Evaluation Tools for Transition Housing Program

Includes: **Final Report**

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Abstract

Homelessness is a serious problem in North America today. In 1990, women comprised between 15% and 29% of the homeless population and are steadily increasing because of multiple economic, historic and political factors. Semi-independent living is a part of transitional housing that has been designed to promote independent living for women who were previously homeless. Although transitional housing has been recently developed, the long-term outcomes for individuals who have participated in a transitional housing program have yet to be investigated. A review of literature and the program itself were used to create an exit-interview as well as a follow-up interview of previous residents 2-5 years post program. In year one of a five year project, conclusions are yet unavailable as to the positive effects of transitional housing. Transitional housing is still in the trial stage in most cases, because few individuals have reached a five year alumnus status.

Keywords

Abuse:

to treat in a harmful, injurious, or offensive way; can be physical, verbal, or psychological

Addiction:

the state of being enslaved to a habit or practice or to something that is psychologically or physically habit-forming, as narcotics, to such an extent that its cessation causes severe trauma

Affordable Housing:

both subsidized and non-subsidized housing provided for people with no means to buy or rent properties on the open market due to low income

Client:

a person using the services of a social services agency

Counselling:

advice; opinion or instruction given in directing the judgment or conduct of another.

Dignity:

bearing, conduct, or speech indicative of self-respect or appreciation of the formality or gravity of an occasion or situation.

Feminism:

the doctrine advocating social, political, and all other rights of women equal to those of men.

Homeless:

having no home or permanent place of residence

Human Rights:

fundamental rights, esp. those believed to belong to an individual and in whose exercise a government may not interfere, as the rights to speak, associate, work, etc.

Mentally ill:

any of various psychiatric conditions, usually characterized by impairment of an individual's normal cognitive, emotional, or behavioral functioning, and caused by

physiological or psychosocial factors. Also called *mental disease*, *mental disorder*

Poverty:

the state or condition of having little or no money, goods, or means of support; condition of being poor; indigence

Shelter:

an establishment that provides temporary housing for homeless people

Transition:

movement, passage, or change from one position, state, stage, subject, concept, etc.

Introduction

There are several definitions of homelessness, yet there seems to be no universal definition. Sabine Springer proposes the definition of houseless, as a person sleeping in the street or other places not meant for human habitation and those finding shelter in institutions established by the public or private welfare system (1). It is important to establish that an individual taking shelter with a relative or friend can also be classified as houseless (1). Homelessness is a serious problem in North America today. In 1990, women comprised between 15% and 29% of the homeless population (2). The interaction of multiple economic, historic and political factors radically contributes to the increasing number of homeless people in today's society (3). In addition, there is also a lack of affordable housing, a decrease in the availability of rent subsidies, a reduction in public welfare programs, and personal and family level factors which all contribute to the increasing number of women who are deemed to be homeless (4).

There are many health concerns for those individuals who are homeless. Homeless individuals report having emotional distress associated with financial situations, mental health problems, addictions and crime (5). It has been determine that the prevalence of substance abuse is lower among homeless single women than homeless single men, but the rate of major depression is much higher in the homeless single women (6). In a study conducted in Toronto by Cheun and Hwang, the mean age at death of homeless women was 39 years, with HIV/AID and drug overdose being the most common cause of death for homeless women between 18 and 44 years of age (7). Conditions that commonly appear with advanced age appear in young homeless people many decades earlier than expected (8). Homelessness also increased physical illnesses, injuries and disabilities (5).

Many studies have focused on the contributing factors to an individual's poverty, yet few studies have been conducted as to how to help those in need. The proposed approach to helping these individuals is to transition them back into independent living, through support and semi-independent living. Semi-independent living, also known as transitional housing, is an opportunity for a homeless individual to reside semi-independently within a shelter (9). Transitional housing offers the benefits of living in a shelter, such as support and safety, but also allows the woman to live independently in her own apartment, permitting her to accept the responsibilities of house care and wellbeing. The programs offered in transitional housing may range depending on the program structure for the individuals, but the overall goal is to promote healthy and stabilized living.

Brock Mission is an organization which operates a men's shelter and a women's shelter, with 24/7 support services, and offers community meals 5 nights a week in Peterborough, Ontario (10). Cameron House was established in 1996 by Brock Mission to offer shelter services to women only (10). At Cameron House, Brock Mission has undertaken a new approach by incorporating transitional housing as an additional service within the shelter. Eight transitional housing units that consist of their own kitchen, bedroom, bathroom and living area will be offered to women who have stabilized their lives (i.e. free of addictions, stabilized income, etc.), but might occasionally need support from the shelter staff. The semi-independent living program through transitional housing is planned to begin in 2011 when the construction of the facilities is complete.

The purpose of the Cameron House research project was to propose a methodology along with data collection tools, for use by Cameron House staff, to determine the long-term outcome

for women who had taken part in the transitional housing program, also termed the Semi-Independent Living (SIL) program. The aim is to see if each woman has had success in independent living after leaving the program, and what constituents of the SIL program are promoting the greatest success. Before being admitted into the SIL program at Cameron House, an application form must be submitted followed by an interview with the Cameron House manager and director of Peterborough Housing Corporation (PHC) to assess the individual's willingness to participate in the program. The applicant must demonstrate that they are willing to progress through the program by participating in weekly programs such as cooking, budgeting, self-care, landlord-tenant relationships, and grocery shopping. The women must also take advantage of the Fourcast Counselor who will provide counseling, education and community leadership in the areas of substance abuse and gambling (11). The Fourcast Counselor will provide both Cameron House residents as well as SIL tenants with counseling twice a week for issues related to drug and alcohol addictions. If the tenant requires additional counseling services for other reasons, referrals can be made by Cameron House staff. Each SIL tenant will also be assisted by a Semi-Independent Living Support worker (SILSW). The support worker is the case manager for each resident in SIL and it is her duty to discuss their progress, set goals, and ensure that each woman is getting the care she needs to move forward through the program. As with any transitional housing program, there are still rules to be followed while residing at the Cameron House shelter. Each SIL tenant will continue to have the midnight curfew; will not be allowed any male visitors; will not be allowed to smoke inside their apartment; and substance or alcohol abuse is strictly prohibited. Failure to comply with these rules could result in immediate eviction from the transitional housing unit and the semiindependent living program. A monthly report will be generated by the semi-independent living

support worker who will discuss the total support hours provided for each individual that month, the referrals and partnerships each woman has and why (i.e. Fourcast for substance abuse issues; Children's Aid Society; etc.), and the time the SILSW spent assisting each tenant in their conquest to find support in the community when they're ready. The more time a woman spends in her transitional housing unit, the fewer hours she should have relying on the SIL support worker and counseling services, and thus there should eventually be a decrease in support hours with an increase in hours spent supported in the community. Spending time in the community will allow the woman to gradually transition to this area of life, where she will rely less on Cameron House staff and more on her peers. Once a resident exits the SIL program, she will have continual support from Cameron House staff in her community, but the objective is that she will not need it and will be able to move independently into the community.

Methods

To begin the project, it was necessary to understand the clientele who currently reside at Cameron House. To achieve this understanding, files from randomly selected residents at Cameron House from 2000 and up were reviewed. The information gained from the file review enabled the research to be directed in a manner suitable to women who were under similar life and living conditions. Although each individual is unique, certain occurrences and habits were seen in many individuals – specifically the return of women and women using the shelter for longer periods of time. Information regarding the clients' age, duration of stay, multiple visits, reasons for leaving, source(s) of income, substance abuse issues, criminal records and any health issues were the target of the file review. From this information, conclusions can be drawn as to the purpose of the stay at the shelter for individuals (i.e., a substance-abuse issue, health issues, lack of income, etc.). See Appendix A for raw data.

The next step of the investigation was to review current literature regarding transitional housing in other areas of the globe. Because transitional housing is a relatively new concept to Ontario, previous studies comparing different means of transitional housing was appropriate to direct the outcome of this project. Literature was reviewed to focus the ideas for a proposed methodology and data collection tools for use by Cameron House upon the exit of a resident from the transitional housing program. Throughout the process, meetings with Cameron House staff and also with the Peterborough Housing Corporation Manager, Susan Bacque, took place to revisit and expand upon original ideas. The process of the literature review and updated meetings continued throughout the project, to ensure that the outcome of the project remained on track. Meetings with the Cameron House manager, Beth Armstrong, allowed for the understanding of the transitional housing program which is to take place upon completion of the new Cameron House shelter. Ms. Armstrong discussed the conditions upon entry into the transitional housing program, how the program works, supplementary life-skills programs provided, and supplementary information pertaining to the program. However, although Ms. Armstrong was helpful in delivering the outline of the program, the final details of the program have yet to be finalized, and thus there may be potential changes to the criteria to enter the program as well as changes to the structure of the program once the shelter is finished and transitional housing can begin.

The last step for the project was the design and creation of multiple web surveys for future use when a resident exits the transitional housing program. The program of choice for data collection and analysis is SurveyMonkey.com, which allows for easy collection, storage, and review of answers to specific questions which can be asked by the interviewer. The data

analysis is made simple by using multiple choice and scale-rated questions. Once the survey is completed by an individual, results are easily accessed, saved and printed. An exit interview was created to receive the residents' opinion of the transitional housing program, how it has helped and where they are moving into. It is during this interview that contact for post-residency will be established if accepted. Because the goal of the transitional housing program is to integrate these women into independent living, life circumstances may change at any time post-residency and thus another survey was created for this purpose, to be used each year between two and five years after exiting the program.

Analysis

The review of files from Cameron House was relatively small using only 110 individual files of the many that were present. From the file review, it was determined that the average age of individuals who use Cameron House for shelter is 35 years of age. This age is not uncommon for the average homeless woman. Richter and Chaw-Kent in 2008 determined that the mean age of women who were classified as "homeless" was between 27 and 34 years of age (4). This average age of 35 may seem relatively high, but, there is a Youth Emergency Shelter (YES) in Peterborough, Ontario, which caters to males and females along with families between the ages of 16 and 24 and the younger women could be residing there. Inadequate data collection and file continuity lead to an unknown length of stay from 33 of the individual files. Despite this, the average time spent in the shelter was approximately 16 days from the 77 files that were present. Out of 110 files reviewed, 50% of the individuals had had more than one stay at Cameron House. Speculation as to why these individuals are leaving and then returning can be attributed to the rules of the shelter. Many women find it difficult to adhere to the rules of a curfew, signing in

and out every time they leave the shelter, the no-men rule, and living in a shelter with other women with conflicting personalities (5). Of the returning 55 individuals, 27% reported a substance abuse issue, whether it was drugs- or alcohol-related. The problem of drugs and alcohol for homeless men and women is not uncommon. Daiski determined that people who are homeless have difficulty finding help for their addictions because many other homeless individuals also have addictions and drugs and alcohol are readily available on the street (5). For a complete list of information regarding the clientele of women who use Cameron House, please refer to Appendix A.

The literature review of transitional housing among homeless women was exceedingly difficult because many studies do not look at women specifically. Many of the studies conducted and reported on were of families – specifically women and with children. There were, however, a few studies on transitional housing for homeless adults with psychiatric disabilities, which is a factor for some clients of Cameron House. The literature review enabled the project to focus on the specific questions that need to be asked post-residency of the individuals who have left transitional housing. The literature also targeted the importance of transitional housing for both young mothers as well as adults with psychiatric disabilities', stating that special attention and care for each individual is required to help these individuals move forward into independent living (12, 13). The meetings that took place with Susan Bacque as well as Beth Armstrong contributed ideas to focus research questions that were readily available as recommendations throughout the presented literature. The most important research question defined was, "Is transitional housing helping women move and maintain an independent state of living?"

In order to determine if the transitional housing program is helping women focus their goals to independent living, an exit interview of the program was created to understand the

women's opinions on the program. The exit interview consists of four parts and contains questions regarding the residents' stay in the transitional housing program, their rating of specific life-skills courses taken, their biggest obstacle while in the program, their reason for leaving, type of housing they're moving into, their future goals, their recommendations to the program and their future contact information. It's important to know this information to structure the program to benefit the women taking part in the program better. The feedback from the women who already took part in the program and succeeded through it is the most valuable for future use. Unfortunately, the exit interview has yet to have a trial run due to the delay of the transitional housing program. The final step of the project was to prepare a follow-up interview to be completed by previous tenants of the transitional housing program at Cameron House. The follow-up interview asks very similar questions to the exit interview, and is concerned particularly with their quality of life (including health) and relationships with other individuals since they moved into independent living, obstacles they've had to overcome, source(s) of income, and their view of the transitional housing program once they have had experience in independent living. The follow-up survey is very important to determine if the transitional housing program enabled these women to succeed in their future endeavour of independent living. If women have returned to the streets or even returned back to Cameron House, it could result in a re-evaluation of the programs and services offered by the transitional housing program. For both surveys and the full list of questions asked, please refer to Appendix B.

Discussion

The semi-independent living program of transitional housing in Peterborough, Ontario is relatively new to Ontario, yet not new to the globe. In other areas of North America, several forms of transitional housing are taking place – inducing whole families, to women and children, or people with psychiatric disabilities.

Tsemberis, 1999, conducted a study which compared two types of transitional housing and the benefits and limitations of each. The linear residential treatment (LRT) was designed to address the problems of individuals who were homeless and who also had psychiatric disabilities by using a series of step-by-step residential programs that eventually lead to independent housing (12). A client's improvement in each type of residence was judged by staff and referred to the next step in the continuum (12). Tsemberis found several weaknesses in the LRT model. These weaknesses included a lack of client choice, stress created by multiple moves, excessive time before reaching the final step, and loss of housing if a client relapsed into substance abuse (12). The LRT model assumes independent living requires little or no support because it has offered support every step of the way (12).

The second type of transitional housing discussed is pathways supported housing (PSH). The program offers immediate access to independent housing and program services tailored to consumers' priorities (12). Tenant's sign a sublease with the supported housing agency, but still retain the rights of tenancy available to people living independently (12). A problem associated with this is that if the tenant relapses into substance abuse, their apartment will still be in their possession (12). In this case, there are few consequences to their actions, and PSH promotes relapse and substance abuse. It has yet to be determined which type of transitional housing is more beneficial than the other as to the long-term outcomes to independent living. Continual

research several years post-residency would be beneficial to better understand the efficiency of these programs.

Before an individual can take part in a transitional housing program, a specific set of criteria must be met to assess their eligibility and commitment to the program. Similar to the requirements of the semi-independent living (SIL) program at Cameron House, many other transitional housing programs have the same requirements. In a study conducted by Fischer in 2002, the criteria for families admitted into a Family Development Center required that a young unmarried mother (17-26 years of age) applying to the program was caring for a first child up to 1 year of age; that the family was lacking housing, other options for temporary housing, and lacking resources or skills to find permanent housing; and that she was not a substance abusers and must be motivated to benefit from the program (9). Although Fischer's study focuses on young families, similar criteria are present, particularly the sobriety aspect and the motivation to benefit from the program. It is important that the individual chosen to participate in the program is willing to progress toward the ultimate goal of independent living without support. The program discussed by Fischer is very similar to the parameters of the SIL program, offering supported living in an efficiency apartment at the residential facility where women are expected to live in their apartment as if they were in independent housing (9). Here the women learn to cook for their families', do laundry, and maintain their household (9). However, the supported living was only offered for 1 year, and the family then entered a post-residential period, where clients were provided a year of aftercare which included support and referral services available, monthly contact by the Assistant Resident manager, and phone calls from the staff social worker (9). In the SIL program at Cameron House, residents have up to 4 years before moving out of the transitional housing, and are not required to maintain contact with the program staff.

Fischer's article was particularly useful because Fischer's research question is the same as Cameron House's question. Is transitional housing effective for long-term independent living? According to Fischer's results, obtained from an exit interview and follow-up interview, 61% of their successors were employed for an average of 9 months, 43% of former residents reported having their own apartment unsubsidized, and that a stay in residence led to a reunification with family members (9). Because of this article, it was determined that an exit interview survey, along with a follow-up survey, should be designed for collection and analysis of information pertaining to the SIL program at Cameron House.

SurveyMonkey is an online survey design website which allows users to create smart, professional surveys with little difficulty (14). The basic package is free of charge and allows the administrator to collect and analyze the data from the respondents of the survey (14). For the Cameron House transitional housing program, SurveyMonkey is an excellent choice for an exit interview as well as follow-up interviews. The surveys are easy to understand, provide quick responses, and can be edited throughout the course of the semi-independent living program as the program evolves. SurveyMonkey also provides a detailed explanation of how to use the website, how to create and manage surveys, and how to interpret data. It will be necessary for the semi-independent living program worker to become familiar with the website and surveys, for future modifications to the surveys provided.

Although SurveyMonkey provides a reliable means of data collection, there are a few drawbacks. The online survey only remains active for 30 days without completion. Therefore, the SILSW would need to refresh and update the survey to keep it alive. Also, the basic package allows only for 10 questions per survey, and thus, to create an exit interview, four different surveys need to be created. The link for each part of the survey can be found in Appendix B.

Because the exit interview survey should be conducted with the semi-independent living support worker, the problem of having multiple surveys should not be a problem. The SILSW should ask the questions to the resident and provide the answer to the survey webpage. However, when the follow-up survey is conducted, the previous resident may not be present with the SILSW or may not have internet access. To solve this problem, it will be necessary for to have the SILSW either to set up a meeting time for the survey, or conduct the survey via telephone with the resident in question.

There are several difficulties to researching the long-term outcomes of transitional housing. Firstly, a lack of funding has proved to be a barrier to many researchers as well as to organizations wanting to promote transitional housing. Second, the lack of research in this area over the past ten years has proved to be a challenge for a comparison of studies while attempting to discover the long-term outcome of transitional housing. Third, with transitional housing proving to be a relatively new attempt to promote independent living, few studies have been in place long enough to have the long-term outcomes two or more years post-residency. Until studies of the benefits to the individuals in the program can be conducted, transitional housing will remain in a trial period before conclusive answers are given. Limitations directly associated with the Cameron House project would include a lack of literature resources. Because transitional housing is a newer concept, few studies focused on the long-term outcomes and thus finding resources of a similar project was difficult. Furthermore, transitional housing has not yet started in Cameron House. Because construction is still underway, residents are not participating in any programs related to the semi-independent living program. Additionally, the SIL program has yet to be finalized, and designing a project for future use when residents exit the program was an exceedingly difficult task. Like any survey, additions will need to be made once

residents are filling out the surveys and additional concerns are discovered by Cameron House staff.

Recommendations

The purpose of the proposed project is to assess the long-term outcome of transitional housing for homeless women in Peterborough. It is recommended that residents entering the transitional housing program complete a quantitative assessment of each individual's quality of life using the World Health Organization Quality of Life (WHOQOL-BREF) tool. The tool assesses the individual's perceptions in the context of their culture and value systems, and personal goals, standards and concerns (15). See Appendix C for the WHOQOL-BREF. Prior to exiting the semi-independent living program, it is also recommended that each resident complete the WHOQOL-BREF again and participate in an exit interview with the assistant of asemiindependent living support worker. Completing the survey with the SILSW will promote an honest response of the program, and a comprehensive analysis of the responses. Because the main focus is to assess individuals 2-5 years post-residency, it is also recommended that an incentive be given to those individuals who agree to participate in future surveys. Such incentives could be a gift card for a grocery store or Wal-mart, along with an annual party at the shelter for the alumni of the semi-independent living program. The successive follow-up interview can be sent to the individual via email, or completed via telephone with the SILSW asking the questions and typing in the response. It is also recommended that the WHOQOL-BREF be completed yet again, to see if there is any improvement in their perception of their quality of life. The WHOQOL-BREF survey can aid in the evaluation of the program by assessing quality of life from the woman's perspective. If she believes her quality of life has not improved 5 years post-residency, the program may need improvement. The above

recommendations, along with better recording and organizational skills should result in a project ready for use for the first resident exiting the semi-independent living program.

Conclusion

Without a doubt, implementing the semi-independent living program through transitional housing at Cameron House will contribute to a woman's success in independent living. More research should be focused on the long-term outcomes of these women by maintaining contact post-residency through established personal relationships and incentives for participation. The proposed surveys will assist Brock Mission in their analysis of the program, to ensure that women residing in the transitional housing units get the best care possible.

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Appendix A:	Women who have previously resided at Cameron House Since 2000	
Age (At		

Age (At the time of	Duration of Stay	Multiple	Reason for	T	Substance Abuse Issues	Criminal	Haaldh Jamaa
residency) 35	(days) N/A	Visits No	Leaving N/A	Income N/A	Abuse Issues No	Record No	Health Issues None
52	N/A 5	Yes	Evicted	ODSP	Yes - crack	No	HIV/HEP B&C
50	3	Yes	N/A	OW	No	No	Depression
31	4 56	Yes	Moving to BC - school	OW	No	No	Depression
17	1	No	N/A	N/A	Yes - alcohol	No	None
			Police -		Yes-		
33	1	No	hospital	N/A	marijuana/alcohol	N/A	None
43	N/A	No	N/A	N/A	No	No	None
39	5	Yes	AWOL	N/A	No	No	None
37	N/A	No	N/A Got an	ODSP	No	No	Schizophrenia
30	15	Yes	apartment Got an	Employed	Yes - drugs	No	None
37	12	Yes	apartment	Employed	No	No	Diabetic
50	N/A	No	N/A	N/A	No	No	None
38	21	No	Evicted Moved back to	N/A	No	No	Diabetic
51	3	Yes	husband Moved in with	ODSP	No	No	Epileptic
19	10	No	boyfriend	N/A	No	No	None
45	2	No	Relocating	ODSP	No	No	Many
18	N/A	Yes	N/A Relocating to	N/A	No	No	None
64	7	Yes	Durham Moved into an	N/A	No	No	Heart attack
38	1	Yes	apartment	OW	No	No	None
19	N/A	Yes	N/A	N/A	No	No	None
19	N/A	No	N/A Going to a	N/A	No	No	None
69	9	No	nursing home Moved back to	N/A	No	No	None
17	29	No	foster care	N/A	No	No	None
40	21	Yes	Evicted Secured	N/A	Yes - multiple	No	None
33	39	Yes	housing Secured	Employed	No	No	Diabetic
55	20	Yes	housing	N/A	No	No	None
18	N/A	No	N/A Secured	N/A	No	No	None
22	38	Yes	housing Secured	N/A	No	No	ADHD
32	14	No	housing	N/A	No	No	Pregnant
53	1	No	Moved home	N/A	Yes - alcohol	No	None
51	2	Yes	Moved home	N/A	No	No	None
39	N/A	No	N/A	N/A	No	No	None
54	10	Yes	Moved home	ODSP	No	No	None

20	N/A		Yes	N/A	N/A	No	No	None
44	N/A		No	N/A	N/A	Yes - alcohol	No	None
23	N/A		No	N/A	N/A	No	No	None
29	N/A		No	N/A Secured	N/A	No	No	None
32		14	No	housing Claimed she	N/A	No	No	None
61		1	Yes	had housing	CPP	No	No	None
57		4	No	N/A Returning	N/A	No	No	None
16		2	No	home	N/A	No	No	None
42	N/A		No	N/A Secured	OW	Yes - drugs	No	Depression
34		57	No	housing	N/A	No	No	None
35		3	No	N/A	OW	No	No	None
36	N/A		Yes	N/A Evicted -	N/A	Yes - drugs	No	None
28		8	Yes	AWOL Evicted -	N/A	No	No	None
30		25	No	AWOL Evicted -	N/A	Yes- drugs	No	None
17		5	No	AWOL	N/A	No	No	None
38	N/A		No	N/A	N/A	Yes - drugs Yes -	No	Depression
17	N/A		Yes	N/A Secured	N/A	drugs/alcohol	No	None
41		11	No	housing Returned to	OW	No No -	No	None
22		24	Yes	boyfriend	Employed	drugs/alcohol	No	Depression
47		1	No	Went home	ODSP	No No - recovering	No	None
35		2	Yes	N/A	OW	drug	No	None
45	N/A		No	N/A	ODSP	No	No	Cancer
45		14	Yes	Evicted	ODSP	Yes - drugs	No	HIV
49		2	No	Evicted Secured	ODSP	No Yes -	No	Psychotic
26		9	Yes	housing	ODSP	drugs/alcohol	Yes	Schizophrenia
56		5	No	Moved Evicted (no	ODSP	No	No	Diabetic
41		1	No	show) Moved back	ODSP	No	No	No
19		15	Yes	home	OW	No	No	None
43	N/A		Yes	N/A	ODSP	Yes - drugs Yes -	No	No
29		5	Yes	Evicted Secured	ODSP	drugs/alcohol Yes -	No	Unknown - but yes
30		4	Yes	housing	N/A	drugs/alcohol	No	No
19	N/A		Yes	N/A	N/A	No	No	No
44		5	No	N/A	OW	No	No	Hep C
32	N/A		No	N/A Secured	N/A	No	No	None
49		32	No	housing	OW	No	No	None
36		9	No	Evicted	N/A	Yes - drugs	No	None

				Evicted -		Yes -		
39		8	No	drinking Prefers to sleep	N/A	drugs/alcohol	No	None
34		1	No	on street Evicted -	OW	Yes - alcohol	No	None
21		5	Yes	AWOL	OW	No	No	None
18	N/A		No	N/A Evicted -	N/A	No	No	None
28		30	Yes	AWOL Evicted - not	OW	No	Yes	Pregnant
42		1	No	safe	N/A	Yes - drugs	No	None
45	N/A		No	N/A	OW	No	No	ADHD/bipolar/depression
32	N/A		No	N/A	N/A	No	No	None
25		48	Yes	Unknown	ODSP	No	No	None
39	N/A		No	N/A	N/A	No	No	Epileptic/diabetic/bipolar
48	N/A		No	N/A	N/A	No	No	None
52		2	Yes	Secured housing	Employed	No Yes -	No	None
17		5	No	Unknown	OW	drugs/alcohol	No	None
68		1	Yes	Sent to hospital	N/A	No	No	Diabetic/bipolar
5 4		05	N	Secured	NT /A	X 7 1 1 1	NT	*
54		95	No	housing Evicted - under	N/A	Yes - alcohol	No	None
48		21	Yes	the influence Evicted -	OW	No	No	None
24		3	No	AWOL Evicted -	N/A	Yes - alcohol	No	Pregnant/bipolar
28		18	Yes	AWOL	N/A	No	No	Chrone's Disease
16	N/A		No	N/A Moved - heath	N/A OW/Old	No	No	Broken pelvis
66		151	No	issues	Age	Hygiene issues	No	Epileptic/diabetic
23	N/A		Yes	N/A Secured	OW	Yes - drugs	No	Hep C
55		44	Yes	housing Secured	OW	No	No	Diabetic
57		6	No	housing	OW	No No - clean 17	No	None
47	N/A		Yes	N/A Evicted -	Employed	years	No	None
36		8	No	AWOL Evicted - attempted	OW	No	No	None
35		1	No	suicide/hospital Secured	ODSP	No Yes -	No	Brain injury - seizures
39		48	Yes	housing	ODSP	drugs/alcohol	No	No
58	N/A		Yes	N/A Secured	ODSP	No	No	Pyschiatric problems
41		6	Yes	housing Returned home	ODSP	No	No	Schizophrenia/epilepsy
59	N/A		Yes	assumed	Employed	No	No	None
43		27	No	N/A	N/A	No	No	None
27		1	Yes	Unknown Evicted - abuse	N/A	No	No	Depression/mental illness
42		3	Yes	to staff	ODSP	No	No	Physicatric problems
46		2	Yes	Evicted -	ODSP	Yes - drugs	No	HIV/depression

Allison Dale

				AWOL				
34	N/A		Yes	N/A Evicted - violation of	ODSP	No	No	Liver disorder
47		23	No	rules	N/A	No	No	None
56	N/A		No	N/A Secured	N/A	No Yes -	No	None
46		49	Yes	housing Evicted -	Employed	drugs/alcohol Yes -	No	None
28		5	Yes	AWOL	OW	drugs/alcohol Yes -	No	None
19	N/A		Yes	N/A Emergency	N/A	drugs/alcohol	No	None
38		1	Yes	night	N/A	Yes - drugs	No	None

Appendix B: Feedback of Semi-Independent Living

Note: The actual survey is online and can be found at the following links.Part One:http://www.surveymonkey.com/s/2H3YFBRPart Two:http://www.surveymonkey.com/s/RMQJ6BVPart Three:http://www.surveymonkey.com/s/RMW9YZLPart Four:http://www.surveymonkey.com/s/RMW5NL8

Cameron House Semi-Independent Living Exit Interview Part One: General Information

* required field *Name:

***Birth Date:**

*Ethnic Background:

- a. Caucasian
- b. African American
- c. Asian
- d. Aboriginal
- e. Other_____

Prior to entering the transitional housing program, had you recently emigrated to Canada?

- a. Yes
- b. No

Please indicate the level of education you have reached:

- a. No high school diploma
- b. High school/GED Equivalent
- c. Some post-secondary
- d. Post-secondary certificate/diploma
- e. Other:_____

Please indicate what type of financial support you had prior to entering the transitional housing program. Check all that apply.

- a. OW
- b. ODSP
- c. Employed
- d. Other: _____

Are you affiliated with any of the following agencies? Check all that apply.

- a. Legal Aid
- b. CAS
- c. Kinark

- d. Womens' Health Centre
- e. Fourcast Counselling
- f. Other: _____

On average, how many hours a week do you converse with one or more of the above agencies?

- a. Less than 5
- b. 5-10
- c. More than 10

Part Two: Transitional Housing Program

Name:

How long did you reside in the semi-independent living program at Cameron House?

- a. Less than 6 months
- b. 6 months to 12 months
- c. 12 months to 18 months
- d. 18 months to 24 months
- e. 24 months to 36 months
- f. 3 years +

How did you become without housing prior to entering the semi-independent program?

- a. Put out (by a family member, relative, friend)
- b. Left due to unacceptable living situations (family living arrangements, abuse, drug addictions)
- c. Loss of employment
- d. No living options available
- e. Released from custody
- f. Other:_____

Please rate the effectiveness of the following life-skills programs on a scale of 1-5 where 1 will be not very effective and 5 will be very effective.

- a. __Basics (personal care)
- b. __Grocery shopping skills
- c. _Cooking skills
- d. __Budgeting skills
- e. ___Applications for personal identification skills
- f. __Landlord-tenant informative skills

What other types of skills-trainings would you have preferred to be offered?

Do you continue to spend time with the Program's Support Worker?

- a. Yes
- b. No;Do not need as much support anymore
- c. No;Personal reasons
- d. No; Busy
- e. Other: _____

Did the Program's Support Worker assist you in any of the following?

a. Meetings with duty counsel
b. Out of town court appointment
c. Medical appointments
d. Supplementary education to the life-skills programs
Y/N

In your opinion, the Program's Support Worker was:

	Strongly Disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
Helpful					
Trustworthy					
Encouraging					
A good					
listener					
Supportive					

Would you recommend the transitional housing program to other individuals who may be struggling with independent living?

- a. Yes
- b. No

If no, please explain.

Part Three: Post-Residency

Name:

What is your primary reason for leaving the transitional housing program?

- a. Evicted
- b. Ready for independent living
- c. Spent maximum 4 years in transitional housing
- d. Other:_____

What is your current source of income? Check all that apply

- a. OW
- b. ODSP
- c. Employed full-time
- d. Employed part-time
- e. Other:_____

What type of housing are you moving into?

- a. Subsidized housing
- b. Rent geared to income
- c. Rental
- d. Ownership
- e. Other:_____

Will you be living alone or with another individual?

- a. Alone
- b. Roommate(s)

If living with another individual, what is the relationship between the two of you?

- a. Professional
- b. Acquaintances
- c. Friends
- d. Family
- e. Other: _____

Do you feel that the transitional housing program has prepared you well for independent living?

- a. Yes
- b. No

If no, explain.

Part Four: Personal Life

Name:

Are you currently in touch with any family members?

- a. Yes
- b. No

If no, have you attempted contact with any family?

Do you currently rely on any family members for support with your independent living?

- a. Yes
- b. No

Do you currently suffer from any of the following health conditions? (check all that apply)

- a. Depression
- b. Schizophrenia
- c. Bipolar disorder
- d. ADHD
- e. Diabetes
- f. Epilepsy
- g. Hepatits
- h. HIV
- i. Cancer
- j. Other: _____

Other

May we contact you in the future to check in to see how you're doing? Note, if permitted, a bi-annual phone call from the Program Support Worker will take place along with an annual Christmas party where you will receive a \$25 gift card to a grocery store.

a. Yes

b. No
If yes, please provide your contact information: Name: Address: City/Town: Postal Code: Country: Phone number: Email:

In two years, would you be willing to participate in a follow-up interview to discuss how well you're doing in your independent living situation? Note, the incentive will continue to be provided as long as you're willing to participate.

- a. Yes
- b. No

Thank you for participating in this survey. Your help is greatly appreciated. Good luck with all your future endeavours and best of wishes.

Cameron House Semi-Independent Living Update

Note: The actual survey is online and can be found at the following links:						
Part One:	http://www.surveymonkey.com/s/RMZDPKN					
Part Two:	http://www.surveymonkey.com/s/RX22XQQ					

*Please state your name and age.

How long has it been since you last resided in the transitional housing program at Cameron House?

- a. Less than 2 years
- b. 2 years
- c. 3 years
- d. 4 years
- e. 5 years

Are you still currently residing in the place of residence to which you entered after exiting the transitional housing program?

- a. Yes
- b. No

If no, please provide new contact information:

Name: Address: City/Town: Country: Postal Code: Phone number: Email:

What type of housing are you currently residing in?

- a. Subsidized housing
- b. Rent geared to income
- c. Rental
- d. Ownership
- e. Other:_____

Do you currently reside with anyone else?

- a. Yes
- b. No
 - If yes, please specify.

Source(s) of income. Please check all that apply.

- a. OW
- b. ODSP
- c. Employed full-time

- d. Employed part-time
- e. Other: _____

Are you affiliated with any of the following agencies? Check all that apply.

- a. Legal aid
- b. CAS
- c. Kinark
- d. Womens' Health Centre
- e. Fourcast
- f. Other:_____

Now that you have had time to apply the skills learned from the life-skills programs taken over the course of your residency in the transitional housing program, please rate the following life-skills programs.

Skill	Not very useful	Not useful	Somewhat useful	Useful	Very useful	N/A
Basics						
(personal						
care)						
Cooking						
Grocery						
Budgeting						
Application						
for						
personal						
Ī.D.						
Landlord-						
tenant						
informative						
skills						

Looking back on your time in the transitional housing program and your life now, are there any life-skills programs that you would recommend be added to the program?

Part Two: Personal Information

*Please state your name and age.

Are you currently in touch with any of your family members?

- a. Yes
- b. No

Are you currently in touch with your semi-independent living support worker?

- a. Yes
- b. No

If you answered yes to the above question, how often do you contact one another?

- a. Daily
- b. Weekly
- c. Monthly
- d. Bi-annually
- e. Annually

Are you currently in a committed relationship?

- a. Yes
- b. No

What has did you find most difficult about moving into independent living?

Have you completed the Quality of Life?

- a. Yes
- b. No

After moving into independent living, your health has:

- a. Increased
- b. Remained the same
- c. Decreased

Thank you for your time to participate in this survey. Your help is greatly appreciated. Good luck with all your future endeavours and best of wishes.