



CANADIAN
MENTAL HEALTH
ASSOCIATION

Edmonton Region

Final Research Report:

**Availability of Housing for People with Mental Illness
in the City of Edmonton: Supported and Non-Supported**

Presented to:

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Introduction

Access to housing has always been a challenge for people living with mental illness. Finding housing that meets the range of needs of a person living with mental illness is an even greater challenge. Canadian Mental Health Association – Edmonton Region (CMHA-ER) has been providing housing for people with persistent mental illness for more than 35 years. CMHA-ER manages and owns five buildings with 104 apartments¹. All of these apartments are self-contained units that promote independent living. Support services are not provided as part of the housing arrangement. Despite the lack of support services, CMHA-ER apartments are always at capacity and a wait list of interested applicants is kept and maintained.

While independent living is appropriate for many people living with mental illness, it is not appropriate for all. Some people need regular and daily supports to maintain good mental health. These supports can include assistance with medication, access to healthy and nutritious meals, house cleaning assistance, and support to ensure appointments with doctors and therapists are kept. CMHA-ER receives regular requests from clients and their family members or support workers who do not know where to find appropriate housing and meaningful support services – or even where to start looking. The organization is acutely aware of the need for a housing inventory that will assist people in finding suitable housing in the city of Edmonton that meets the specific needs of individuals living with mental illness.

Previous Studies and Plans

In April 2004, the Alberta Mental Health Board released A Provincial Mental Health Plan² that identified safe and supportive housing among the top priorities for expanding access to services and supports and building community capacity to promote mental health and well-being. Specifically, the provincial plan called for improved access to an appropriate range of supportive housing/living options for clients with severe and persistent mental health problems.

¹ Refer to Appendix 1 for more information about Canadian Mental Health Association and its involvement in housing for people living with mental illness.

² Provincial Mental Health Planning Project. 2004. *Advancing the Mental Health Agenda: A Provincial Mental Health Plan for Alberta*. Edmonton, AB: Alberta Mental Health Board.

In 2005, then-Capital Health Regional Mental Health Program responded to the provincial plan by consulting with over 600 stakeholders to identify ways to strengthen the integrated community-based and tertiary care services available to people living with mental illness. The resulting plan, *Roadmap for the Future: Capital Health Plan for Regional Mental Health Program Delivery 2005-2008*,³ set out priority areas for action to respond to population needs and service gaps. The plan identified the following gaps in housing for people living with mental illness:

- Lack of affordable housing for patients discharged from hospital.
- Lack of affordable housing *in general* for people living with mental illness.
- Lack of supportive housing and living options for clients with severe and persistent mental illness.

To address these gaps, the plan made the following recommendations:

- Work with supportive living partners and others to increase the range, supply and location of housing options for people living with mental illness.
- Develop centralized access to mental health housing services so individuals are comprehensively assessed and matched to housing and support needs.

In the same year, the Edmonton Joint Planning Committee on Housing, in the Edmonton Community Plan on Housing and Support Services 2005-2009,⁴ identified gaps in housing for people living with mental illness and addictions (dual diagnosis), people living in institutions and people living with mental illness. In general, the plan said “significantly more housing and support services are required at all levels to address homelessness and affordable housing issues and to prevent homelessness among those at risk. It also (recognized that) efforts should be concentrated to increase the supply of housing and services that provide longer-term solutions.”⁵ Specifically, the plan recommended the construction of 1,300 units of long-term supportive housing units.

³ Capital Health Regional Mental Health Program. 2005. *Roadmap for the Future: Capital Health Plan for Regional Mental Health Program Delivery*. Edmonton, AB: Capital Health.

⁴ Edmonton Joint Planning Committee on Housing. 2005. *Edmonton Community Plan on Housing and Support Services 2005-2009*. Edmonton, AB: EJPCOH.

⁵ Ibid, 1.

Finally, in March 2009, the Government of Alberta approved a 10-year strategic plan to end homelessness in Alberta by 2019. The plan takes a “Housing First” approach that would provide immediate housing along with client-centred support services, including mental health services and services for people with dual diagnosis.

Purpose of the Study

In September 2009, CMHA-ER initiated a study to: 1) identify specific gaps in housing for people living with mental illness and 2) develop a practical inventory of appropriate supportive and non-supportive housing in the city of Edmonton that could be an important resource for clients, family members, support workers and community agencies. The study was funded by Homeward Trust and led by CMHA-ER Housing Program staff.⁶

The study was premised on the understanding that different people have substantially different housing needs. For that reason, a simple listing of available housing units would not be sufficient to meet the needs of referral agencies, families and individuals looking for appropriate housing. This study, therefore, sought to categorize housing stock by type, including eligibility (i.e. age, gender), type and level of supports and general information (location, cost, etc.). The final housing inventory is available from CHMA-ER.

The purpose of this report is to present the study methodology and report results related to the first purpose, that is, to identify gaps in housing and related services for people living with mental illness.

Methodology

Primary data collection was carried out by the research team through one-on-one conversations with individuals and agency representatives in face-to-face or telephone interviews. A set of interview questions⁷ was used to collect relevant and consistent information across all interviews. Where appropriate, the interviewer had the flexibility to probe for additional

⁶ The research team consisted of Perla Ben-Zvi and Gail Haynes, staff in the CMHA-ER Housing Program.

⁷ Refer to Appendix 2 for a copy of interview questions.

information or more detailed responses. A total of 120 professionals, agencies, group homes and private landlords were contacted and 117 interviews completed.⁸

A contact list of potential respondents was developed through a multi-prong strategy. Initially, the research team contacted all agencies in Edmonton known to be housing providers and asked them to provide names and contact information of other housing providers. The team also asked social workers in hospital psychiatric units and relevant Alberta Health Services staff to identify housing providers to which they referred patients. In addition, the team conducted web research and reviewed past and present CMHA-ER tenant applicant wait lists to see where applicants were living at the time of application. Recruitment notices⁹ were placed in the classified advertising section of daily and weekly newspapers¹⁰ and two brief articles/recruitment notices were placed in the Edmonton Apartment Association Newsletter.¹¹ Finally, interview respondents were asked to identify any agencies or organizations, they knew, that provide housing for people living with mental illness.

In addition to the interviews completed for the purpose of developing an inventory of housing for people living with mental illness, mental health service providers and professionals who deal with housing issues in Edmonton were contacted and asked to identify any current gaps in the system. Their responses were collated and distributed within the respondent group for validation and further input.

Results

There was a widespread agreement among mental health service providers and housing professionals that Edmonton does not have sufficient housing stock to meet the needs of people living with mental illness. Specifically, the following gaps were identified:

1. Housing for people with a dual diagnosis, this is, housing that provides treatment for addictions (substance use and gambling) and treatment or supports that address the mental

⁸ See Appendix 3 for a list of individuals and agencies interviewed for this study.

⁹ See Appendix 4 for sample advertising copy.

¹⁰ Edmonton Examiner, Metro and See Magazine

¹¹ See Appendix 5 for EAA newsletter articles.

health needs of tenants. Currently, there are only two housing options in Edmonton for people with a dual diagnosis: McDougall House/AADAC and Cunningham Place.

2. Housing for people with concurrent disorders, providing treatment for a variety of needs associated with more than one diagnosis, including brain injuries, physical disabilities, developmental disabilities and mental illness.
3. Transitional housing that allows for gradual decrease in support until the tenant's life skills and community living skills reach a point where the tenant is able to live independently. Such supports might include initial and ongoing assessment of skills and stability, assistance in finding appropriate long-term housing and assistance with moving. Currently, there are only two housing options in Edmonton that are specifically designated as transitional housing: YMCA and House Next Door.
4. Housing provided by Alberta Health Services for people under 65 years of age living with mental illness or brain injury. Currently, Alberta Health Services housing supports only those over 65 years of age.
5. Structured housing for young adults (ages 18 to 25).
6. More housing options for people who require support in between custodial care (full support) and independent support.
7. More long term housing for women in rural settings. Currently, Gunn Centre is for men only.
8. More housing that provides minimal supports, such as cleaning and cooking, that will help to develop these skill sets.
9. Structured supportive housing for people with chronic mental illness when they are discharged from hospital.

10. More housing located close to amenities and mental health services (e.g. shopping centres, grocery stores, doctors, groups, etc.).
11. More affordable housing that is located in safe parts of the city for people under the age of 65 with low incomes.
12. A comprehensive inventory of group homes.

In addition to gaps in housing, respondents identified a number of other gaps in associated support services. Specifically, the following gaps were identified:

1. More group homes that have skilled and knowledgeable staff, trained to deal with mental health needs in a home setting. This includes staff trained to assist clients with self harm reduction, aggression/anger management skills, communication skills, anxiety and relaxation techniques, social skills (including group dynamics and difficulties that arise among clients living in the house), Dialectic Behaviour Training for those with Borderline Personality Disorders, and structured activities that model relationship building.
2. More outreach support and outreach support that is available in the evenings or weekends to assist those clients that work, volunteer or attend programs during the day.
3. More independent living support workers.
4. Temporary support for clients who are hospitalized, to prevent them from losing their housing. Support could include paying the rent and bills, and caring for pets and plants.
5. More programs that teach independent living skills for people with mental health issues.
6. Education for landlords/owners about:
 - Resources available in their community for their clients/residents.
 - Hoarding behaviour and how to support tenants who hoard.

- What constitutes “supportive” housing and building supportive relationships with tenants.
7. A central system and process to assess the housing needs of people living with mental illness and to help them decide where they fit on the continuum of housing supports.

Conclusion

This study echoed previous studies done by the Alberta Mental Health Board, then-Capital Health Services, Edmonton Joint Planning Committee on Housing and, most recently, the Government of Alberta in finding significant gaps in the housing stock for people with special needs, including those living with mental illness. The gaps identified prior to 2004 and in subsequent studies persist, with a continuing lack of affordable, supportive, transitional and long-term housing for people in Edmonton who are living with mental illness.

The creation of a housing inventory for this population is an important first step to providing improved access to appropriate housing and supports but there is a real need for *real* housing! The housing gaps identified in this study need to be prioritized and the actual need (i.e. number of units) quantified, in order to develop a plan of action. The contact list developed for this study provides a good starting point for collaborative planning by housing providers, mental health support workers, referral agencies and other stakeholders. While it is necessary to align this planning with broader community planning on housing and homelessness, it is also necessary to recognize the unique housing needs of people living with mental illness and to take specific actions to meet those needs.

This report, and the associated housing inventory, will help housing providers and referral agencies match the right type of housing to the specific needs of those living with mental illness. It will also provide information to all orders of government and other funding organizations about the type of housing that is in high need in the Edmonton community. CMHA-ER will actively distribute this report and housing inventory to housing providers and referral agencies in the city of Edmonton.¹²

¹² This report will be placed on the CMHA-ER website, distributed to members of Edmonton Coalition on Housing and Homelessness (ECOHH), housing providers listed in the inventory, and to the member agencies of the Alliance

Limitations

Although 117 interviews were completed, much of the information collected applied to seniors' housing or to the needs of people with developmental disabilities, and did not relate specifically to housing for people living with mental illness. Further, notices placed in daily and weekly newspapers resulted in several calls by private owners who wanted to rent rooms to people living with mental illness. These people were not added to the inventory list as they did not specialize in providing housing for people living with mental illness. Most of these private owners were also looking for government funding to assist them in maintaining their current housing stock or accessing more housing stock. There was also some hesitation on the part of those who participated in the study to release information to the research team. Some respondents directed the team to public information listed on agency websites.

on Mental Illness and Mental Health. All will be encouraged to share the report. Presentations about the research will be made upon request.

Appendix 1

What is Canadian Mental Health Association-Edmonton Region?

Canadian Mental Health Association-Edmonton Region (CMHA – ER) is a non-profit volunteer agency. It functions as a community centre promoting mental health. It works in partnership with other community agencies to educate about mental health and illness, to advocate for better conditions in the community and to help people build strong supports for community life. This is accomplished through social action, public education, direct service programs, housing and other special agency projects.

The agency's Housing Program represents one of the ways in which care and support has been extended to people with mental illness.

CMHA – ER has been involved in special needs housing in Edmonton since 1967 when Imrie House was developed as a halfway house for women discharged from Alberta Hospital Edmonton. Wood Manor, an eight-unit (14 bed) rehabilitation housing development, was added to the agency's portfolio in 1977 and Citrus Court, a twenty-seven unit (26 bed) rehabilitation housing development was added in 1982. In 1992, in response to best practice trends in housing and consumer demands, the agency made a transition from rehabilitation housing to independent housing. Independent housing has resulted in clients being able to choose the type of support they require from any service provider in the city.

In 1988, in response to increasing pressure to respond to the need for safe and affordable community housing for people with mental illnesses, the agency signed an operating agreement with Alberta Municipal Affairs for Santa Rosa I and II. Under the terms of this agreement, the agency was able to house tenants with a variety of mental illnesses and other social needs, thus increasing opportunities for integrating people with a mental illness into the community in which they live. On July 1, 1996 CMHA - ER assumed the management responsibilities of Place 103 from the YWCA. In 2000, after renovations to Wood Manor, an additional one (1) unit was added to the housing portfolio, bringing CMHA-ER total housing units to one hundred four (104).

The need for safe and affordable housing units for people with mental illness has been apparent for many years. Starting in 1994 with the Alberta Mental Health Strategic Plan, and almost every year after that, there has been a document that continues to emphasize the need of social housing for people with mental health issues.

Appendix 2

Interview Questions

Organization/Agency Name:

Address

Contact Person

Does org./agency provide housing for people with mental illness?

Ages of population served

Gender of population served

How many units/beds?

Of these units/beds are a certain amount allocated for those with mental illness?

How many?

If not, what is the focus of the housing program (disability served)?

If not, has agency/org. thought of offering housing for people with mental illness?

Does org./agency provide support for tenants?

Are the supports on site?

What type of supports are provided?

Are the supports available 24 hours?

Other programs/services offered or suggested by agency/org for the tenants?

If so, what kind?

If support not provided, does tenant need to have support in place prior to placement?

If so, what type of support needs to be in place?

Rent per unit

Does rent include Room & Board?

Does rent include power/water/heat?

Other conditions of tenancy, i.e. Supports/drug and/or alcohol free

Do you know of other agency/org. that offer housing for people with mental illness?

Who?

Contact?

Appendix 3

Individuals and Agencies Interviewed for this Study

Anne Kunysh	Excel Resources (Grand Manor)
AB Easter Seals Society	Family Connections
Abram Matthews	Flovy Furnish
ACCM Benevolent Association	Garneau United Assisted Living Place
Alberta Mental Health Approved Homes	GEF
All Seniors Care Living Centres	Giacinta Destefants
Amisk Housing Assoc.	Good Samaritan
Angie Jensen	Alan Goshko
Ansgar Lutheran Housing	Grace Manor (Salvation Army)
Aspire Group Home	Grace Martinez
Aurora	Grace Pottinger
Austin Mardon	Harmony Senior Citizens Agency
Avenwood Seniors Centre	Highlands and District Housing Committee
Bateman Manor	Home Ed
Bent Arrow Healing Society	Honk Log Mgmt Services
Bethany Ritchie Mgmt. Agency	House Next Door Society
Bramel Homes	Imelda (Approved Home)
Caleb Manor	In&Out Home Care Rehab
Canterbury Foundation	Inner City Youth Housing Project
Capital Care Group-Lynnwood	Innovative Housing Society of
Catholic Social Services	Canada(Gravelle&Villa Marguerite)
CGM Senior Mgmt. Agency	Julie Kallal
Chantelle Mgmt Ltd.	John Howard Society
Chartwell Master Care Corp.	La Salle Housing Society
Chateau Mission Court	La Societe Des Manoirs St. Joachim et St.
Chimo Youth Retreat Centre	Thomas
Chinese Seniors Lodge	L'Arche Association
Christian Senior Citizens Homes	Larry Trinh
Country Cottage	Leduc Foundation
Dana's Family Home Care-Danuta	Lina Ng
Malczewski	Linda Keller
Debbie Halverson (Capital Health)	Lolitta Aranzaso
Dnipro-Selo Housing Society	Love & Care Group Home
E4C	Lynn Rath
Edmonton Apartment Association	Mavis Ricketts
Edmonton Inner City Housing Society	McDougall House
Edmonton Integrated Services	McLeod, Ken & Maxine
Edmonton People In Need Shelter Society	McMann Youth and Family
Eileen/Trevor Moffett	Mennonite Centre for Newcomers
Elizabeth Fry Society	Meridian Foundation
Ester Ens	Mervyn Johnson
Everglades	Metis Capital Housing Corp.

Mildred Nault
Mirka Care Services
Monica Rogers
Montgomery Legion Place
Native Counselling Services-Cunningham
Place
New Start Group Home
North Ridge Lodge
Northern AB. Cooperative Housing Assoc.
Norwood Seniors Housing Association
Open Arms Family Care Ltd.
Operation Friendship
Oxford House
Pat Kalynchuk
Pauline Glucke
Pioneer Place Seniors
Rebooth Christian Ministries Foundation

Robin Hood
Rosary Hall
Safe Haven Seara Homes
Scizophrenia Society
Sharon Setera
Shepards Care Foundation
Stella & Scott McDonald
Strathcona Mgmt Agency
The Salvation Army
Touchmark @ Wedgewood
Urban Manor Housing
Urban Native Housing Registry
Winnifred Stewart
Woodvale Group Home
YMCA
Youth Emergency Shelter

Appendix 4

Copy for Classified Advertisement

CANADIAN MENTAL HEALTH ASSOCIATION
Edmonton Region

RESEARCH PROJECT - Housing Inventory

Looking for landlords who
house people with mental
illness. Can be in
a group home, apt. suite,
R&B or rooming house.
Contact Gail Haynes @ 780-414-6300

Appendix 5

Edmonton Apartment Association Newsletter Articles

RESEARCH PROJECT INVENTORY

The Canadian Mental Health Association – Edmonton Region (CMHA-ER) is undertaking a research project that will attempt to address the long-standing need in the community to identify the availability of different types of housing and housing with supports for people with mental illness.

The expected outcome of the project will be an inventory for tenants, supports and the mental health community with information that will be used to find the right accommodation for the tenant.

If you are a landlord in Edmonton or the surrounding area that is renting or is willing to rent to a tenant, who has supports in place, with a mental health issue please contact:

Gail Haynes
Housing Program Assistant
Canadian Mental Health Association - Edmonton Region
#800, 10045-111 street
Edmonton, AB T5K 2M5
780-414-6300

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LANDLORD RECRUITMENT PROGRAM

The Housing Support Services Hub is looking for private landlords to be a part of their LANDLORD RECRUITMENT PROGRAM. This program will provide individuals with a list of potential landlords within the Edmonton area.

As part of the program, the landlord is assured that the rent will be paid on time through various government programs and the tenant will have all the necessary supports prior to moving in and during tenancy.

For more information on this program or to have your information added to the list, please contact:

Greg Farrants
Landlord Recruiter and Support Coordinator
Housing Support Services HUB
10209-97 Street, Suite 201
Edmonton, AB T5J 0L6
Phone: 780-429-5018
Cell: 780-239-3331
Fax: 780-429-5619

E-mail: landlordsupport@hubhousing.ab.ca.