Understanding Community Integration in a Housing-First Approach: Toronto At Home/Chez Soi Community-Based Research

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Abstract

The Mental Health Commission of Canada's At Home/Chez Soi project has taken a housing-first approach, providing approximately half of the project participants with housing as well as services that are tailored to meet their needs, while the other half have access to the regular supports that are available in their community. At Home/Chez Soi worked specifically with people with experiences of homelessness and mental health. The People With Lived Experience Caucus is linked to the Toronto site of the At Home/Chez Soi project and provides to all aspects of the larger project the perspective and advice of people who have experienced homelessness and used the mental health system. Given the opportunity to develop their own research project, the People With Lived Experience Caucus Research Subcommittee analyzed purposively sampled 18-month follow-up interviews from the At Home/Chez Soi Toronto evaluation in order to explore how the participants discuss and experience community integration in their day-to-day lives. Through our research we found that community integration is a complicated and non-linear process that is positively impacted by working toward the self-determination, independence, and empowerment of the project participants.

Keywords: community integration, mental health, homelessness, people with lived experience, housing first

In the Mental Health Commission of Canada's At Home/Chez Soi project, participants had supports and services put in place for their mental health needs, but had little information about the existence of support provided to help with their experiences of community integration. The focus of this Caucus-led research project is a qualitative look at how the project participants experienced community integration. What we mean by community integration is a sense of acceptance and belonging, the ability to contribute, and the assurance of not being wondered about or discriminated against in the surrounding community. We see community integration as a complicated concept that requires a complex look at the varying factors implicated in the day-to-day lives of the project participants. While analyzing purposively sampled 18-month follow-up interviews from the At Home Toronto evaluation, we consider (a) how the participants of the At Home/Chez Soi project discuss community integration and (b) what the resulting impact is on their day-to-day lives.

The At Home/Chez Soi project has taken a housing-first approach, providing approximately half of the project participants with housing as well as services that are tailored to meet their needs, while the other half have access to the regular supports available in their community. This project works specifically with people with experiences of homelessness and with mental health experiences.

In this paper, the People With Lived Experience Caucus Research Subcommittee looks at the complicated issues linked to what works and what does not work in the struggles of the participants to become integrated in their community. We also look at the impacts of the different services available to the participants by noting how they were discussed throughout the interviews. By doing this, we sought to discover what impact housing has had on participants' efforts to reconnect themselves with their community. This research has given us an opportunity to learn from the successes and challenges that participants face in their everyday lives. We were interested in looking at the experiences of community integration and understanding how the At Home/Chez Soi project's demonstration site in Toronto made a difference in helping participants to improve the quality of their lives.

Background Information on the People With Lived Experience Caucus

At Home/Chez Soi showed its commitment to involving people with lived experience (PWLE) throughout the project, and in Toronto a caucus made up of PWLE was created. The PWLE Caucus was not only unique, but its representatives participated both locally and throughout national activities. The People with Lived Experience Caucus was a supported group of the At-Home/Chez-Soi project's Toronto site. A fluctuating[1] number of caucus members who have lived experience of being homeless, with substance use, and/or being involved in the mental health

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[1] The largest number of active Caucus members was 23.

system were supported by a caucus coordinator and a trustee organization[2] to provide the perspective and advice of relevant lived experiences into all aspects of the At Home/Chez Soi project's Toronto site.

The caucus used a unique participation model that provided the necessary supports and accommodations so that members could attend all working groups, committees, and conferences within the At Home/Chez Soi project's Toronto site. Caucus members provided expertise from a ground level viewpoint that other (professional or academic) project members could not provide. As a caucus, we worked closely with the service team members to help them tailor their services to be as appropriate and helpful as possible. Caucus members advised the project on what the real issues were for the participants and how absolutely fundamental housing is to achieving better mental health. The development and execution of this research project is an example of how our unique model of participation offered us a way to contribute our knowledge and analysis from the perspective of people with lived experience, into the canon of academic work.

Mental Health, Homelessness, and Community Integration

Outlined in the literature is the importance of understanding the complicated implications of community integration for those with experiences of mental health and homelessness. Despite the best intentions of deinstitutionalization in North America, people with mental health diagnoses have entered into a period in which they are expected to succeed. In essence, they are expected to be free of symptoms before they can access normative adult activities like living independently, completing education, being gainfully employed, or having mutually caring relationships (Davidson et al., 2001). What Davidson et al. suggest is that current mental health services need to move beyond this way of approaching community integration in order to consider ways in which people can experience inclusion that is not contingent on the absence of symptoms.

Some authors would suggest that community integration includes practices that address basic needs essential to ensuring full participation of consumers in community life. Two such examples are supportive housing and accessible education

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[2] Working For Change (Formerly OCAB/the Ontario Council of Alternative Businesses) is an organization that advocates for employment opportunities for psychiatric consumer/survivors and emphasizes the importance of work in the lives of people who have been marginalized by poverty and mental health issues. Working For Change operates four Alternative Businesses (businesses operated entirely by consumer/survivor employees):

• The Raging Spoon Catering Company

• Out of This World Café and Espresso Bar

• Parkdale Green Thumb Enterprises

• Grassroots Research: Community-Based Research and Peer Research Consultants.

Working For Change also houses the Toronto Speakers Bureau, "Voices From the Street." Members of "Voices" provide public education on issues related to homelessness, mental health, and poverty, and seek to impact public policy in these areas.

(Bond, Salyers, Rollins, Rapp, & Zipple, 2004). While these authors mention that community integration often facilitates recovery, they recognize that for most people with mental health diagnoses, genuine community integration remains an unrealized promise. So, while people may be counted as "living in the community," research has historically reported them as leading lonely, isolated lives that lack social or recreational outlets (Carling, 1990; Segal & Aviram, 1978; Wong & Solomon, 2002).

It has become evident that much of the literature focuses on external indicators such as getting a job, being active in the community, or maintaining a household as the ultimate goal of integration. Doing so tends to gloss over the subjective journey of smaller connecting experiences that might be more readily noticeable before a clearer, larger picture of community integration is apparent.

Yanos, Stefanic, and Tesmberis (2011) found that people with mental health diagnoses living in independent housing experienced levels of community integration comparable to other community members. Different aspects related to the experience of the neighbourhood had significant impacts on the levels of community integration. So, the ways in which the different facets of the surrounding neighbourhood are experienced are, in many circumstances, integral to consider. For Granerud and Severinsson (2006) issues of fear, exclusion, loneliness, equality, and experiences of being neglected were major themes that stood out in their work on community integration. For others, meaningful reciprocal relationships, daytime activities, and occupational engagement were seen as important factors in people's experiences of community integration (Granereud & Severinsson, 2006; Dorer, Harries, & Marston, 2009).

When conceptualizing community integration, dimensions related to a broader sense of inclusion are often ignored in existing clinical, rehabilitative, and/or recovery paradigms. These dimensions involve experiences of social inclusion through friendship, feelings of worth connected to meaningful activities, and hopefulness regarding life experiences (Davidson et al., 2001). We suspect that these dimensions are underexplored due to the difficulty in linking them to tangible or measurable signs of improvement in community integration.

When looking at the idea of community integration, we often focus our sights on those who are meant to be "doing" the integrating. However, Pinfold (2000) reminds us that before we can understand the community as a positive space to be in, we have to consider the ways in which the different community members understand mental health experiences. In order for us as a society to work toward positive environments for people to integrate into, it is important to be aware of and address the stigmatizing and discriminatory views held by our society in regard to mental health and homelessness. For the caucus this means considering whose community are we integrating into.

Methods

At times traditional research devalues the insight and experiences of people with lived experience. Through our research project, as mostly non-academic people with lived experience, we maintain the value that as people with lived experience of

mental health, substance use, and homelessness, we can bring own expertise and analysis that is largely silenced and undervalued in academic literature.

In order to take advantage of experiential knowledge, we adopted an inductive research methodology inspired by grounded theory, which allowed for an openness in theoretical discovery. The qualitative data used were obtained from interviews and were analyzed using the grounded-theory approach in which we focused on our methods and began our data analysis in the absence of adopting any one particular theory (Charmaz, 2006). This allowed us to remain flexible in reflecting upon the developing narrative of community integration, which not only is in line with the values of community-driven research, but also ensures that this research highlights the voices and experiences of the project participants. Further, using a methodology that allows for a more open-ended and less structured application of methods was an approach to research that was accessible to our team members, who have had different exposure to and training in conducting research.

We began an open coding of the transcripts by marking up the data with a series of codes. Each transcript was coded by one of the caucus members and the Caucus coordinator as well as by the research consultant. Then, the codes were grouped into similar themes in order to bring together the individual work of the researchers into a collectively agreed-upon organization. Through a revisiting of the codes we were able to establish our final categories.

This research project uses secondary data analysis of a purposive sample of 18-month follow-up interviews selected through the use of the *community integration quantitative tool*. The use of this tool had a few impacts on the interviews that were ultimately included within this study. First of all, the community integration quantitative tool included interviews from participants who received housing from the At Home Project at the Toronto site as well as those in the treatment-as-usual group. In relation to our views of community integration as a complicated concept, including both groups in our analysis allowed us to consider a wide range of factors that impacted the experience of the research participants. However, we did not make distinctions between these two groups, as it was not found that the project participants discussed it as central to their experience of community integration. In order to explore both positive and negative factors that impact experiences of community integration, interviews were included that were flagged through the community integration quantitative tool as having low and high levels of community integration. A sample of 14 transcripts—7 with a rating of high integration levels and 7 with a rating of low integration levels—was reviewed for this project, based pragmatically on the timeline and the scope of the research project.

Findings

Engagement with the Community

Activities and interests. The participants' experiences of community integration were impacted by the different activities that were available. For instance, the first participant noted that "… there's a women's program, where you can do …

you can be a part of a group of yoga, cooking, whatever, which is a good thing." This included formally and informally organized activities at various centres such as drop-in centres, community centres, and social service agencies. Various participants mentioned being involved in programs that were of interest to them and that connected them with people with similar and/or shared backgrounds and experiences. As the second participant stated,

> Um, occasionally I will go to drop-in centres, just like to get a meal and, and be around people … once in awhile I will get together with a friend, we will go for coffee or we will just like maybe walk.

Many participants mentioned spending their time in the community volunteering at places like a food bank or Goodwill. Further, there were instances when participants discussed interests such as cooking and baking, which are often done in the home, yet can lead to taking part in community integration through engagement with things such as community meals. This can be seen when participant three said, "I like cooking for other people not just for myself, I like cooking."

However, participants also discussed the importance of having more than access to activities that are of interest to them. For instance, simply having things of interest—such as access to computers in public spaces—does not necessarily lead to meaningful integration into one's community. This was evident when our first participant commented: "This thing where I just like go to computers and stuff, I'm so bored. Like, uh, I like computers, but, uh, this thing where I'm not working and stuff, uh, I, I'm just really bored." This begins to complicate our understanding of the impacts of activities and interests on the community integration of the participants of the At Home/Chez Soi project. While different activities and interests were often talked about as a positive aspect of each participant's lives, taking part in activities and things of interest did not always link with the participants' positive experiences of community integration. Even when accessing public spaces in the community, some participants were left feeling bored, unfulfilled, and lonely.

Many people within the study mentioned their pets as being very significant in their daily lives. For instance, pets were discussed as helping people move out of a mindset where they only have to care for themselves. For multiple participants pets marked a turning point in their lives when they acted loving toward another being and found companionship in a new way. Pets offered both a purpose and a sense of responsibility for many, and for those with dogs the responsibility of walking their dog was a reason for getting out into the community. One participant even mentioned a shared connection with a fellow tenant based on their pets coming from the same litter.

Goals. The importance of having and attending to life goals, such as training, volunteering, and career development was a theme that showed up in many of the interviews with the participants of the project. As the fourth participant declared: "You know, I do want to like get into like some sort of programs, so I can at least get my life started, right." For some, this meant signing up for organized programs that were of interest or volunteering their time in work-like environments, which was demonstrated when the fifth participant said, "You know, even if I work three times

a week, and then volunteer, I, I, I think I you know … it's pretty good for me, because then I get to do a lot of things." Our sixth participant clearly outlined the importance of setting goals when stating:

> … look for a job, pick a course hopefully, so I am saving up some money to go to school.… Um, long term I don't know, hopefully I can find a career, so like, something that I can do like long term, something that I actually like doing.

For others, this was connected to access to school, learning new skills, or beginning (new) careers, as it was for the second participant: "I want to take some computer courses because, like, I don't know, I am computer illiterate and it's like, it's times that I learn, you know, because that's a whole world, you know." Whether it was through formal education and training or not, most of the participants talked about the importance of taking part in their surrounding community in a way that they described as meaningful. For many participants it was important to differentiate between the enjoyment they found in organized programming and their desire to be more independent and self-sufficient.

On the other hand, when attempting to reach specific goals, participants did not always indicate their experiences as positive. For example, the seventh participant said, "Well, I tried to go back to school … and that didn't work out, um, I felt too much of an overload." When the appropriate supports and/or accommodations were not set in place for certain project participants, attempts to go back to school or engage their time in ways they felt was meaningful turned out to be a negative experience. The very act of looking for jobs or deciding on which skills to learn was described by some as difficult based on their experiences of mental health. For one participant in particular, a lack of necessary ID limited their ability to volunteer their time or seek employment. This necessitates the consideration of the different systemic barriers that participants faced throughout the process of community integration. Whether at institutional or policy levels, it is necessary to assess what is systemically limiting the participants from having positive experiences of community integration.

For some, money was expressed as a significant barrier in access to education. For instance, one participant mentioned the difficulty they experienced in saving any money while trying to exist on Ontario Disability Support Program income assistance—which barely provided enough money for food and bills. For another participant, their parents were supportive, but they discussed the impacts of feeling like they had disappointed their parents too much to ask for further financial support. Not having completed life events such as finishing university or being married resulted in feelings of guilt. Further, it was noted that family could only be of so much help financially because of the fact that they had burdens of their own.

For those participants who were able to go back to school, it was sometimes experienced as frustrating and stressful. Feeling overloaded with work, one participant experienced feelings of stress and anxiety, which led them to drop out. The social setting in school was experienced as both positive and negative. Some participants talked about meeting friends and romantic partners in the programs that

they were enrolled in. However, one participant mentioned the difficulty they had in negotiating the different cliques that formed within their program.

It was evident that the participants' achievements did not always give them a sense of accomplishment. While they acknowledged the hard work it took for them to heal from past traumas, maintain housing, and develop new routines and relationships, there was a sense that was not enough. Many participants talked about the guilt they felt for not having completed education or other life markers that many use to measure success. One participant in particular felt that they had taken too long in their process and felt guilty that they did not have a better job and a better income.

Many participants talked about their desires to help other people and give back to their community. Reasons for this varied, some were motivated through a response to guilt, wanting to give back to balance out past criminal actions. Others wanted to help people as a way of extending the help they felt they received; they wanted people to experience the hope that positive change can happen. Further, some viewed the giving of help as a way of moving forward in their own lives—experiencing purpose and meaning from helping others when they are in need.

Community involvement. One way that the different participants talked about their level of community integration was through their varied involvement in community —whether it was geographical community or communities based on shared experiences and identities. For the fourth participant, community was mentioned as a place to go for support: " …like the gay community was really supportive, too…" Sometimes the project participants were integrating themselves into communities of people who shared similar experiences with mental health and/or homelessness, which was most evident when they took part in programs or centres that worked specifically with people from these shared experiences. An example of this was demonstrated when the eighth participant said, "…because I help them a lot too, when the cook is away, I cook, I always cook in the, in their kitchen." The ninth participant mentioned that going to drop-in centres was a way of connecting with people: "You talk you know, you talk to people, like you talk to your friends, like you can talk to your friends and you can talk to people in there." Other times they discussed the importance of communities, such as communities related to identities based on sexuality, cultural backgrounds, or gender, where they connected with people with other shared identities and experiences. This demonstrates the many different ways in which people with experiences of mental health and homelessness seek to form and engage with communities of people.

Relationships of all sorts were an important topic for many of the participants. For instance, some of the participants expressed the different reasons why they were not yet ready to begin or nurture relationships. For some, all of their efforts were focused on working through current and past life issues such as abuse, sexual assault, and drug use. Others mentioned the impact that their past experiences had on their ability to trust people now. One particular life event that is important to take note of is the exposure to losing friends—in very violent situations or through overdoses—and the implications this has on not wanting to or being able to emotionally connect with others.

Some of the participants talked about reasons for needing to deliberately end old relationships. Often, disconnecting with friends, when done by choice, was a way of cutting off ties to lifestyles that were seen as unproductive in relation to the participants' current life goals. However, friendships were also deliberately cut off based on feelings of embarrassment of living situations or inability to afford the commute to maintain the relationship in person.

Whether it was romantic relationships or friendships, many participants talked about the importance of being able to move into a place where they could care for somebody other than themselves. Many participants talked about both the challenges and positive aspects of romantic relationships. One participant noted a romantic relationship not working out because the other person's actions resulted in them losing their housing. On the other hand, many participants talked about romantic relationships as providing someone who could both understand their past as well as celebrate their new life changes.

Being involved in the community around them had significant impacts on one participant's life. After getting to know the other tenants in their building, they described their natural inclination to act as a mediator between the superintendent and the other tenants. Eventually, this participant was asked by those around them to run as a Unit Tenant Representative for their local community in their building. The participant talked about how this process of engaging with their surrounding community got them interested in what is happening in politics and their city at large.

Experiences of the Surrounding Environment

Impacts of housing. Many of the participants talked about how their housing was more than just a place to live. For some, housing referred to safety, security, and a place to get away. The eighth participant stated,

> It's not just a house for me or an apartment, it's a home and I love it there. I love the security it gives me. You know, sense of security and sense of, now this is my own apartment as long as I pay the rent.

Housing was also referred to by some as giving a sense of ownership, a place of beauty and something to take pride in. Further, for some, it provided them with a feeling of self-worth and was a symbol of them being a functioning member of society. In terms of community integration, different participants talked about how their housing connected them to the area around them, both to the surrounding geographical neighbourhood and to the people in the surrounding living units. When participants had friends living close by that they trusted they talked about the mutual support and the importance this had in their own healing from past traumas.

However, not all of the participants had positive experiences with their housing. For instance, multiple participants talked about the lack of sanitary living conditions or maintenance of their housing. The ninth participant discussed how "there are things that still need to be done. I told him to fix the house. Even have roaches in my apartment and they were supposed to go spray." Having negative experiences with housing impacted the participants' desire to stay in (and connected

to) their surrounding community. This indicates that access to housing in and of itself was not enough. Participants noted the importance of living somewhere where they had positive experiences. This was linked to the upkeep of the housing, their relationships with surrounding neighbours, and feelings of safety and belonging.[3]

Many participants talked about the different ways in which housing helped connect them with other people. For instance, having housing provided people with a place to host friends and/or family. This meant more contact with people such as family members, as they expressed the importance of the ability to invite people over and cook for them. It was expressed that it is much easier to stay in touch with people when you are living in the same place for an extended period of time.

However, some of the participants mentioned that their discontent with their living situation was the reason they did not see friends and/or family. This could be because of the location of the housing, or the lifestyles of the other people they lived with. Some participants were still hoping to improve their living situations and used that as a reason to avoid contact with friends and/or family.

Positive and negative experiences of neighbourhood. Project participants had both positive and negative experiences of living in their neighbourhoods. For instance, in multiple circumstances participants noted that they were happy with their housing yet unhappy with the neighbourhood they were living in. Some participants were particularly concerned with the violence and drugs that were present in their neighbourhoods. In some instances hate crimes had a direct impact on their safety, such as having discriminatory language written on the doors of their housing. Within their interview the first participant shared, "Uh, yeah, yeah that's why I'm, another reason I am moving so, yeah my, I've had uh, fag written over my door, on my windows."

Participants also had positive experiences with the neighbourhoods they lived in. Participants discussed how accessibility is important for community integration and gave examples of feeling positively about having access to amenities such as shopping, transit and public services such as libraries. Having good relationships with their neighbours and feeling safe in the area where they live were also important factors in whether or not the participants had positive experiences in their neighbourhoods. In particular, one participant talked about the fulfillment they found when helping out their neighbours. By shoveling the driveways and walkways of their neighbour as well as taking out their garbage and recycling, they built what they described as friendships with those who lived around them.

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[3] It is important to note that the program did give the participants the choice to move and that no participant was forced to stay in any one particular place of housing. However, various participants alluded to different reasons why staying in less than ideal housing was the preferred option.

Concluding Thoughts

As many of the participants of the project discussed, community integration—or lack thereof—is significant in the lives of the project participants. As we saw throughout the different interviews, community integration was a process that each participant approached differently. For instance, some participants were still processing the newness of housing and the stability that it brings to life. Others were more focused on working through past experiences of trauma. We noticed that integration could be understood as how people organize their lives, functioning in a hostile society, becoming self-sufficient and/or being more independent. What was most evident to us throughout the transcripts was the importance of considering what needs to change in society in order to facilitate the community integration of those who have experiences with mental health and homelessness.

As a group we feel that one of the limitations of our study directly relates to the use of secondary data. The researchers felt that if they had had the time to complete a study with questions more purposely focused on experiences of community integration, the data would have yielded richer content. This limitation impacted our ability to clearly define community integration. Many project participants discussed integration as being about functioning, stability, self-sufficiency, and acceptance. However, using secondary data left us with an incomplete picture of what community integration means for the project participants.

What became evident to us was how the past experiences of the participants had lasting impacts on their present-day lives. Participants' lives did not change completely as a direct result of receiving housing or tailored services. Experiences of past traumas, substance use, the legal system, disability, food, and money security were recurrent themes of the participants' lives, and in many circumstances were still discussed as places of struggle or difficulty. However, themes of self-determination, independence, empowerment, integration, and inclusion were themes that offered places of hope. At the point that our study was complete, we thought that going forward, it was important to continue to support the participants through their journeys, however complicated and non-linear they may be.

Now, as we reflect on the work that has been done throughout the project we think that it is important to open up this complicated dialogue for those who wish to approach mental health services with a housing-first approach. Particularly, we hope that people consider the implications of how those seeking services are experiencing engagement within their larger community and how they experience the environments into which they are expected to integrate. Also, we urge helping professionals to focus on ways in which empowerment can be supported and to respect the importance of the development of relationships in the process of community integration. Finally, we believe that more work needs to be done to look at the significant impact that larger systems and policies have on the lives of people who experience mental health and homelessness and how they might create barriers of access to successful community integration.

References

Bond, G. R., Salyers, M. P., Rollins, A. L., Rapp, C. A., & Zipple, A. M. (2004). How evidence-based practices contribute to community integration. *Community Mental Health Journal, 40*(6), 569–588.

Carling, P. J. (1990). Major mental illness, housing, and supports: The promise of community integration. *American Psychologist, 45*(8)*,* 970–975.

Charmaz, K. (2006). *Constructing grounded theory: A practical guide through qualitative analysis.* Thousand Oaks, CA: Sage Publications.

Davidson, L., Stayner, D., Nickou, C., Styron, Rowe, M., & Chinman, M. (2001). Simply to be let in: Inclusion as a basis for recovery. *Psychiatric Rehabilitation Journal*, *24*(4), 375–388.

Dorer, G., Harries, P., & Marston, L. (2009). Measuring social inclusion: A staff survey of mental health service users' participation in community occupations. *British Journal of Occupational Therapy*, *72*(12), 520–530.

Granerud, A., & Severinsson, E. (2006). The struggle for social integration in the community—The experiences of people with mental health problems. *Journal of Psychiatric and Mental Health Nursing, 13,* 288–293.

Pinfold, V. (2000). Building up safe havens … all around the world: Users' experiences of living in the community with mental health problems. *Health & Place*, *6,* 201–212.

Segal, S. P., & Aviram, U. (1978). The mentally ill in community-based sheltered care: A study of community care and social integration. New York, NY: Wiley-Interscience.

Wong, Y. L. I., & Solomon, P. L. (2002). Community integration of persons with psychiatric disabilities in supportive independent housing: A conceptual model and methodological considerations. *Mental Health Services Research, 4, 13–28.*

Yanos, P. T., Stefanic, A., & Tsemberis, S. (2011). Psychological community integration among people with psychiatric disabilities and nondisabled community members. *Journal of Community Psychology, 39*(4) 390–401.