

# Vancouver At Home Study: housing first plus intensive case management versus treatment as usual

<b>Submission date</b>	<b>Recruitment status</b>	<input type="checkbox"/> Prospectively registered
07/08/2012	No longer recruiting	<input type="checkbox"/> Protocol
<b>Registration date</b>	<b>Overall study status</b>	<input type="checkbox"/> Statistical analysis plan
09/10/2012	Completed	<input checked="" type="checkbox"/> Results
<b>Last Edited</b>	<b>Condition category</b>	<input type="checkbox"/> Individual participant data
15/04/2020	Other	

## Plain English summary of protocol

### Background and study aims

Homelessness is an increasingly prevalent problem in many countries, and is associated with significant personal and financial costs to society. Mental health problems, including drug use, may precede or be a consequence of homelessness. Research is required to compare the relative effectiveness and costs of different interventions for people who are homeless and who have different levels of health or social needs. This study aims to compare two models of service for people who are homeless, have some form of mental disorder, and require a moderate level of support.

### Who can participate?

Up to 200 participants will be recruited through agencies and providers who are in contact with homeless adults (19 years of age or older) in Vancouver BC. Participants must have been homeless in the past year, have a current mental disorder and exhibit moderate challenges with community functioning in order to be enrolled in the study.

### What does the study involve?

Participants will be randomly allocated to either: scattered Housing First with Intensive Case Management (ICM); or Treatment As Usual (TAU).

Housing First offers homeless people with mental illness immediate access to independent apartments with a market lease, without any requirements around sobriety or engagement in treatment. Housing First participants are provided access to an array of treatment and social services, but they retain the right to choose their level of participation.

Intensive Case Management (ICM) provides support to people via a case manager working a standard work week and carrying a case load of roughly 20 clients. ICM provides limited direct care and otherwise aims to engage clients with relevant health and social services as indicated (i.e., a brokerage model).

Participants are asked to complete interviews every three months for 24 months. In addition, participants are asked to provide their consent for researchers to receive information from government departments detailing their use of various publicly-funded services, including health, social assistance, and justice. These data will be used to evaluate the impact of each

intervention over the two-year trial period, and will be refreshed after completion of the trial in 2013 in order to assess the long-term health and welfare of study participants.

**What are the possible benefits and risks of participating?**

Benefits to participants include the opportunity for allocation to housing and care, as well as regular meetings with interviewers who may direct participants to appropriate resources in the community based on the participant's needs. The study results will lead to improvements in long-term housing and support for participants and others as well. Risks include potential disappointment if randomized to Treatment As Usual, as well as the possibility that housing and support could be discontinued in April 2013 when study support for these services terminates.

**Where is the study run from?**

Simon Fraser University (Canada)

**When is the study starting and how long is it expected to run for?**

October 2010 to December 2013

**Who is funding the study?**

Health Canada and The Mental Health Commission of Canada (MHCC)

**Who is the main contact?**

Karen Fryer

kfryer@sfu.ca

## Contact information

**Type(s)**

Scientific

**Contact name**

Dr Julian Somers

**Contact details**

Faculty of Health Sciences

Simon Fraser University

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## Additional identifiers

**Protocol serial number**

N/A

## Study information

**Scientific Title**

Research demonstration project on homelessness and mental health - Vancouver BC

**Acronym**

VAHS (Vancouver At Home Study)

**Study objectives**

Individuals assigned to Housing First plus Intensive Case Management will have superior outcomes (i.e., health, quality of life, housing stability, emergency service use, justice system contacts) than individuals assigned to Treatment as Usual.

**Ethics approval required**

Old ethics approval format

**Ethics approval(s)**

1. Research Ethics Board at Simon Fraser University (primary site), 22/06/2009
2. University of British Columbia, 28/07/2009
3. Providence Healthcare, 30/08/2011
4. Vancouver Coastal Health Research Institute, 30/09/2011

**Study design**

Randomized controlled trial

**Primary study design**

Interventional

**Study type(s)**

Treatment

**Health condition(s) or problem(s) studied**

Homelessness, mental illness, substance dependence, comorbid medical

**Interventions**

Participants will be randomly assigned to either: scattered Housing First with Intensive Case Management (ICM); or Treatment As Usual (TAU).

Housing First (Tsemberis & Eisenberg, 2000) offers homeless people with mental illness immediate access to independent apartments with a market lease, without any requirements around sobriety or engagement in treatment. Housing First participants are provided access to an array of treatment and social services, but they retain the right to choose their level of participation.

Intensive Case Management (ICM) provides support to people via a case manager working a standard work week and carrying a case load of roughly 20 clients. ICM provides limited direct care and otherwise aims to engage clients with relevant health and social services as indicated (i.e., a brokerage model).

**Intervention Type**

Mixed

**Primary outcome(s)**

Current primary outcome measures as of 23/07/2015:  
Housing stability and mental health outcomes.

**Previous primary outcome measures:**

1. Service use changes drawn from administrative data concerning healthcare, social services, and justice system events.
2. Costs related to these events in relation to costs of providing services.

Sources of data for these measures are the government departments responsible for health, justice, and social welfare services. Data will be collected pending participant consent for access. Data will be requested for several years prior to participant enrollment in the Vancouver At Home Study, and will be refreshed following the completion of the 24-month study period in order to monitor longer-term changes in the level and type of service use associated with participants in the years following the completion of the study.

### **Key secondary outcome(s)**

Current secondary outcome measures as of 23/07/2015:

1. Quality of life
2. Emergency service use and costs
3. Trauma symptoms and harm to self or other
4. Employment
5. Physical health
6. Substance use and related problems

Previous secondary outcome measures:

Numerous questionnaires and additional cross-sectional sources of data include qualitative interviews and physical health examinations with subsets of the total study cohort. These additional measures are gathered to characterize the sample and better understand participant experiences but they are not considered outcome measures.

### **Completion date**

01/04/2013

## **Eligibility**

### **Key inclusion criteria**

1. Legal adult status (19 years of age or over)
2. Presence of a current mental disorder, and
3. Being absolutely homeless or precariously housed.
  - 3.1. Absolute homelessness was defined as living on the streets or in a shelter for at least two weeks during the past year.
  - 3.2. Precariously housed was defined as living in a rooming house, hotel or other form of transitional housing with at least one episode of absolute homelessness in the past year.

Added 23/07/2015:

4. Moderate needs based on Multnomah Community Assessment Scale.

### **Participant type(s)**

Patient

### **Healthy volunteers allowed**

No

### **Age group**

Adult

**Sex**

All

**Key exclusion criteria**

Added 23/07/2015:

1. Not Canadian citizen
2. Current treatment with Case Management or Assertive Community Treatment

**Date of first enrolment**

14/10/2009

**Date of final enrolment**

06/05/2011

## Locations

**Countries of recruitment**

Canada

**Study participating centre**

Simon Fraser University

Burnaby

Canada

V5A 1S6

## Sponsor information

**Organisation**

Mental Health Commission of Canada (Canada)

**ROR**

<https://ror.org/00hbkpf98>

## Funder(s)

**Funder type**

Government

**Funder Name**

Mental Health Commission of Canada (Canada)

**Funder Name**

Health Canada (Canada)

**Alternative Name(s)**

Governemt of Canada, Health Canada, Santé Canada, GovCanHealth

**Funding Body Type**

Government organisation

**Funding Body Subtype**

National government

**Location**

Canada

## Results and Publications

### Individual participant data (IPD) sharing plan

### IPD sharing plan summary

Available on request

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/11/2013		Yes	No
<a href="#">Results article</a>	results	08/12/2014		Yes	No
<a href="#">Results article</a>	results	25/02/2016		Yes	No
<a href="#">Results article</a>	retrospective analysis results	08/04/2019	15/04/2020	Yes	No
<a href="#">Participant information sheet</a>	Participant information sheet	11/11/2025	11/11/2025	No	Yes