Housing First:

An evaluation of the FLIC model

Executive Summary









Housing First is based on the principle that housing is a basic human right. The approach places people with complex needs – such as mental health problems, offending and substance abuse – into stable, permanent housing right away, creating the stability, self-esteem and independence they need in order to move on with their lives.

Providing housing as a first priority has proven an effective way of breaking the 'revolving door' cycle that many clients described being trapped in. It provides a safe space to address issues that can't be addressed on the streets.

SHP's Fulfilling Lives in Islington and Camden (FLIC) has been using the Housing First approach with clients since 2014. So far, FLIC has successfully housed 10 clients using this approach.

All clients had multiple and significant needs upon referral, including severe mental health and substance misuse issues in addition to offending and homelessness. FLIC worked with each client for an average of 9.6 months before referring into Housing First.

Before entering into Housing First, 50 per cent were in hostel accommodation, 40 per cent were rough sleeping and 10 per cent were in temporary accommodation.

What our clients say:

'I can't fault these people. I can't fault these people one little bit'.

"The support is brilliant. I started on the streets homeless in central London and they totally took me out of that. I would not be here today if it was not for them."

I found it very insulting sometimes. I know everybody means well but when you've got a graduate, a 24-year-old, sitting in front of you saying, 'Well John I'll tell you what you need,' there's something very offensive about that. When I've been telling them for 30 years, 'No, I'll tell you what I need, I need somewhere to live.' I was let out of prison 48 times 'NFA', no fixed abode. When you leave the prison gates it didn't matter if I went right or left. It was irrelevant. Yes, I'm responsible that I kept going back to prison, but when you're released from prison with just the clothes you're wearing and £47 in your pocket, are you really shocked to see the same man back in court within a month? Obviously that was my fault, but I was being set up to fail for many years'.

This report looks at the key achievements over the past two years:



Housing

All ten clients housed through the Housing First approach have successfully maintained their tenancies. For many, this is the longest that they have ever lived at a stable address.



Health

All clients have experienced improvements in physical and mental health. Since being housed only one Housing First client has had a hospital admission, despite all clients being in poor health from the effects of homelessness. Improvements are likely to be because all clients are now are now registered with a GP, and more engaged with health services.

Every client has reported a significant improvement in their mental health. Since being housed none of the Housing First clients have had a psychiatric admission, but more significantly half of clients reported their mental health as 'good', compared to none before being housed.



Substance abuse

It is important to highlight that Housing First does not expect people to become sober, and does not house people once they have completed recovery. Instead, clients are encouraged to address addiction issues once they are housed. All clients reported reductions in drug/alcohol use since being housed, and two clients — one formerly alcohol dependent and a substance user — had become abstinent by choice.



Cost saving

Evaluating the cost effectiveness of Housing First for FLIC clients is difficult, as the team does not have the systems in place to collect this data. However, it is anticipated that there have been significant cost savings or offsets through placing clients in Housing First.

We can look to the National Evaluation of Housing First as a guide:

Assuming three hours of contact per week from a medium cost Housing First service (£34 per hour), a total cost of £5974 in support and health costs, including £672 for GP time and the outpatient appointments. A saving of £18,638 is made per person.

Success with this model in part hinges on the relationships between support workers and their clients – the key here is that support is tailored to the individual and is always on hand when it is needed. This approach has meant that some of the most entrenched clients have managed to move on with their recovery. FLIC would recommend that the Housing First approach is rolled out at all levels – locally, regionally and nationally.