

A Model of Housing Stability for People With Serious Mental Illness

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ABSTRACT

Housing programs are complex social interventions. Research on housing for people with mental illness has proceeded without a framework for integrating emerging findings and guiding new research directions. This paper describes a definition and model of housing stability developed with stakeholders in 3 local housing systems for people with mental illness. The model describes housing stability as a dynamic relationship among 3 factors (person, housing, and support) that are influenced by broader system influences. The model is discussed in terms of its usefulness for integrating existing research, guiding new research, and integrating research with practice to improve housing practices.

Over the past two decades there has been some progress in research on housing programs for people with serious mental illness. Despite the methodological limitations of much of this research, including the absence of more rigorous experimental designs (Newman, 2001), there is emerging evidence that a variety of attributes of housing are associated with better outcomes for consumers of mental health services. These attributes include housing that is well-maintained, that supports individual choice and control, that is managed in an empowering and democratic fashion, and that provides consumer-centred, rehabilitation-oriented support (Newman, 2001; Parkinson, Nelson, & Horgan, 1999).

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Despite this progress, our knowledge of what makes housing programs effective remains limited. Housing researchers lack a general agreement on the broad goals of housing and how the various elements of housing programs and systems work together to achieve these goals. They also lack a framework for integrating existing research findings and for pointing to those areas where more research is needed. Newman (2001) helpfully identified three research conceptualizations of housing: housing as an outcome, housing as an input or independent variable, and housing as both an input and outcome. The conceptualization of housing as outcome includes a consideration of those factors that determine if, where, and what kind of housing people acquire. According to Newman's review, few studies have employed this conceptualization. More common is the conceptualization of housing as an input or independent variable. The 20 studies reviewed by Newman examined mental health outcomes associated with a range of housing variables, including access to housing subsidies, neighbourhood features, urban and rural settings, the number of residents, and qualities of the dwelling. A third conceptualization identified by Newman was one that saw attributes of housing as both inputs and outcomes, such as in research that examined the relationship between housing quality and its affordability. However, Newman found that few researchers have employed this conceptualization, and those who did so often reported that independent apartments were associated with greater housing and neighbourhood satisfaction.

Newman's (2001) finding that most research has been concerned with outcomes related to well-being that are attributable to particular housing attributes is supported by the work of Sylvestre, Nelson, Sabloff, and Peddle (2007). They analyzed the values underlying the provision of housing programs and identified six housing values, which they grouped into two categories: therapeutic values and citizenship values. Therapeutic values refer to the benefits for individuals attributable to the quality of the relationship between the person and the housing and neighbourhood. These values include choice and control, housing quality, and community integration. Citizenship values refer to fair and equitable access to resources, to these resources being responsive and accountable to consumers and others in the housing system, and to consumers being informed and able to act on their rights in acquiring and maintaining housing. A review of research corresponding to each of the six values revealed that whereas much research attention has been directed at documenting the therapeutic benefits of housing, relatively little has focused on citizenship values.

These conceptualizations and values provide some insight into common research priorities and the areas where more research is needed. A review of the literature using these frameworks reveals that few studies have examined access to housing, including the barriers that people with serious mental illness may face due to disability, race, gender, income, prior legal involvement, or substance use. Also unexamined are effective strategies for supporting consumers in making decisions about the housing and support they want and need, and the effects on consumers of a limited housing supply that restricts their choices and requires them to accept whatever housing is made available to them. The values-based analysis demonstrates how little research is concerned with program accountability to consumers or with the protection of their legal rights as tenants.

A broader concern is that much of the existing research fails to locate housing within programmatic, social, or political systems. Organizational and governmental policies, government funding

decisions regarding housing, support programs or income entitlements, social attitudes toward people with serious mental illness, and changes in housing markets all influence the quality, type, and availability of housing for consumers. Yet housing research lacks general agreement on the broad goals of housing and an understanding of how the various elements of housing programs and systems can work together to achieve those goals. Apart from the conceptualizations proposed by Newman (2001) and the values-based approach developed by Sylvestre et al. (2007), neither program theory, nor theory in its broadest sense, has been a prominent feature of research on housing and support programs.

Yet theory of some sort is essential for deriving hypotheses for research and for organizing and explaining the research findings (Newman, 2001). Additionally, a proper evaluation of housing programs requires an understanding of program theory, consisting of assumptions about how various program activities are intended to produce benefits for people who participate in these programs (Rossi, Lipsey, & Freeman, 2004). The development of housing program theory has been hampered by a lack of understanding of the various components of housing programs. Such an understanding would serve as a guide to research by specifying how various program activities produce desired outcomes. For program planners and evaluators alike, it would enable the determination of how a program's activities and its allocation of resources to these activities contribute to the achievement of program goals.

Housing Stability as a Goal of Housing Programs

This paper focuses on housing stability as a goal of housing programs. There are certainly other goals; for example, reducing symptomatology, preventing hospital readmissions, and improving quality of life are all outcomes measured in housing research. Housing stability, however, is a housing-specific goal that is more proximal and conceptually related to these other goals. It can be reasonably assumed, for example, that stable housing is intimately tied to both mental health and perceptions of quality of life. Because housing is an important social determinant of health, housing stability can also be linked to more distal outcomes such as physical and mental health, social integration, and citizenship (Dunn, 2002), as well as being implicated in the process of recovery from serious mental illness (Anthony, 1993).

Although the term *housing stability* is frequently used in housing research, it remains inconsistently and inadequately defined. The term is usually used as an outcome variable in research or housing program evaluations, but the concept is rarely examined and discussed in its own right. Housing stability and related terms (such as "stably housed," "residential instability," "tenure in housing") have been most often operationalized in research as the duration of stay in housing or the number of disruptions in housing status over a period of time such as 6 months or 1 year (Baier, Murray, North, Lato, & Eskew, 1996; De Leon, Sacks, Staines, & McKendrick, 1999; Dickey, Latimer, Powers, Gonzalez, & Goldfinger, 1997; Hurlburt, Hough, & Wood, 1996; Shern et al., 1997; Srebnik, Livingston, Gordon, & King, 1995; Tsemberis & Eisenberg, 2000). The time period appears to be determined by the timing of the follow-up measurement rather than by a conceptualization of housing stability. According to these operationalizations, longer stays in housing represent greater housing stability while more frequent housing disruptions are an index of greater instability.

Other operationalizations have identified housing quality as an element of the housing stability concept. Bebout, Drake, Xie, McHugo, and Harris (1997) categorized consumers in their study as “stable” or “unstable” based on whether they maintained high-quality housing. Bebout et al. also characterized consumers as stably housed if they maintained continuous high-quality housing with no negative moves, such as eviction. In their review, Parkinson et al. (1999) reported that poor-quality housing is associated with lower levels of housing and life satisfaction, negative affect, and maladaptive behaviour. More ambitious definitions of housing stability have introduced support as an element. Breakey and Fischer (1995) identified alienation from community life as a component of the lowest extreme of residential stability. According to Appleby and Desai (1987), residential instability in the form of homelessness is an end process of a series of disengagement experiences. In contrast, residential stability entails maintaining enduring and consistent ties to a supportive environment.

The foregoing discussion provides some indications as to what a comprehensive definition of housing stability should incorporate. Whereas housing stability may involve continued residence in a particular dwelling, equally important are considerations of the nature of the changes in housing should they occur, the quality of the dwelling, and the extent to which suitable support is available. The existing literature suggests that housing stability involves two processes: the ongoing process of living in and maintaining the housing, and the times when people must change their housing. Changes in housing bring opportunities for improvement or deterioration, and point to the importance of mechanisms for ensuring that individuals maintain continuous access to housing that suits their needs.

There are limitations to this view of housing stability. First, it does not provide an ecological perspective on broader factors that contribute to housing stability or instability. It is a common feature of housing research to explain housing success, or failure, in terms of the personal characteristics of residents, housing qualities, or program attributes. However, housing successes or failures can also be attributed to broader systemic factors that influence the quality of housing and programming that is provided, or the extent to which these services match consumer characteristics and needs.

A second limitation is that this view is not informed by the housing field itself. Specialized housing programs are complex social interventions. Providers of housing confront challenges in property management, tenancy issues, program admissions, the provision of support, as well as in maintaining partnerships to provide a comprehensive program. Providers operate in a limited funding environment and, at times, in an unreceptive community and municipal context. This complexity has not been reflected in housing research to date. Consequently, there is value in pursuing a field-driven, practice-based model, informed by the perspectives of those who provide, as well as those who live in, the housing. A field-driven model could help to direct researchers toward practice-relevant studies, inform the development of new housing programs, and aid housing providers in communicating about their program to funders and policy-makers.

DEVELOPING A MODEL OF HOUSING STABILITY

A model of housing stability was developed and refined within the context of three studies conducted first in Toronto, Ontario, and subsequently in Ottawa, Ontario, and Halifax, Nova Scotia. The

purpose of the three studies was to develop a participatory approach to improve housing programs for people with serious mental illness (Sylvestre, Ollenbergh, & Trainor, 2007). In support of this goal, conceptual work was conducted with stakeholders in a local system of housing dedicated to people with serious mental illness in Toronto. This work resulted in a definition and model of housing stability that were refined through feedback from participants in subsequent phases and from professionals at various academic forums where the work was presented. All aspects of this work received ethical approval from an ethics review board of a university-affiliated teaching hospital, and all participants in this research provided informed consent prior to their participation. Consumers were paid an honorarium for their participation in these studies.

Study 1: Developing a Model and Definition

The conceptual work began with a committee composed of 11 housing stakeholders in Toronto (6 housing providers, 4 consumers, and 1 family member) and members of the research team. The housing providers represented large providers of three forms of housing (custodial, supportive, and supported). Consumers included tenants of each of these forms of housing, as well as a representative from a consumer education and advocacy group, and a representative from a family group. The committee met on three occasions to discuss and define the concept of housing stability. Each meeting lasted several hours. Detailed notes were taken at each meeting and disseminated to committee members prior to the next meeting.

At the first meeting, several strategies were used to elicit an understanding of the housing stability concept. First, the group was presented with, and discussed, available definitions of housing stability. These definitions were quickly determined to be inadequate, leading the group to discuss the critical elements of good housing programs and the qualities of adequate housing. These elements included independence and freedom, personal satisfaction, comfort and a sense of home, good landlord-tenant relationships, safety, quality of the physical environment, location, supports that are available when needed, and clear standards. Finally, the group brainstormed word associations to complete the sentence, "People who are stably housed have . . ." This exercise produced 27 different associations.

Following this first meeting, the research team drafted an initial definition of housing stability, along with a graphic illustration of the issues that had been discussed. These materials were provided to the committee, along with detailed notes of the meeting. At the second meeting, the committee members refined the emerging definition and model. A central issue discussed at this meeting was the information necessary to support consumer choice and enable individuals to improve their housing. Consumers needed information about the housing market and system factors, the types of housing and support available, affordability, tenant rights, what constituted substandard housing, and how to get and move into new housing. The discussion helped to refine the housing stability definition and model, and these refinements and detailed notes were distributed to the committee.

At the third meeting, participants again improved the definition and model. Discussions emphasized the importance of flexible housing programs, housing quality and maintenance, accountable program management, choice, a housing environment that promotes positive change, and collaborative

monitoring on an ongoing basis of the fit between the individual and the housing and support. Following these discussions, the research team produced a definition and model of housing stability (Centre for Addiction and Mental Health, 2001).

Refining the Model

The resulting model, along with a definition of housing stability, was further refined in two projects. The first project involved work with 40 representatives from 21 organizations in Toronto—from housing, support, and consumer organizations, and from municipal and provincial levels of government—to develop 40 benchmarks for supportive housing derived from the housing stability model, and to recommend practices for achieving these benchmarks (Centre for Addiction and Mental Health, 2003; Sylvestre et al., 2007). In addition, the model and study findings were reviewed at a workshop attended by 46 people from municipal and provincial governments, and from consumer, housing, and community support organizations.

The second project assessed the applicability of the housing stability model, along with the benchmarks and recommended housing practices, to housing systems in Ottawa and Halifax (Centre for Addiction and Mental Health, 2005). These studies involved consumers and service providers from two agencies in each city. The participants made numerous recommendations for improving the model. They emphasized the overlapping concerns of the person, his or her housing and the support available; the critical importance of monitoring the fit between individual needs and the available housing and support; the mutual accountability of individuals and service providers and the importance of communication between them; and the education of all concerned.

The housing stability model has also been presented at numerous professional and academic conferences in both Canada and the United States. The definition and model have received considerable support from individuals from diverse geographical locations, who have a diverse set of relationships to housing (e.g., providers, consumers, family members), and who are involved in a variety of housing systems and approaches.

A DEFINITION AND CONCEPTUALIZATION OF HOUSING STABILITY

Based on this work, housing stability is defined as the ongoing ability of individuals to access, over the course of their lives, housing that promotes their optimal health and quality of life. Unlike static operationalizations of the concept that have emphasized the ability to maintain housing for a specified period of time, the current definition emphasizes the ability to access appropriate housing over a lifetime. As important as keeping good housing is the ability to get the housing people need when they need it. This view recognizes that changing housing arrangements is normal. Each of us has changed our housing at various points in our lives in response to changing needs or preferences, whether by moving to different housing (in terms of type or location) or by modifying our existing housing (e.g., renovations, changes in support providers).

This definition of housing stability recognizes that housing situations are dynamic and that housing stability is promoted by flexible or adaptable dwellings, housing programs, and housing systems that

can respond to and accommodate change. Change can occur in a number of areas and on a number of levels, including the individual, the housing, the support, or the broader systems. Individuals change in terms of their needs, abilities, and preferences. Dwellings also change over time. If housing is not maintained, it will deteriorate. When consumers share dwellings, housemates may come and go. Neighbourhoods can also change, bringing new neighbours, shifting the degree of safety, and affecting the accessibility of resources and amenities. The available professional support can change when staffing changes, and informal support is affected by gains or losses to an individual's social network. Finally, change can occur at the level of programs, agencies, interagency partnerships, government systems, or other systems (e.g., housing markets). System-level changes can affect the housing of consumers, their income, or their access to support, other programs, and treatment.

Change at any of these levels can create greater or lesser instability by affecting the relationship between the person, the available support, and the housing. Greater instability may arise from a poor fit between the individual and the housing and/or support, and if not addressed it can threaten the housing situation. When housing no longer suits a person's needs, is of poor quality, or is lacking in adequate or appropriate support, that person is susceptible to distress, dissatisfaction, or reduced quality of life. These outcomes may, in turn, precipitate relapse, hospitalization, or hasty housing exits leading to new housing situations that are just as inadequate or worse.

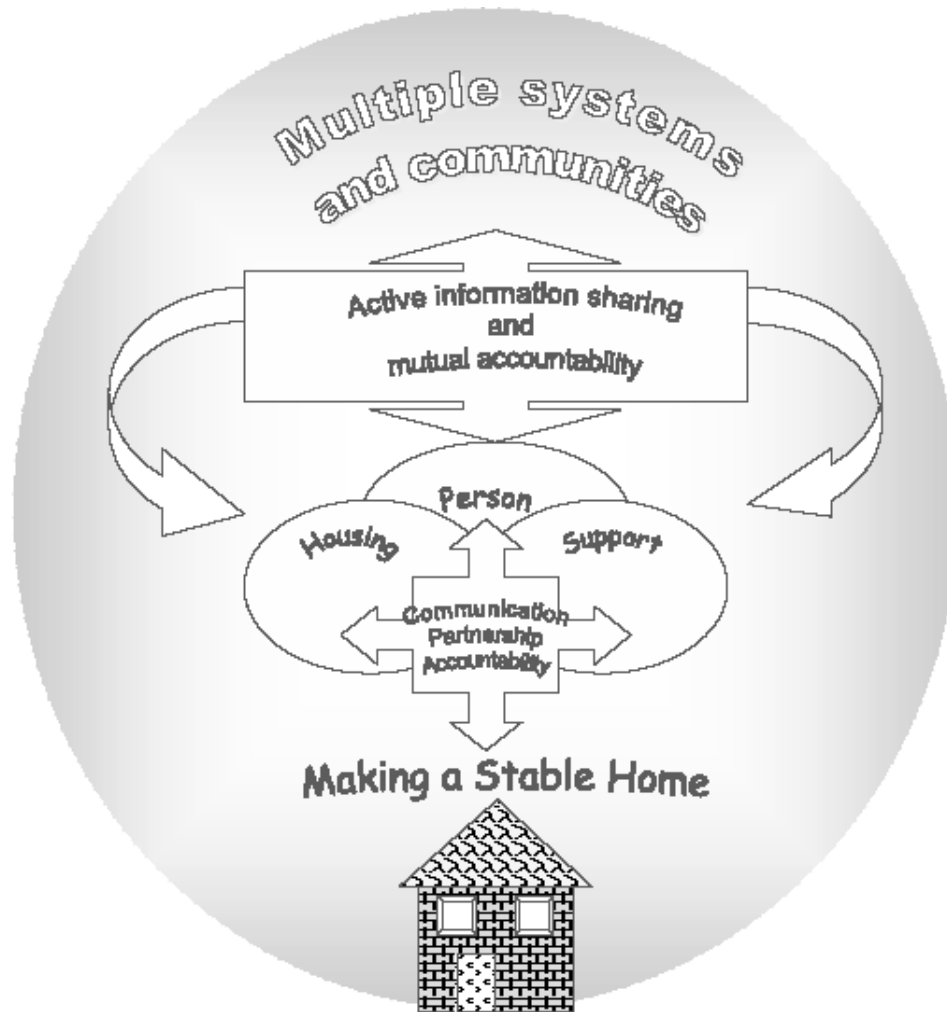
Anecdotal evidence from consumers suggests that one of the greatest threats they face is their inability to modify or change housing when it becomes unstable. Barriers can include agency policies that do not support housing transfers, a lack of information on housing options, a lack of available housing, and limited incomes that do not allow consumers to compete in private housing markets and find housing of the type or in the neighbourhoods they desire. These barriers are also psychological and social, related to individuals' perceived or actual lack of power to effect change in their own lives, and their inability to find people or resources to help them in improving their housing situations.

Thus, the definition of housing stability locates the focus on issues of access, flexibility, and adaptability of housing programs and systems. Housing stability is promoted when consumers have access to resources to modify their dwellings or find new ones, to support that is responsive to their changing needs, and to programs and agencies that are flexible and can accommodate the changing needs of individual consumers and consumer groups. Housing stability is also promoted by health, mental health, and housing systems that adapt to the changing needs and preferences of consumers and that ensure that an appropriate range of housing is available and easily accessible to consumers.

The model of the definition of housing stability developed through this work is presented in Figure 1. It shows the dynamic interrelationships among factors associated with the person, housing, and support that are critical for promoting stable housing situations. The figure also illustrates how the interrelationships among these factors are affected by broader systems and communities. Specifically, the model presents two sets of mechanisms that can promote a better fit between individuals and their housing and support.

First, the model suggests that problems of fit between individuals and their housing and support can be addressed through improved communication, partnerships, and accountability among all involved

Figure 1
A Model of Housing Stability



parties. Each of these mechanisms requires the active participation of consumers, housing providers, support providers, and significant others as identified by consumers. Improved communication can help to address a number of issues such as lack of housing information or knowledge of tenancy rights, problems with housing maintenance or management policies, and inadequate or inappropriate support.

Successful housing situations are built upon partnerships among consumers; their families, friends, or advocates; housing providers; community support providers; treatment providers; and other individuals or groups. Good partnership practices—including communication, openness, clear agreements, effective decision-making, and conflict resolution—are essential for maintaining stable housing

situations. A key to good partnerships is accountability, in which all partners are accountable to one another to fulfil their obligations. For example, consumers and housing providers have obligations to abide by tenancy agreements, while support providers follow support plans developed in partnership with consumers.

The second set of mechanisms involves active information sharing and accountability at systemic levels. Housing provided through health, mental health, or social housing systems is supported by a complex web of individual agencies, working in an array of partnerships, and funded and managed by one or more levels of government. Well-managed and well-functioning housing systems require each member of the system to actively produce and share information. Individual agencies can contribute by collecting and disseminating basic information about the housing and who lives there to new staff, consumers, family members, other housing providers, and government funders and administrators. Agencies also have a role in evaluating programs and disseminating findings. Similarly, system funders and managers can contribute by collecting, disseminating, and using system data to effectively plan system developments, improvements, and resource allocations. These complex systems require that partners be accountable for effectively playing their system roles including collecting, disseminating, and using all available information.

DISCUSSION

In the introduction to this article we identified three areas that are lacking in housing research: theory (specifically program theory), a framework for organizing existing research findings, and a conceptualization and framework that could guide new research. In this discussion we explore how the conceptualization and model of housing stability presented here may contribute to each of these areas.

Housing Theory

One concern about housing research is the extent to which it has not been informed by theory. Theory is a source of hypotheses to be tested and provides a working explanation for how complex interventions like housing programs are intended to produce particular outcomes. The proposed conceptualization of housing stability makes a number of theoretical contributions. At its core, there is an implicit empowerment-based theory that states that stable housing requires consumers who are active, informed, supported, and protected by their tenancy rights. It suggests that stable housing requires consumers who choose their own housing and direct their own support, and who are informed of the housing options available to them and their rights as tenants. They have support to make informed decisions, to address their housing issues, and to achieve their personal goals.

The model suggests that housing stability is built upon a dynamic relationship between the person, housing, and support. In essence, housing stability requires ensuring an ongoing good fit between an individual and environmental and programmatic characteristics. Whereas research has previously linked housing exits, instability, or homelessness to individual-level behaviours and characteristics, according to this model these outcomes are attributable to housing or support that is ill-suited to consumers and/or unresponsive to their needs.

A key question arising from this view is how best to conceptualize and assess “fit.” This work provides the following suggestions. Fit likely has both subjective and objective components. At a subjective level, poor fit may be assessed through consumers’ evaluations of satisfaction or appropriateness of their housing and support. More objectively, fit may be assessed in terms of the appropriateness of housing support given a particular consumer’s needs, abilities, and resources. Subjective and objective indications of poor fit may lead to housing instability through common or distinct pathways. Poor subjective fit may lead to instability via stress, or a reduced sense of empowerment or self-efficacy, which in turn may lead to hasty and unplanned housing exits that exacerbate symptomatology, precipitate rehospitalization, or thwart the achievement of desired goals. Objectively assessed poor fit may be associated with poorly maintained housing or contraventions of tenancy agreements. In terms of common pathways, poor fit may arise from environmental stressors (e.g., noise, crowding, poor quality) that are subjectively troubling, and which objectively present challenges to daily living that the individual does not have the ability or the support to successfully meet.

With respect to program theory used to guide evaluation, the model identifies four interdependent domains that must be addressed in order to produce stable housing: the *person* seeking or striving to keep housing; the *housing* and its physical and social characteristics; the formal and informal *support* available; and *system* factors involved in agency operations, interagency partnerships, and the socio-political mental health and housing systems. The conceptualization suggests that there are both within-domain and cross-domain objectives that must be achieved in order to promote housing stability. For example, within the person domain, objectives can include documenting housing and support needs and preferences, and ensuring that these are met. Within the housing domain, objectives may include, among others, ensuring that housing is well maintained. Within the support domain, objectives may include ensuring that consumers are supported to keep their housing, responding to crises as they arise, and helping consumers to meet their personal goals. Finally, within the systems domain, objectives may include developing agency policies that promote consumer empowerment and access to appropriate housing and support, and ensuring that staff members are able to satisfy the needs of consumers. The systems domain also includes objectives related to effective interagency partnerships, as well as the dissemination and use of information that can help to improve program practices and system performance.

Cross-domain objectives may include strategies for ensuring that multiple partners in housing situations actively participate in monitoring the relationship between the person, housing, and support. Key objectives are related to assessment of fit, partnership agreements, and communication among relevant partners. Notably, the conceptualization and model have explicit ecological assumptions, linking objectives of consumer empowerment, “fit,” and the capacity to change housing to agency policies, interagency partnerships, and housing system characteristics. At a broader level, objectives can be identified related to agencies playing active roles in their housing or mental health systems by disseminating findings from the evaluations of their programs and using available research evidence to improve program effectiveness.

Integrating Existing Research Evidence and Providing Directions for New Research

The definition and model of housing stability are also useful for integrating available research evidence and for providing new research directions. For example, the four dimensions identified in this conceptualization can be used to integrate findings within and between dimension variables and relationships. Within the person domain are variables such as preferences, needs, abilities, satisfaction, and empowerment. Within the housing domain are a range of housing and neighbourhood attributes such as the form and quality of the housing, and the qualities and resources in neighbourhoods. Within the support domain are the types and qualities of support that are made available. There is the potential within this framework to integrate findings or generate new research questions related to within- and cross-domain relationships among variables. Within the person domain, for example, one could include findings from studies of the relationship between housing preferences and housing satisfaction, or between housing satisfaction and empowerment. Within the housing domain, one could include findings from studies consistent with Newman's (2001) input and outcome formulation of housing (e.g., the relationship between affordability and housing quality). Cross-domain research questions could examine relationships among factors associated with the person (satisfaction, empowerment), the housing (quality, location), and the support (amount and quality of support available).

Perhaps the most important contribution of this conceptualization is the ability to link systemic factors to both within-domain variables and cross-domain relationships. Agency- or interagency-level factors such as the level of staff training and the effectiveness or density of interagency partnerships may be linked directly to consumer satisfaction, housing quality, or the effectiveness of support. More generally, it might be possible to trace relationships between broader policy or systemic changes (e.g., income entitlements, increases to social housing base, decreases to agency funding for housing maintenance or support) and outcomes within the person, housing, or support domains.

Limitations and Implications of the Model

Despite the merit and validity of this conceptualization of housing stability, the model has some limitations. First, although the model makes significant implicit assumptions about the psychological and social aspects of housing, its representation and explication of these factors is somewhat underdeveloped. This is likely because the model was developed to describe housing practices. Second, the depiction of a well-functioning housing system was heavily influenced by the starting concept—housing stability. Researchers working from other suitable overarching goals for housing programs or housing systems might emphasize other objectives and dimensions of housing, ultimately producing other descriptions of what well-functioning systems can accomplish. Third, most of the stakeholders who participated in this work have had more experience with supportive housing (i.e., congregate or clustered-apartment style housing with some support linked to the housing) rather than with supported housing (i.e., independent housing scattered throughout the community with support linked to the individual; Parkinson, Nelson, & Horgan, 1999). It is possible that the concepts and research directions arising from this work are more applicable to the former approach to housing than to the latter.

A final limitation relates to the focus on housing programs, and an underdeveloped understanding of other broader factors that affect housing stability. Stigma, particularly as expressed in community opposition to housing programs, can affect housing stability in a number of ways. Strongly organized communities can thwart the development of new housing, which means that the programs located in those communities are least likely to provoke opposition. Notably, independent supported housing (apartments acquired through housing subsidies) can be introduced with little community opposition. Stigma can also be expressed through the allocation of limited funds for new housing, the maintenance of existing housing, or the provision of support to individuals living in the housing. Each of these factors can affect individuals' experience of their housing and compromise their housing stability.

Despite these limitations, this work has important implications for the delivery of and research on housing, housing programs, and housing systems. The dynamic nature of housing situations and the influence of systemic factors on housing experiences have received scant attention to date in the literature. Much of the research is preoccupied with individuals as they enter housing programs and shows little interest in those who have been housed for many years. This work suggests that many of these individuals are finding themselves in situations that are increasingly unsuitable, and that they have minimal capacity to improve these situations. This issue is an important area for future investigation.

This work has also suggested that we broaden our focus beyond specific housing programs to study housing systems more broadly (Sylvestre et al., 2006; Sylvestre et al., 2007). Relationships between the person, housing, and support are subject to forces at these levels, yet housing research has paid little attention to these issues. Individuals are embedded in complex systems that have many effects on their experiences and opportunities. Often, poor outcomes are misattributed to personal failings, and how individuals have been disadvantaged by factors beyond their control is not recognized. Professionals and researchers can advocate for housing stability both by locating barriers at the variety of ecological levels at which they can be found, and by identifying the means to redress these barriers.

RÉSUMÉ

Les programmes de logement constituent des interventions sociales complexes. Jusqu'à maintenant, les recherches qui ont été faites sur le logement pour les personnes ayant des problèmes de santé mentale ne comportaient aucun cadre pour intégrer les conclusions des plus récentes études, ni pour établir des pistes pour de nouvelles recherches. Dans cet article, nous donnons une définition de la stabilité en logement et nous en proposons un modèle qui a été conçu par des intervenants de 3 systèmes locaux de logement pour les personnes ayant des problèmes de santé mentale. Ce modèle décrit la stabilité en logement comme étant une relation dynamique entre 3 facteurs (la personne, le logement et le soutien), eux-mêmes influencés par des éléments d'un système plus large. Nous analysons ensuite ce modèle pour évaluer son utilité en tant qu'outil permettant d'intégrer les recherches existantes, de guider les recherches à venir et d'intégrer les recherches comportant des volets pratiques pour améliorer les façons de faire dans le domaine du logement.

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