show clear differences.
- in our wider study on homelessness and mental health (> 250 participants) we more often do not come across Housing First participants than that we do. This may indicate this approach is still only there for the lucky few.
- organizational difficulties explain differences and there is a need for raising additional methodological (support) expertise. Such trajectories may require mixed financing, which is challenging to realize.



# Questions? Discussion!

[Onderzoek MO/BW \(uva.nl\)](https://www.uva.nl/research/research-portal)