

SHARE! Collaborative Housing is Evidence Based

SHARE! Collaborative Housing is an easily replicable, cost-effective program providing affordable, permanent supportive housing to disabled people in single-family houses. People with similar issues, such as vets, mental health consumers, etc. live like college roommates in the house which is fully furnished and equipped.

1. Housing First is a best practice

- a. SHARE! Collaborative Housing moves people into housing within hours of their first phone call for housing
- b. United States Interagency Council on Homelessness (USICH) endorses Housing First as a best practice
- c. Homeless mental health consumers and/or substance abusers are able to maintain housing without treatment (Tsemberis 2004)

2. A better neighborhood is a better quality of life

- a. Moving a person into a better neighborhood has the health equivalent of increasing their income by \$12,000 (Ludwig 2012)
- b. Moves people out of poverty – neighborhoods zoned for single family use have lower poverty and crime levels
- c. People in collaborative housing do not live in areas with drugs, prostitution and crime
- d. “Middle-class” lifestyle inspires hope, motivation to change

3. Social networks improve outcomes

- a. Neighbors who live next to a collaborative house take on supportive role to those in the house (Jason 2005)
- b. 40 percent of health and mental health wellness is determined by a person having adequate community support (Kindig 2014)
- c. Community support is posited to be the reason that people in developing countries recover from schizophrenia at nearly twice the rate that they do in developed countries (WHO 2001)
- d. Tangible social support is a major factor in determining whether someone with bipolar disorder is able to work and support themselves. Medication, doctor, symptoms, and whether people took their medication, were **not** predictors of successful employment (Canadian Health Reports 2004)
- e. Social relationships reduce mortality from all causes by 50 percent (Holt-Lunstad 2010)

4. Self-help support groups propel people in recovery

- a. Reduce the hospitalization of mental health consumers (Klein 1998; Landers 2011)
- b. Cut the rehospitalization of mental health consumers by 50 percent (Edmunson 1982; Galanter 1988; Kennedy 1990; Klein 1998; Kurtz 1988; NDMDA 1999; Raiff 1984)
- c. Reduce the number of days mental health consumers spent in the hospital by one third; significantly reduce the amount of medication needed to treat mental health issues (Edmunson 1982; Kennedy 1990; Raiff 1984)
- d. Reduce drug and alcohol abuse (Humphreys 2001; Kingree 2000; McAuliffe 1990; Pisani 1993; Watson 1997)
- e. Reduce criminal behavior (McAuliffe 1990; Watson 1997)
- f. Increase family resources and reduce family stress (Cook 1999)
- g. Increase consumer satisfaction (Hodges 2003; NDMDA 1999)
- h. Increase social networks which improve outcomes (Holt-Lunstad 2010; Polcin 2010)

- i. 70 percent of people in SHARE! Collaborative Housing regularly attend self-help support groups
5. **Outcomes improved with Peer Bridgers**—Peer staff, in sustained recovery, who have lived experience with mental health, trauma &/or substance abuse
 - a. Reduce crisis events (Klein 1998; Landers 2011)
 - b. Improve physical and emotional well-being (Klein 1998)
 - c. Empower (Rodgers & Teague 2007; Campbell 2003)
 - d. Increase social network (Brown 2009; Nelson 2006)
6. **Employment is more likely**
 - a. 26 percent of people with severe mental health issues in SHARE! Collaborative Housing get jobs within one year as shown in the MHSA Housing Trust Fund dashboard
 - b. People who receive Peer Services are more likely to become employed (Brown 2009; Hodges 2002)
7. **House structure supports independence**
 - a. Self-governing (Jason 2003; Tsemberis 2003)
 - b. The absence of professional staff empowers people to develop their own rules and policies, learn to problem solve and assume positions of leadership (Jason 2003)
 - c. Stay as little or as long as needed
 - d. Shared housing mimics how Americans start an independent life, e.g. college roommates, moving out from Mom's and Dad's
 - e. Two people per bedroom increases accountability (Jason & Ferrari 2010; Oxford House 2014) and makes the whole house available to everyone for living
8. **Financial self-sufficiency empowers residents**
 - a. as people live without subsidies, they see that they have the resources they need to pursue a self-sufficient life
 - b. Increases empowerment
 - c. Increases self-esteem
9. **Stigma busting**
 - a. Next door neighbors have more favorable attitudes and opinions of people in recovery (Jason 2005)
 - b. People who know a person with mental health issues have less stigma (Crisp 2005)
10. **No NIMBY** (Not In My Backyard)
 - a. SHARE! Collaborative Housing has had no NIMBY experiences in more than 100 houses.
 - b. The US Supreme Court ruled in *City of Edmonds v. Oxford House, Inc.* that the Americans with Disabilities Act allows a family of disabled people to live anywhere a single family may live
 - c. No increase in crime in neighborhoods with collaborative housing (Deaner 2009)
 - d. No decrease in home values (Council of Planning Librarians 1997; Ferrari 2006; American Planning Association 1997)
 - e. \$185,000 to \$200,000 is the cost per unit of NIMBY in project-based permanent supportive housing in California (Mayberg 2006)—SHARE! Collaborative Housing has no NIMBY costs

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