Gaining and Preserving Pioneer Status: Key Lessons from the Housing First Pathfinder Programme in Scotland

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❯ **Abstract_** *Scotland has been heralded as an international pioneer in Housing First implementation given the level of political commitment the approach has commanded and pace at which the intervention has scaled up in recent years. This status was catalysed by a major three-year 'Pathfinder' programme, operational from April 2019 until March 2022, which scaled up Housing First provision in five areas and housed 579 people experiencing homelessness with complex needs (e.g., co-occurring problematic substance use and/or mental health problems). The Pathfinder served as a litmus test regarding the opportunities and challenges associated with scaling up Housing First at pace. This paper distils nine key lessons emerging from an independent evaluation of the Pathfinder which focus on its achievements and limitations, together with factors facilitating and inhibiting Housing First mobilisation and mainstreaming. These will inform future delivery as Housing First increasingly becomes the default response for individuals with complex needs as per recent Scottish Government policy directives. At least some, if not all, are likely to resonate in other countries aiming to embed and/or expand Housing First provision. The paper concludes that the level of political commitment the approach has commanded up until this point must be maintained, and fidelity to the core principles preserved, if Scotland's status as a Housing First pioneer is to be retained going forward.*

❯ **Keywords_** *Housing First, Homelessness, Complex Needs, Multiple Disadvantage, Scotland, United Kingdom*

Introduction

Over the past decade or so the tenor of debate regarding Housing First has shifted tangibly within the UK. An intervention providing rapid access to independent settled housing and intensive, non-time-limited, person-centred support on a relatively unconditional basis, Housing First elicited as much scepticism as it did intrigue when news of its effectiveness for people experiencing long periods of homelessness and severe mental health problems in the United States first reached the UK. Indeed, in the early 2010s key stakeholders in the UK's homelessness sector tended to express sentiments in the vein of 'why should we do it?', 'it's unlikely to work here', or 'aren't we doing it already?', conveying limited under-standing regarding what Housing First is and how far UK provision departed from its core principles at the time (Johnsen and Teixeira, 2010). Levels of interest in Housing First, and awareness of international evidence showcasing its effective-ness for people experiencing homelessness with so-called complex needs (that is, co-occurring problematic substance use and/or mental health problems), have increased to the extent that discussions now tend to focus not on the question of whether it should be delivered in the UK, but rather 'how do we do it well here?' (Johnsen, 2021).

This transition has been particularly marked in Scotland, where Housing First has commanded such a high level of political commitment and been scaled up so rapidly in the past few years that the country was recently heralded as an interna-tional pioneer in Housing First implementation by the European Housing First Hub (Jones et al., 2022). This status was catalysed in large part by a major three-year 'Pathfinder' programme, running from April 2019 until March 2022, which scaled up Housing First provision, housing 579 people experiencing homelessness with complex needs in five areas: Aberdeen City/Aberdeenshire, Dundee, Edinburgh, Glasgow, and Stirling. The Pathfinder served as a litmus test regarding the oppor-tunities and challenges associated with an attempt to scale up Housing First rapidly. Many valuable lessons were learned regarding factors that facilitate and/or inhibit the design, mobilisation, and embedding of Housing First at scale.

Drawing on an independent evaluation of the Pathfinder, the detailed findings of which are reported elsewhere (Johnsen et al., 2022), this paper distils the key messages which speak most directly and/or powerfully to current academic and policy debates regarding Housing First. It comprises five further sections. The next section provides an overview of the Pathfinder's evolution and context, prior to a description of the characteristics of its five constituent projects. This is followed by an outline of the evaluation aims and methods. The penultimate section conveys

the nine core messages drawn from the study, while the conclusion reflects on the significance of the Pathfinder for the resolution of homelessness experienced by people with complex needs within and beyond Scotland.

Pathfinder History and Context

The Pathfinder was developed in response to the findings of research commissioned by the homelessness charity Social Bite. This assessed levels of homelessness in the largest Scottish cities, reviewed evidence on best practice in addressing the needs of people experiencing the more complex forms of homelessness, and identified widespread support for the expansion of Housing First amongst key stakeholders (Littlewood et al., 2017). Calls for scaling up Housing First, beyond the few small projects which already existed at the time, were further fuelled by other research which highlighted the scale of severe and multiple disadvantage, that is, the co-occurrence of homelessness, problematic substance use and/or involvement with the criminal justice system, and the poor service response experienced by many of those affected in Scotland (Bramley et al., 2019).

Social Bite committed to invest significant private funding for dedicated support and evaluation via funds raised at mass public participation fundraising events. The charity secured property pledges from housing providers for people experiencing street homelessness and complex support needs. Support providers in the five designated Pathfinder areas were encouraged to apply for funding jointly. Commitment to the seven key principles of Housing First endorsed in Scotland (described below) was a pre-requisite and core criterion in bid assessments. Given clear connections with national policy objectives (outlined below), the Scottish Government committed further funding and became the main contributor. Additional funds were also provided by Merchants House of Glasgow. [1] Corra Foundation and Homeless Network Scotland were appointed fund and project managers respectively. Turning Point Scotland was commissioned to provide training in Housing First principles and practice for Pathfinder providers and partners via its Housing First Academy.

Commitment to Housing First has been a cornerstone of the Scottish Government and Convention of Scottish Local Authorities' promotion of rapid rehousing (Scottish Government, 2018) following recommendations of the Homelessness and Rough Sleeping Action Group (HARSAG) in 2018 (HARSAG, 2018). Concomitantly, the development of a Scottish approach to Housing First was a key recommendation of the Scottish Parliament's Local Government and Communities Committee

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[1]   Scottish Government funding covered Years 1-3; Social Bite and Merchants House of Glasgow funding covered Years 1-2.

following a cross-party inquiry into the scale and nature of homelessness in 2018 (Scottish Parliament, 2018). Recommendations regarding the rollout of Housing First were further strengthened when HARSAG reconvened in 2020 (HARSAG, 2020) and scaling up Housing First across Scotland was included as a commitment in the Programme for Government in the same year (Scottish Government, 2020). The Scottish Government's long-term national housing strategy 'Housing to 2040' further confirmed political commitment to Housing First, stating that the "aim is for Housing First to be the default option for homeless people with multiple and complex needs" (Scottish Government, 2021a, p.35).

A national framework to inform the planning, commissioning, and implementation of Housing First in Scotland over the next 10 years was launched in March 2021, and updated annually thereafter, following a national consultation with stakeholders (Homeless Network Scotland, 2021). Further to this, a 'Check Up' process involving a rolling cycle of annual reviews, coordinated by Homeless Network Scotland and the Scottish Government, was developed toward the end of the Pathfinder period, with the first tranche of (non-Pathfinder) Scottish local authorities engaging with the process from early 2022. This process involves a review of local evidence and policy regarding service delivery and fidelity to Housing First principles, collation of insights from local partners, participatory audits with Housing First tenants, and co-produced self-reflection amongst local stakeholders (Homeless Network Scotland, 2022).

In the third and final year of the programme, Corra Foundation managed the distribution of transition funding on behalf of the Scottish Government which was designed to support up to half of the full cost of the Pathfinder programme as the process of mainstreaming Housing First in the Pathfinder areas was implemented. There were substantial changes to the composition of provider consortia and delivery arrangements in four of the five Pathfinder projects (all except Glasgow) by the end of September 2021 as a result, with some being taken 'in-house' by the local authority, and other local authorities commissioning a subset of the former voluntary sector consortia members to deliver support.

It is also important to note that the final two years of the Pathfinder period coincided with the COVID-19 pandemic. It is widely acknowledged that the pandemic had a profoundly negative effect on frontline housing, health, and social care support delivery within and beyond the UK (Boobis and Albanese, 2020) and led to unprecedented levels of social isolation and a deterioration in mental health across society more generally internationally (Xiong et al., 2020). These impacts must be borne in mind when interpreting the evidence regarding Pathfinder effectiveness, especially outcomes for service users.

Pathfinder Project Characteristics

An overview of key project characteristics in each of the five areas is given in Table 1. Although described differently, all five targeted the population traditionally supported by Housing First, that being people experiencing homelessness and co-occurring problematic substance use and/or mental health problems, many of whom had experienced long-term or repeat homelessness. The degree of focus on people sleeping on the street varied depending on the prevalence of street homelessness within each context, with this being much more prominent in Edinburgh than in Stirling and Aberdeen/shire, for example. Two of the Pathfinders (Aberdeen/shire and Edinburgh) included an element of Housing First for Youth (HF4Y) provision targeting young people (Housing First Europe Hub, no date). Two thirds (68%) of the individuals housed were men, one third (32%) women, and fewer than 1% identified as transgender. In terms of age profile, 15% were aged 25 and under, 65% 26-49 years, 17% 50-64 years, and fewer than 4% 65 years or older. Almost all (99%) were White British and the vast majority (96%) identified as heterosexual.

Table 1: Pathfinder project overview (pre-transition, i.e., prior to October 2021)

	Aberdeen/shire	Dundee	Edinburgh	Glasgow	Stirling
Consortia composition	Led by Aberdeen Cyrenians with Aberdeen Foyer, Turning Point Scotland, Aberdeen City Council, Aberdeenshire Council	Led by Transform Community Development, with The Salvation Army, Dundee Survival Group, We Are With You	Led by Cyrenians, with Turning Point Scotland, Rock Trust, Streetwork, Bethany, Gowrie Care (now Hillcrest Futures), Barony (now Wheatley Care)	Led by Turning Point Scotland, with Simon Community Scotland, The Salvation Army, Loretto Care (now Wheatley Care)	Partnership between Loretto Care and Barony (which subsequently merged into Wheatley Care)
Target group/ eligibility	Initially people sleeping rough, then those in temporary accommoda-tion who have experienced cyclical homelessness	Experience of multiple and complex needs, repeat homelessness, and willingness to engage with Housing First support	Experience of multiple and complex needs and been in homelessness system for many years	Experience of complex needs, over 18, and statutorily homeless	Experience of multiple and complex needs and repeat episodes of homelessness
Referral	Open, including self-referral. NDT used to assess eligibility and prioritise referrals	Open, including self-referral. Use of screening tool to assess eligibility	Mostly from council homelessness officers but also other agencies. NDT used to prioritise referrals	Open, referrals processed via consortium staff using HSCP processes, latterly taken over by HSCP	Referrer completes NDT. Case initially discussed with Housing First team, then assessed by referral panel
Housing type	Predominantly social (69% LA, 24% RSL) with 7% PRS. All scatter-site.	All social (78% LA, 22% RSL). All scatter-site	All social (24% LA, 76% RSL). All scatter-site	Almost all social (99% RSL) with 1% PRS. All scatter-site	All social (29% LA, 71% RSL). All scatter-site
Tenancy type	SST in social housing; PRT in PRS	Mostly SST; SSSTs used with one HA	SST	SSTs in social housing; PRT in PRS	SST
Intended staff: client ratio	1: 7	1: 7	1: 7	1: 7	1: 7
Staff and out of hours coverage	9-5 Monday to Friday (with some flexibility); out of hours support available from Aberdeen Cyrenians and Aberdeen Foyer	8:30am-5:30pm (with some flexibility evenings/ weekends); helpline outside office hours	Office hours vary; all but one partner offers out of hours support	Monday to Saturday (9am-5pm and 11.30am-7.30pm), and 10-6 on Sundays; out of hours on call support	Staff work regular daytime shifts; out of hours support available from staff base of an existing service

	Aberdeen/shire	Dundee	Edinburgh	Glasgow	Stirling
Furnishing/ personal budget	Yes, c.£1 200.	Yes, £1 280	Yes, £1 500	Yes, £1 500	Initially a furniture package; thereafter £1 500 budget
No. people housed end Sept. 2021	101	87	144	231	15

Abbreviations: HA – Housing Association; HSCP – Health and Social Care Partnership; LA – Local Authority; NDT – New Directions Team (Assessment); PRS – Private Rented Sector; PRT – Private Residential Tenancy; RSL – Registered Social Landlord; SST – Scottish Secure Tenancy; SSST – Short Scottish Secure Tenancy.

As noted above, all Pathfinder projects were commissioned on the understanding that providers were committed to operationalising the seven principles of Housing First endorsed in Scotland (and England). These principles are described in detail by Homeless Link (2017) but may be summarised as follows:

1. People have a right to a home – that is, access to suitable housing with a normal tenancy agreement is prioritised as quickly as possible, eligibility is not contingent on conditions beyond a willingness to maintain a tenancy, and individuals will not lose their housing if they disengage or no longer require support.

2. Flexible support is provided for as long as needed – meaning that providers commit to long-term offers of support without a fixed end date, have procedures in place allowing for high/low intensity of support and 'dormant' cases, broker links with relevant services across sectors to meet the full range of an individual's needs, and offer support for them to transition away from Housing First if this is a positive choice for them.

3. Housing and support are separated – that is, support is available to help people maintain a tenancy and address any other needs they identify, housing is not conditional on them engaging with support, the choices they make about support do not affect their housing, and the offer of support stays with them even if the tenancy fails such that they are supported to acquire and maintain a new home.

4. Individuals have choice and control – meaning that they have reasonable choice as regards the type and location of housing (which should be scatter-site and self-contained unless they express a preference otherwise), they have the option to not engage with other services, they can choose when, where and how support is provided by the Housing First team, and they are supported through person-centred planning and shape the support they receive.

5. An active engagement approach is used – that is, staff proactively engage with clients (making the service fit the individual rather than the individual fit the service), caseloads are small thereby enabling staff to 'do whatever it takes' and not give up or close the case when engagement is poor, and the team continues to engage and support even if an individual loses their home or leaves it temporarily.

6. The service is based on people's strengths, goals, and aspirations – meaning that projects are underpinned by a philosophy that there is always a possibility for positive change, individuals are supported to identify their strengths and goals, and to develop the knowledge and skills required to achieve these.

7. A harm reduction approach is taken – that is, people are supported holistically, those who use substances are supported to reduce immediate and ongoing risks to their health, individuals who self-harm are supported to undertake practices which reduce risk of greater harm, and staff work to reduce harm and promote recovery in other areas of physical and mental health and wellbeing.

All Pathfinder consortia were led by voluntary sector support providers, albeit that their size and structure varied substantially, especially with regard to the number of partners and/or involvement of statutory bodies (e.g., local authority Health and Social Care Partnerships). Referral processes were variable, with most accepting self-referrals and some using tools such as the New Directions Team (NDT)[2] assessment to prioritise referrals according to perceived levels of vulnerability. In each, support workers fulfilled an intensive case management role wherein they delivered support directly and brokered access to other services as required, which is the dominant support model employed in Housing First projects across the UK (Homeless Link, 2021). In this vein, the specific focus of support was (intended to be) dictated by the needs and preferences of service users on a case-by-case basis.

The local contexts and service networks within which the Pathfinders operated also differed markedly, albeit that almost all (98% of) service users were allocated a social housing tenancy which are typically used to discharge statutory homelessness duties in Scotland wherein social housing comprises 23% of all housing stock (Scottish Government, 2022). Temporary (hostel) accommodation was provided whilst independent housing was sourced. All housing provided was scatter-site (that is, dispersed amongst 'normal' neighbourhoods as opposed to being concentrated in particular tenement or apartment blocks) and standard tenancy agreements used. The cost of rent was covered by Housing Benefit or the housing

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[2] The New Directions Team (NDT) assessment tool is widely used across the UK by agencies supporting people with experience of severe and multiple disadvantages to assess their eligibility or need for services (see below for further detail).

payment component of Universal Credit, these being means-tested welfare benefits which helps people on low incomes in the UK cover their rent. All Pathfinder projects aimed to maintain staff: client ratios of 1: 7. Out-of-hours support varied, with service users typically having 24/7 access to a telephone helpline or other service operated by the support provider(s). All but one project offered a personalisation fund to enable user choice in furnishing and décor from the outset; the fifth (Stirling) instigated such a fund toward the end of the Pathfinder period.

Taken together, these characteristics afforded valuable opportunity to reflect on shared and locality-specific challenges and responses in the delivery of Housing First at scale. The following section outlines the methods used to explore these issues. Key findings from the evaluation are then presented.

Evaluation Aims and Methods

The evaluation aimed to assess the effectiveness of and draw together key lessons learned via the Pathfinder programme. It combined an *outcomes evaluation* assessing the outcomes individual service users experienced across a wide range of areas (housing, health, problematic substance use, experience of crime and antisocial behaviour, quality of life, etc.), a *process evaluation* assessing fidelity to the core principles of Housing First and investigating factors that facilitated or inhibited service delivery, and a *cost analysis* calculating unit costs of delivery and assessing whether the programme provided value for money. This study was designed in consultation with the Pathfinder's Steering Group which comprised key stakeholders including a wide range of support and housing providers and the programme funders. A reference group of individuals with lived experience of homelessness and multiple disadvantage, coordinated by Homeless Network Scotland, fed into the design of research instruments (e.g., outcomes survey). Ethical approval was granted by Heriot-Watt University.

A mixed method approach was employed and data drawn from five main sources. A substantial proportion came from *interviews and focus groups* with support provider leads and partners, frontline support workers, local stakeholders (e.g., housing associations, local authorities, health and social care providers), national stakeholders (e.g., policy makers, campaigning organisations), and service users (total n=200 participants). These were conducted at three time-points, as noted in Table 2. Wave one interviews focused on experiences during project design, mobilisation, and early implementation within 12-18 months of inception. These incorporated a fidelity assessment using a method developed and quality controlled by Homeless Link. Drawing across all interviews, this enabled a qualitative assessment of the strength of adherence to each of the seven principles of Housing First

(see above). Wave two interviews, conducted toward the end of the Pathfinder, focused on achievements, challenges, and lessons learned over the whole period. A complementary round of interviews was conducted mid-programme with senior representatives of each project to investigate the impact of the COVID-19 pandemic on operation. Most wave one interviews were conducted in person, but the latter of these and all subsequent interviews were conducted remotely via videoconference or telephone following imposition of pandemic-related restrictions on social contact. All discussions were recorded, transcribed verbatim, and analysed thematically using NVivo. Limited detail is given in quotation attributions to preserve participant anonymity.

Table 2: Number of interviewees (at wave one, mid-programme, and wave two), by Pathfinder

	Wave 1					Mid Prog.	Wave 2					TOTAL
	Provider /partner	Staff	Stakeholder	User	Total	Provider	Provider /partner	Staff	Stakeholder	User	Total	
Aberdeen/shire	7	6	3	4	20	1	3	4	4	2	13	34
Dundee	3	7	2	6	18	2	3	9	2	2	16	36
Edinburgh	6	9	6	8	29	1	5	6	2	4	17	47
Glasgow	5	10	4	10	29	1	3	10	5	11	28	59
Stirling	1	2	2	1	6	1	1	1	3	0	5	12
National	3				3	-	9				9	12
TOTAL					105	6					89	200

The second data source was *monitoring data* collected monthly from Pathfinders about all individuals housed (total n=579) up until the transition point in September 2021 (see above). These were used to capture the demographic characteristics of people supported, calculate tenancy sustainment rates, and record details of tenancy terminations. The third data source comprised *New Directions Team (NDT) assessments* completed by frontline staff for individuals they supported at the point of recruitment (total n=104). The NDT assessment scores individuals across a range of criteria, including: engagement with frontline services, intentional and unintentional self-harm, risk to and from others, stress and anxiety, problematic substance use, social effectiveness, impulse control, and housing status. These were used to develop a profile of the characteristics and support needs of service users at the point they began receiving Housing First support.

The fourth data source included *outcomes questionnaires* completed by service users at the point of recruitment (baseline) and six-monthly intervals thereafter (total n=101 returns). These questionnaires collected data regarding individual characteristics and aspirations, use of (other) services, and outcomes across a range of areas including but not limited to physical and mental health, problematic substance use, engagement with the criminal justice system, social support networks, employability, and quality of life. Most questions were validated measures included in the Housing First Europe Hub Outcomes Framework; some were additions requested and co-produced by the lived experience reference group (see above). Survey administration was severely disrupted by the pandemic and follow-up rate poor given that staff time was necessarily focused on support provision which was delivered remotely (e.g., by telephone) or in a socially distanced manner (e.g., via conversations through windows or from tenement stairwells). Plans to conduct a full cost-benefit analysis were abandoned as a result, and survey data only used to estimate costs associated with public service use prior to engagement with Housing First and to develop individual costed case studies highlighting potential cost savings and offsets. The fifth data source included quarterly *financial returns* submitted to Corra Foundation by the Pathfinder projects.

Nine Key Messages

This section presents nine core messages from the Pathfinder evaluation which speak most directly to live debates in international academic and policy literature regarding the merits, limitations, and operational challenges associated with Housing First. Each is discussed in turn below.

1. Housing First is just as effective in Scotland as elsewhere… even in the context of a pandemic

The Pathfinder attained tenancy sustainment rates commensurate with those recorded for Housing First elsewhere internationally (Aubry et al., 2021; Mackie et al., 2017), these being 88% at 12-months and 80% at 24-months overall. [3]

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[3]   Tenancy sustainment rates were reported for both 12-month and 24-month periods. These were calculated by dividing the number of individuals who were still housed in a Pathfinder Housing First tenancy by the total number of individuals who had been housed at least that length of time ago (i.e., 12 months or 24 months) and multiplying by 100. Individuals who passed away following recruitment were excluded from the analysis. The number of deaths and repeat Housing First tenancies were reported separately. See Johnsen et al. (2022) for a detailed account of this analysis and full breakdown of tenancy sustainment figures.

Significantly, no evictions were recorded. [4] Where tenancies were ended, it was normally due to a planned move back into temporary accommodation (4% of all tenants) or other supported accommodation (2%), abandonment (2%), or a long-term prison sentence (2%). Fewer than 1% moved into a second Housing First tenancy after the first was ended.

Qualitative evidence regarding other individual-level outcomes (regarding health, problematic substance use, and engagement with the criminal justice system for example) indicates that these were mixed but positive on balance, which also aligns with existing international evidence on Housing First (Baxter et al., 2019; Mackie et al., 2017). Service user interviewees' experiences varied but were very positive overall. Some service user interviewees described the impact of Housing First on their lives as transformational.

> It's totally transformed my life… It's given me something that I want to really hold on to… I'm over the moon with it [my flat] and I'm not letting it go easy… Now, I'd say my life is going really well and… without having that flat… I'd still be basically either in and out of the hostel system… Aye, the flat has made a huge difference to my life, a massive difference. (Service user)

For others, changes were rather more incremental and/or intermittent, but no less significant in fostering recovery for that fact.

> [Some tenants have] achieved something which might ordinarily seem to be quite insignificant… How do we then translate that into an outcome for the Scottish Government or for a funder to say, 'This works' and they're like, 'What, someone made Bolognese for their pal on a Friday night? !' You're like, 'Yes!' (Pathfinder provider)

These outcomes are particularly impressive given that the final two years of the three-year programme coincided with the COVID-19 pandemic. The pandemic's onset and associated restrictions, including periods of strict lockdown during 2020 and subsequent (albeit less severe and intermittent) restrictions into 2021, affected delivery profoundly. Some of the most notable impacts included, amongst others, social distancing requirements, shielding of especially vulnerable individuals, self-isolation after infection, staff working from home and hybrid work arrangements, staff absences due to illness, and severe pressure on healthcare provision. The closure of community facilities also severely constrained opportunities for

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4   It should also be noted that the Scottish Government imposed a moratorium on evictions during the pandemic, but this did not apply to antisocial behaviour, hence it was always possible to evict tenants whose actions were affecting neighbours (Berry, 2021). The Pathfinder's tenancy sustainment rates cannot therefore be dismissed as an outcome of the moratorium.

combating social isolation. Further to these effects, the pandemic reduced the turnover and availability of rental properties thereby contributing to lengthy hiatuses in social housing property allocations.

The costs of delivery were comparable with those reported in other studies of Housing First in the UK (CSJ, 2021). The survey revealed substantial levels of public service use among the target group and therefore substantial potential for cost offsets, although there was limited evidence of actual cost savings during the Pathfinder period, because of the complex needs of service users, limited timescale, and small sample (see above).

2. Stakeholder attitudes are changing for the better… but there is still a long way to go

In achieving these outcomes, the Pathfinder demonstrated 'the art of the possible' with Housing First's target population and led to an increase in support for the approach amongst stakeholders who had previously been sceptical regarding its potential efficacy.

> It's shown that people who perhaps some of us thought would never be able to sustain a tenancy… that actually they can… I think for some people it is a… shift in mindset, isn't it?… I think just seeing the outcomes and seeing like, 'Oh gosh, they've managed to sustain that, I would never have thought'. (Local stakeholder)

The Pathfinder's effectiveness for a number of individuals who had previously been deemed 'unhousable' induced some of Scotland's homelessness service providers to adopt more flexible and/or less conditional forms of support. Further to this, it persuaded a cohort of housing providers to revise their procedures to cater more effectively for Housing First clientele, by, for example, reviewing the tone of communication templates (e.g., rent increase letters) and/or ensuring that automated arrears or antisocial behaviour escalation procedures were not triggered without prior liaison with Housing First support providers.

> Housing First tore up the rule book in a lot of respects… It was a massive shift in the whole concept of providing housing for a homeless person and… it's led to many different ways of allocating properties and considering applicants. I think it's been very positive overall. (Local stakeholder)

A great deal of progress was made in improving understanding of what Housing First is (and is not), and the needs of the target population, amongst stakeholders in housing and allied health and social care sectors. The training provided by the

Housing First Training Hub, and 'Connect' events hosted by Homeless Network Scotland which enabled shared learning amongst stakeholders involved with the Pathfinder, were particularly influential in this regard.

Some of the issues encountered, such as the tendency for Housing First tenants in one city to be 'bypassed' during the joint register housing allocations process for example, indicates that there nevertheless remains some way to go to redress stigmatised attitudes regarding what Housing First clients 'deserve' and/or are capable of, and further promote trauma-informed ways of working.

> People were bypassed for tenancies because people had a knowledge of who that person was, or they looked at the background of the individual… I do think we've got a wee bit of a way to go in terms of that education piece in challenging the stigma, in challenging the previous thinking when it comes to individuals who have complex needs. (National stakeholder)

3. Housing First is effective in preventing repeat homelessness… but other benefits will not be realised fully until barriers to healthcare are addressed

The limited availability and inflexibility of many of the statutory health and social care services that Housing First projects work in conjunction with have restricted the extent to which its potential benefits have been fully realised. The Pathfinder helped service users navigate what are often complex systems, but gaps in external provision and barriers to access remain. Difficulties accessing mental healthcare for this population are especially acute given rigid eligibility thresholds and prohibitive engagement requirements employed by many National Health Service (NHS) Boards for example.

> That's been one of the big deficits or our experience to date, is that there are other bits of the system that… aren't able to come alongside with that same degree of flexibility, that same degree of choice and autonomy. (National stakeholder)

Taken together, these issues impeded the distance travelled on many individuals' recovery journeys. They were also a source of immense frustration for frontline support workers, even whilst they were mindful of the pressure that health and social care service staff faced in a context where National Health Service and Local Authority Social Work services were suffering the effects of austerity-related funding cuts and pandemic-induced staffing shortages.

> Other services tend to be appointment systems. Three counts and you're out. That doesn't work for a lot of people… We need to look at how we provide, even statutory services across the piece, because… [they] need to be much more flexible than that. We're not going to change that overnight, unfortunately. (Frontline staff)

Flexible and integrated approaches to the healthcare of the population that Housing First targets have been endorsed at the national level within the UK (NICE, 2022) but it is widely acknowledged that broader system change is needed if these are to be actualised. The integration of health professionals into Housing First teams via secondment or other arrangements, which appears promising in large-scale pilots within England (MHCLG, 2021), may well be a prudent interim measure at least until such time as these systemic barriers have been eradicated.

4. Housing First improves lives…
but does not vitiate disproportionate risk of early mortality

A substantial body of international evidence indicates that people experiencing homelessness tend to have far worse health and die much younger than the general population at large (Aldridge et al., 2018; Morrison, 2009), and that this is especially true for the subpopulation that Housing First targets (Queen et al., 2017). The Pathfinder contributed to health improvements for some service users and was effective in encouraging many to begin to engage with healthcare but did not – and should never have been expected to – somehow magically undo the effects of the abuse and/or neglect that their bodies have suffered given prolonged exposure to life on the street, problematic substance use, and associated trauma.

A total of 6% of the individuals housed by the Pathfinder very sadly passed away. Mortality rates are not consistently reported by Housing First programmes, but the evidence available indicates that this figure is consistent with Housing First initiatives elsewhere. Key comparators include a survey of Housing First projects in England indicating that 6% of the total 762 individuals supported by 32 participating projects had died (Blood et al., 2021), and the findings of a randomised control trial in France wherein 6.5% of (23 of total n=353) Housing First tenants had passed away during the two-year study (Tinland et al., 2021).

Pathfinder provider interviewees reported that whilst some of these deaths were the result of long-standing physical health conditions, most were understood to be problematic substance use related. The Pathfinder operated in what is widely acknowledged as a 'drug deaths crisis' in Scotland, given that Scotland's drug-related death rate has risen to the point that it is now the highest in Europe, and more than three and a half times greater than that of the UK as a whole (NRS, 2021).

> This time last year [2020], and into the very beginning of this year [2021], there was a… very concerning number of drug-related deaths within the city… Part of the issue… was to do with street Valium… that were filled with horrible things, and killing people… There's been a huge amount of work… by providers and the police and the ADP [Alcohol and Drug Partnership]… to try and address that… because it was staggering and terrifying. (Pathfinder provider)

The risks for Housing First tenants were thought to have been exacerbated by the pandemic given its impact on drug markets and catalytic effect on increased and riskier patterns of problematic substance use internationally (Roe et al., 2021). [5] On this, interviewees reported that the number of deaths reduced when restrictions on social contact were eased, but it was unclear what future trends might entail. It is also notable that the Scottish Drug Deaths Taskforce recently endorsed Housing First, calling for its expansion and replication of its principles in other services as means of mitigating risk (Scottish Drug Deaths Taskforce, 2022).

In sum, it seems that Housing First can improve individuals' lives dramatically, but also that it does not entirely counteract service users' risk of early mortality (see also Tinland et al., 2021). This is an extremely sensitive subject, but one that stakeholders should be encouraged to have honest and frank conversations about, not least to support those aiming to devise interventions which reduce levels of risk for drug users.

5. Implementational 'sticking points' are to be expected… and will shift over time

Strong political commitment at the highest level was consistently identified as a key factor facilitating the implementation of Housing First in Scotland. Even so, Pathfinder experiences indicate that barriers will almost certainly be encountered when Housing First projects are initially developed and/or scaled up. The location and nature of these varied depending on factors such as provider configuration or consortium size, the degree and nature of involvement of statutory bodies (most notably local authority Health and Social Care Partnerships), and local housing market conditions.

> What we've found across each of the areas… is that the blockage and the barriers, and who's got the responsibility or the authority to fix them, changes. So it isn't… that there's been one big problem that's remained the thing that we need to keep chipping away at… Month-to-month the problem shifts. Of what it is that's causing a slowdown; of what it is that's preventing people getting into tenancies. (National stakeholder)

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[5] Specifically, research indicates that the pandemic seriously disrupted drug supply chains internationally, including in Scotland, with decreased availability and increased prices prompting the use of alternative substances which in turn heightened the risk of changes in users' tolerance and overdose. Compounding this, a deepened sense of isolation, loneliness, anxiety, and boredom during the pandemic catalysed both increased and riskier patterns of problematic substance use (Roe et al., 2021).

As the quotation above notes, a key point of learning was that stakeholders should expect these sticking points to shift over time as Housing First projects become embedded and mature. By way of example, Pathfinder experiences indicate that at times it may be that local municipalities are accused of stalling progress given procurement logistics or referral process technicalities; on other occasions blame may be directed at voluntary sector providers for failing to recruit staff quickly enough to meet demand; at yet other points it might be that housing providers are criticised for not doing enough to provide or prioritise housing for Housing First clientele.

6. Joint working goes a long way…
but is too often reliant on personal relationships and goodwill

Collective problem solving is essential when attempting to overcome the kinds of issues described above. Intensive joint working enabled stakeholders to overcome many operational challenges and increased levels of buy-in to Housing First at the strategic level, even if this did not necessarily always filter down to staff in frontline roles (see above). Collaborative efforts 'moved mountains' to the benefit of service users in numerous situations. That said, the resolution of issues often hinged on personal relationships between and/or the goodwill of individual stakeholders. This is highly problematic given the risk that Housing First users will lose out if/where relationships between key stakeholders are strained and/or commitment to Housing First sporadic. Critically, it underscores the need for broader systems change to overcome the systemic and structural barriers to access housing and treatment that the target population continues to face.

> There were some amazing stories of joint working… based around relationships and people working together, but there's no absolute consolidated framework… To me, that's a system weakness… It should not be down to chance of whether somebody gets on with somebody as regards to whether someone is going to get the service they need. (Local stakeholder)

On a related point, there was a high level of malcontent regarding the fact that local authority housing departments 'picked up the bill' for Housing First during the mainstreaming process. This was allied with a very strong call for cross-sector investment in Housing First given the benefits for service users and substantial potential for public cost offsets recorded.

> This just absolutely has to be seen as a joint commissioning endeavour… particularly from across health and social care and ideally out into community justice as well as housing and homelessness… We want access to these more diverse budgets… because the people that those budgets are designated for are the same people that we're talking about… and its homelessness that's picking up the tab. (National stakeholder)

In making a case for cross-sectoral funding, it is worth recalling the origins of the Housing First approach as initially devised in New York in the 1990s, in that it was not intended to be a 'housing' intervention *per se* but rather a holistic service promoting the recovery of some of society's most vulnerable members – within which rapid provision of settled housing is but one (crucial) ingredient (Tsemberis, 2015). On this subject, a number of interviewees proposed that cross-sectoral input and longer-term security of funding might be facilitated by positioning Housing First within the new National Care Service recommended in the recent Independent Review of Adult Social Care in Scotland (Scottish Government, 2021b).

7. Fidelity to the core principles of Housing First is achievable… but also fragile

Most of the Pathfinder projects succeeded in operationalising the majority, if not all, of the seven principles of Housing First (specified above) to a relatively high degree in the first two years of operation. Some deviations were however evident in some areas. Where they occurred, departures from the principles resulted from either: a) deviations in programme design (e.g., restriction of eligibility to individuals who demonstrate commitment to engagement during a six-week assessment process in Dundee); or b) deviations in programme delivery, that is, the effects of (external or internal) factors which inhibited projects' ability to deliver the service as intended (e.g., bypassing of Housing First clients in housing allocations in Edinburgh and temporarily higher than intended caseloads resulting from staff shortages in Glasgow).

Changes to consortia composition and modes of delivery, variably articulated across the Pathfinder areas during the mainstreaming process during the third year, compromised fidelity in a number of ways. Many interviewees expressed grave concern regarding increased staff caseloads in some areas, given indications that when staff supported more individuals than was manageable, support delivery tended to focus on crisis resolution (and on tenancy sustainment specifically) at the expense of other (non-housing) aspects of service users' lives. Excessively high caseloads also compromised staff wellbeing.

> They've [tenants have] moved from the Pathfinder where they had extremely intensive support to [name of new provider] where the service… is lacking in resource currently and these individuals are not being provided with the same level of support that they had through the Pathfinder. As such, they're not succeeding in the same way as they were before. (Local stakeholder)

Concerns were also raised within at least some areas in relation to escalation of expectations during the mainstreaming phase regarding service user engagement as an eligibility criterion, pressure to limit the duration of support, and/or potential compromises to the separation of housing and support.

> It's about working with them [service users] to get them to the stage that Housing First might be appropriate… Going forward, we have to get them to be engaging otherwise we have to say to them, 'Well, no, if you're not going to engage we can't, we're not here to chase you'. *(Post-transition provider)*

> I've been asked… 'Have you thought about exit strategies'? I was like 'I'll bring the seven principles to the meeting next time I come and you just won't see exit strategies on there!' (Pathfinder provider)

> We've seen some local authorities set up their own Housing First departments within the council, which breaks some of the principles right away. How are you separating housing and support because they're the main housing provider and providing the support? (Pathfinder provider)

This erosion of fidelity is worrying given the potential negative influence on the likelihood of some individuals being accepted into Housing First (i.e., potential 'creaming' of referrals) and the adequacy of support provided (particularly its intensity, flexibility, and duration), alongside international evidence that Housing First programmes with weaker levels of fidelity generate less positive outcomes (Davidson et al., 2014; Goering et al., 2016). There is a very strong call for fidelity to Housing First principles to be monitored very closely going forward for these reasons.

8. Housing First staff have a tough gig…
and should be supported (and paid) accordingly

The success of Housing First hinges, in large part, on the relationship between frontline staff and individuals being supported. The support worker's role is a difficult one, given the challenging behaviours they often encounter, intensity of support required by many tenants, and barriers frequently encountered when brokering external support.

> I love my job. But it's really hard sometimes… I can cope with being told to fuck off when [name of client] is having a bad day. It happens!… But I get so tired of fighting to get him… treatment. It's exhausting. Like, why should I have to push and push to get him something he obviously needs? (Frontline staff)

The Pathfinder highlighted the critical importance of providing adequate levels of supervisory support and opportunities for reflective practice. Provision for clinical supervision, whilst only offered in some Pathfinder areas, was also regarded as good practice given the very real risk of exposure to vicarious trauma and/or potential burnout when working with Housing First clientele (Theodorou et al., 2021).

> The things that we're dealing with every day, we need… to be looked after, it's very important… [Debrief sessions] save you taking the stuff home, you know what I mean? (Frontline staff)

> We've had the reflective practice groups run by a clinical psychologist… That's been invaluable… Its a group thing so you can talk about things, but then [the facilitator's] guidance and advice has been very enlightening. (Frontline staff)

On a related issue, many interviewees called for better remuneration for Housing First staff given recognition of the challenges of and specialist expertise required in the role and to maximise providers' prospects of recruiting and retaining high calibre staff.

9. Housing First works for most people it targets… but we still need solutions for others

Housing First 'works' in terms of resolving homelessness for the vast majority of people supported. Qualitative evidence compiled during the evaluation neverthe-less indicated that Housing First is not an appropriate solution for three groups. First amongst these are individuals who lack capacity, due to cognitive impairment associated with a severe learning disability or brain injury for example, who are therefore unable to comprehend fully the consequences for breaching (standard) tenancy agreements.

> We're transitioning a couple of cases at the moment over into other services, because their needs are… superseding the… support that we can provide… people with cognitive impairment and maybe ARBD [alcohol related brain damage]. (Frontline staff)

Secondly, Housing First is not suitable for individuals who are so unwell that their healthcare needs exceed what can realistically be catered for with Housing First.

> What we're also seeing now as well is… [referrals where] it's almost care home-like is what they're really needing… Providing personal nursing-type care is not a [Housing First] support worker's role. (Pathfinder provider)

The third group is comprised of individuals who do not want Housing First (at the point it is offered, at least) because they do not want the responsibility of an independent tenancy (even with Housing First support) or, in some cases, would rather not live alone.

> So we had one guy, he said, 'I don't want to be Housing First, I don't want my own tenancy, I wouldn't be able to manage it.'… If I'm honest, I think we pushed the guy into it… It happened very quickly, he stopped living there and he went back to rough sleeping, and we could not get him to return to that property. (Local stakeholder)

Alternative interventions offering intensive (24/7) support are needed for the first two of these groups (those lacking capacity or with very high healthcare needs) given that they require a care-led rather than housing-led solution (Reid, 2021). Further thinking and evidence are required to identify appropriate interventions for the third group (those who do not want Housing First), as well as for the minority of individuals who have been unable to sustain tenancies even with Housing First support. Devising solutions for them must remain a key priority for policy and research communities internationally.

Conclusion

In conclusion, many valuable lessons were learned during the Pathfinder period, most notably that Housing First delivery at scale in the Scottish context may well be difficult, but is achievable, and is indisputably worth pursuing given its effectiveness at resolving homelessness for a group traditionally poorly served by mainstream services and potential for substantial costs savings to boot. The programme shed light on a number of factors that facilitate and inhibit the successful delivery and scaling up of Housing First within the UK, at least some of which will no doubt resonate with the experiences of stakeholders in other international contexts.

Looking forward, if Scotland is to retain its status as an international pioneer in Housing First implementation, it is critical that the level of political commitment it has commanded up until this point is maintained and that fidelity to the core principles is preserved given their centrality to its effectiveness (Davidson et al., 2014; Goering et al., 2016). Evidence of a nascent ripple effect, catalysed at least in part by the Pathfinder's demonstration of 'what works' for people experiencing homelessness with complex needs, gives ground for optimism that trauma-informed ways of working may become increasingly embedded in day-to-day practice within and beyond Scotland's homelessness services. Many operational challenges remain, but if such ripples increase in both reach and magnitude in the future, the Pathfinder will have left an extremely positive legacy indeed.

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