

# Housing First for families in Brno

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<b>Registration date</b> 11/10/2018	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
<b>Last Edited</b> 13/12/2023	<b>Condition category</b> Other	<input type="checkbox"/> Individual participant data

## Plain English summary of protocol

### Background and study aims

A family homelessness registry week was conducted in Brno in April 2016, and 421 families living in private hostels, shelters or other forms of homelessness (ETHOS) were registered. Experiencing a first housing crisis has been shown to be a path to long-term homelessness for two-thirds of families in Brno, and 92% of homeless families experienced long-term (more than six months) homelessness in their lives for a median period of eight years. Two-thirds of these families are Roma. Once homeless, these families are typically considered not fit for housing by both private and public landlords and have little access to housing. The City of Brno (population 400 000), which owns and controls access to 29,000 flats, approved a strategy to end family homelessness: to make it rare, short and non-recurring. Since 2016 various traditional and experimental approaches have been tested for outcomes. Among them, the housing first approach seemed very promising. This study aims to find out whether family homelessness can be ended through a housing-first approach in the Czech Republic. The expectation is that families who have been stabilized in housing will reunify with their institutionalized children, family well-being and social inclusion will improve, and at the same time public expenditures for those families will decrease.

### Who can participate?

Homeless families with at least one child under 18 years of age, residing in Brno, Czechia

### What does the study involve?

Participating families are randomly allocated into intervention and treatment as usual groups. The intervention consists of allocation of a municipal flat and intensive case management in the housing first program. The families are assisted in moving and stabilization, and are informed they should meet their case manager about once a week. All families are strongly encouraged to establish direct payment of housing allowance to the landlord (City of Brno). A fund is established to overcome unexpected crises. Both groups are surveyed at the start of the study and after 6 and 12 months to measure housing stability and quality, family health and well-being, social integration, reunification of families and children's school attendance.

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

If successful, the project should be scaled up to end family homelessness in the whole city. The family receives housing and all trial participants are remunerated. There is a risk that if someone was selected in a lottery for housing, someone else could envy. Some Roma families might find

the neighbors hostile to them because of racism, while when they lived segregated in a temporary hostel with other Roma, their neighbors were most often also Roma and they would not encounter this.

Where is the study run from?  
IQ Roma Servis (Czech Republic)

When is the study starting and how long is it expected to run for?  
April 2016 to August 2018

Who is funding the study?  
European Social Fund in the Czech Republic, Operational Program Employment, Social Innovation Scheme

Who is the main contact?  
Dr Stepan Ripka  
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## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

**Clinical Trials Information System (CTIS)**  
Nil known

**Protocol serial number**  
CZ.03.3.60/0.0/0.0/15\_024/0002729

## Study information

**Scientific Title**  
A pragmatic single-site randomised controlled trial of Housing First intervention for homeless families in Brno, Czech Republic

**Study objectives**

A family homelessness registry week (census) was conducted in Brno, Czech Republic, in April 2016, and 421 families living in private hostels, shelters or other forms of homelessness (according to European typology of homelessness ETHOS) were registered. Experiencing a first housing crisis has been shown to be a path to long-term homelessness for two thirds of families in Brno, 92% of homeless families experienced long-term (more than six months) homelessness in their life for a median period of eight years (Registry week Brno 2016). Two thirds of these families are Roma. Once homeless, these families are typically considered not fit for housing by both private and public landlords, and have little access to housing.

Hypothesis: At least 80% of the treatment families will retain their housing after 12 months, i.e. they will fulfill their duties as tenants.

### **Ethics approval required**

Old ethics approval format

### **Ethics approval(s)**

The study does not require ethics board, scientific board was established to oversee all research team actions.

### **Study design**

Pragmatic single-site study

### **Primary study design**

Intentional

### **Study type(s)**

Treatment

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

Homelessness

### **Interventions**

Out of a population of 421, 50 families are randomly assigned to municipal flat and intensive case management in housing first model. The control group is comprised of 100 families from the same population, stratified by number of children.

The intervention consists of allocation of municipal flat and intensive case management in housing first program. The ICM team received training in HF case management from HVO Querido Discus (strengths-based model) and underwent training in motivational interviewing.

The intervention families are assisted in moving and stabilization and are receiving case management services. The families were informed they should meet their case manager approximately once a week. All families were strongly encouraged to establish direct payment of housing allowance to the landlord (City of Brno). A fund was established to overcome unexpected crises.

### **Intervention Type**

Other

### **Primary outcome(s)**

1. Number of months the family was homeless (according to ETHOS typology of homelessness), measured at 6-months survey (evidence on places where the family lived in last six months by month) and 12-months survey (evidence of all places where the family lived by month since 05 /2016)
2. Subjective assessment of security of tenure, measured using survey answers to: "Do you think you will be able to stay here as long as you wish?" measured at 0, 6 and 12 months
3. Level of psychosocial distress, measured using K-6 psychosocial distress scale measure at 0, 6 and 12 months
4. Number of uses of emergency, ambulance and hospitalizations, measured using aggregate number of self-reported uses of emergency health services, ambulance and hospitalizations of all family members in last six months, measured at 0, 6 and 12 months

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

1. Number of moves in 6 months, measured using survey at 6 and 12 months
2. Quality of housing:
  - 2.1. Occurrence of problems connected to poor housing, measured using survey battery at 6 and 12 months
  - 2.2. Subjective assessment of housing quality at 6 and 12 months
3. Social integration of parents:
  - 3.1. Level of anomia, measured by Srole scale at 0, 6 and 12 months
  - 3.2. Participation in community gatherings, measured using survey question at 0, 6 and 12 months
4. Financial stability of families:
  - 4.1. Amount of money the family lacks to cover basic goods and services, measured using survey question at 0, 6 and 12 months
  - 4.2. Number of days in month the family disposes cash, measured using survey question at 0, 6 and 12 months
5. Reunification of families and prevention of institutionalization of children (number of children that came back from foster care or institutional care, and number of children institutionalized), measured using survey at 6 and 12 months
6. Absenteeism of school children, measured using administrative data at 12 months

### **Completion date**

31/08/2018

## **Eligibility**

### **Key inclusion criteria**

1. Family, must have at least one child under 18 at the time of move-in. The child can also live in institution or foster care at the time of assignment.
2. Residing permanently or temporarily in Brno, Czechia, in April 2016
3. Must have been counted during Family homelessness registry week (census) in April 2016 in Brno
4. Must be homeless according to European typology of homelessness (ETHOS) at the time of move-in, e. g. living in shelter, temporary hostel, in overcrowded (less than 5sqm/person) household, couchsurfing, or inadequate flat (without water or electricity)

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

Other

**Healthy volunteers allowed**

No

**Age group**

Mixed

**Sex**

All

**Key exclusion criteria**

1. Not being homeless at the time of census, assignment or move-in
2. Not having a child under 18 at the time of census, assignment or move-in

**Date of first enrolment**

15/04/2016

**Date of final enrolment**

12/05/2016

**Locations****Countries of recruitment**

Czech Republic

**Study participating centre**

**IQ Roma Servis**

Vranovska 846

Brno

Czech Republic

61400

**Sponsor information****Organisation**

Ministry of Labour and Social Affairs

**ROR**

<https://ror.org/01bvj3e58>

**Funder(s)****Funder type**

Government

## Funder Name

European Social Fund in the Czech Republic, Operational Program Employment, Social Innovation Scheme, grant No. CZ.03.3.60/0.0/0.0/15\_024/0002729

## Results and Publications

### Individual participant data (IPD) sharing plan

Data matrix from baseline and 6 and 12 months follow-ups will be stored in the Czech Social Science Data Archive (<http://archiv.soc.cas.cz/en>).

ČSDA's data are stored in the data catalogue based on the Nesstar system. Datasets will be available only with the written permission of the depositor. The data will be made available after results are published, i.e. from 2020 onwards. Informed consent on the use of anonymized data was signed by study participants. All personal data are removed from the data matrix, only IDs that allow for linking cases across time are present.

### IPD sharing plan summary

Stored in non-publicly available repository

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>		18/08/2023	13/12/2023	Yes	No
<a href="#">Protocol article</a>	protocol	01/06/2018		Yes	No
<a href="#">Interim results article</a>	Financial instability results	13/12/2019	01/09/2021	Yes	No
<a href="#">Study website</a>	Study website	11/11/2025	11/11/2025	No	Yes